Smiles Pediatric Dentistry & Orthodontics

RBA OF PEDIATRIC PROCEDURES

My child's individual treatment plan has been fully explained to me including all the possible procedures that may be necessary during the dental visit. I have been shown examples and images of the proposed care in addition to models that demonstrate what the final restorations could look like. I understand that changes may be made to the original treatment plan and that I will be informed of these changes. The risks, benefits and alternatives (RBA) of the following procedures have been clearly explained to me. I understand that my child may undergo some or all the listed procedures.

Local anesthesia:

	Anesthetizing agents are infiltrated into a small area or injected as a nerve block directly into a larger area of the mouth with the intent of numbing the area to receive dental treatment.
<u>Risks:</u>	Include but are not limited to: Lasting numbness up to 2-3 hours after the procedure (rarely, it can last longer or be permanent if nerve damage occurs), infection or swelling at the injection site, allergic reactions, dizziness, nausea, vomiting, biting of tongue, lip or cheek can occur.
<u>Benefits:</u> Alternatives:	Pain is lessened or eliminated during the dental procedure. Depending on the situation, observation or bypassing the local anesthetic could be alternative options.
<u>Sealants:</u>	A tooth-colored dental material is used to seal (plug) the deep grooves on the chewing surfaces of molar teeth (or any deep groove found on any tooth surface) to prevent tooth decay from starting in these areas. Primary and permanent teeth can be treated with this procedure. The material is placed then hardened with a special dental curing light.
<u>Risks:</u>	Include but are not limited to: Minor chewing surface changes (occlusal changes) which may require adjustments, loss of sealant if not checked periodically rendering the tooth susceptible to dental decay again.
<u>Benefits:</u> Alternatives:	Reduction of caries. Could include observation in certain circumstances.

Composite restorations:

	A tooth-colored dental restorative material is used to restore the tooth surfaces
	that were damaged by the caries process (cavity). These materials are placed as a soft
	material initially but are then hardened via a special dental curing light.
<u>Risks:</u>	Include but are not limited to: Preparing the tooth could result in tooth nerve irritation
	(called the pulp of the tooth) causing sensitivity to heat/cold. Such teeth could require
	further root canal treatment. The fillings can alter the way the teeth fit together resulting in
	bite changes (occlusal changes) that could require adjustments.
Benefits:	Restoration of caries with cosmetic appearance.
<u>Alternatives:</u>	Depending on the situation, I understand that alternatives (such as a glass ionomer
	restoration) may exist and have been discussed with me.
Pulpotomv:	A root canal treatment for a primary tooth is needed to treat and preserve a tooth with
	deep decay that goes beyond the hard shell of the tooth (enamel/dentin) and involves the
	pulp of the tooth (nerve). Treatment involves creating an opening through the top of the
	tooth and removing part or all of the tooth's infected nerve. Medications can be used to
	help sterilize the inside of the tooth and to prevent further infection.
<u>Risks:</u>	Include but are not limited to: Pain and discomfort after the treatment, continuation of the
	inflammation, possible inability to restore the remainder of the tooth without placing a
	crown, reactions to the medications used, possible need for extraction.
Benefits:	Avoiding extraction and space maintenance appliances along with relief of pain and
	preserving the tooth for the longest time possible.
Alternatives:	Depending on the situation, I understand that alternatives (such as an extraction or
	indirect pulp treatment) may exist and have been discussed with me.

Pediatric dental crown:

<u>Risks:</u>	Unlike adult crowns, pediatric crowns come ready made and are not created individually by a lab. They are used to restore function and sometimes esthetics to severely broken down teeth. They come in either the stainless steel type (usually used for back teeth) or the cosmetic type used for the front teeth or the more visible back teeth. Placing them necessitates preparing the tooth surface to receive the crown and then selecting the best fitting size and cementing it onto the remaining tooth structure. Include but are not limited to: Preparing the tooth could result in tooth nerve irritation (called the pulp of the tooth) causing sensitivity to heat/cold. Such teeth could require further root canal treatment. The crowns can alter the way the teeth fit together resulting in bite changes (occlusal changes) that could require adjustments, loss of the crown, gingival (gum line) irritation. Durability compared to other options
<u>Alternatives:</u>	Depending on the situation, I understand that alternatives (such as placing a large composite filling) may exist and have been discussed with me.
Extractions:	This procedure involves removing one or more teeth. Depending on their condition, this may require sectioning the teeth or trimming of adjacent bone or soft tissues. If unexpected difficulties occur during the procedure, we may need to refer your child to an oral surgeon.
<u>Risks:</u>	Include but are not limited to: Pain, swelling or infection at the extraction site. fractures in the adjacent bone or damage to adjacent teeth, remaining tooth remnants which can be left but could cause infection at times.
Benefits:	Removal of infected tissue from the mouth of your child which can affect their general
<u>Alternatives:</u>	Depending on the situation, I understand that alternatives (such as trying to preserve the tooth) may exist and have been discussed with me.
<u>Space mainta</u>	ainer: This is a special appliance designed to keep your child's teeth from shifting after an extraction has been completed. A S/M can ensure that the necessary space for future permanent teeth is preserved. There are two types of S/M. A simple type which can be fabricated in our office and placed directly in your child's mouth. This type is used when only one tooth has been removed. Or, a more involved model that a lab will need to fabricate. This type will also require a mold of your child's teeth so that the lab can fit the appliance to your child's mouth.
<u>Risks:</u> <u>Benefits:</u> <u>Alternatives:</u>	Include but are not limited to: Discomfort at the S/M site, adjustment difficulties to a new appliance in the child's mouth, loss of appliance or even swallowing it by the child. Reduction of the need for future orthodontic treatment for space regaining. Depending on the situation, I understand that alternatives (such as early orthodontic care) may exist and have been discussed with me.
<u>Pedi-partial:</u>	An appliance which includes one or more pretend teeth to restore your child's smile after the loss of one or more primary front teeth has occurred. The appliance is made by a lab and will require a mold of your child's mouth. The appliance is attached to bands that fit on the back teeth via a wire. The bands are cemented with a special dental glue onto your child's molars. This keeps the appliance in place and prevents your child from removing it.
<u>Risks:</u>	Include but are not limited to: Gingival irritation around the appliance, food retention and
<u>Benefits:</u> Alternatives:	difficulty cleaning, periodic need for evaluation. Cosmetic and psychological for the child. Can also help restore speech. Depending on the situation, I understand that alternatives (such as observing) may exist and have been discussed with me.
<u>Laser Use:</u>	Soft tissue lasers can be used as an alternative to surgical approaches in multiple dental procedures. These include: Contouring of gingival margins, frenectomies for lip and tongue ties, removal of oral lesions.

- Risks:Include but are not limited to: Pain tissue irritation and burning, temporary charring or
darkening of tissues.Benefits:Rapid and simple surgical procedures can be easily completed. No sutures needed.
Bleeding is much reduced around surgical site. Better pain control in area of use
compared to traditional surgical intervention.
- <u>Alternatives:</u> Depending on the situation, alternatives such as traditional surgical approach or observations exist.

Teeth Whitening:

	Whitening gels are useful to improve enamel appearance and eliminate external stains
	that do not respond to traditional polishing.
<u>Risks:</u>	Include but not limited to: Tooth sensitivity, soft tissue irritation.
Benefits:	Improved color of enamel and removal of superficial stains. Easy application.
Alternatives:	Depending on the situation, observation or alternate materials could be an option.

Silver Diamine Fluoride:

	Silver diamine fluoride is an antibiotic liquid that can be used on cavities to help stop tooth decay. Using it can reduce or eliminate the need for traditional fillings in some circumstances. The affected area will stain black permanently in about a month after the application.
<u>Risks:</u>	Include but are not limited to: Temporary discoloration of the gums or skin if accidentally exposed. This stain is not harmful and will disappear in one to three weeks. Repeat applications of the material may be needed and if the cavity does not stop progressing, a traditional filling will need to be planned.

- **Benefits:** Avoiding traditional restorations when they are challenging to place. Simple application. Stopping a cavity from progressing.
- Alternatives: Depending on the location, a filling or crown may be needed after the application.