



Invisalign Consent Process -

CONFIRMATION OF VISUAL CONSENT TOOLS AND FAQs

I hereby confirm that I have seen the following visual consent tools either at my initial consultation or at my treatment commence appointment. (✓ those you agree to and 'X' any that are not applicable)

Invisalign aligner on or off dental model at consultation	<input checked="" type="checkbox"/>
Invisalign attachment on dental model	<input checked="" type="checkbox"/>
3D simulation of <u>proposed</u> outcome via email or in clinic	<input checked="" type="checkbox"/>

I also confirm that I have read all the FAQs document.

Signed: _____ Name: _____ Date: ____ / ____ /202

GOALS

What you would hope to achieve with your Invisalign

Treatment Your main concerns are:



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PICTURE PERFECT / SUPER PERFECT

We discussed some of the limitations of Invisalign Treatment and you agreed that you are not seeking perfectly even, symmetrical teeth. You agreed that a more natural, 'picture perfect' appearance is an acceptable standard of result. This means that your teeth will look like they 'fit in' with the shape of your face and not look crooked or unsightly when observed from a distance of a few feet away.

Patients who are looking for a 'Super Perfect' result where the teeth are all the same shape will require composite bonding and/or porcelain veneers.

BLACK TRIANGLES

We discussed the possibility of 'black triangle' spaces appearing between your teeth at the end of treatment. There is no health risk associated with these, but, if you find them unsightly, you may require additional treatment using tooth coloured filling material bonded to your teeth. This will incur an extra cost and may require polishing/replacing every few years.



TOOTH SHAPE

Once your teeth have been aligned it may be necessary to improve the shape of your teeth to achieve the optimum appearance, using tooth coloured filling material or porcelain veneers bonded to your teeth. This will incur an extra cost and may require polishing/replacing every few years.

RECESSION

There is a risk of gum recession occurring during your treatment. We have planned your treatment to minimise this risk and will monitor the situation carefully. It may be necessary to modify your treatment plan to avoid significant problems.



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MIDLINES

We discussed the final position of the 'centre lines' between the upper & lower front teeth. They may not finish exactly in line ('coincident') and we agreed that this would not be a problem for you. We will attempt to improve these where possible within our limitations.

YOUR BITE

In relation to your bite, some dentists believe that a 'class I' bite or 'occlusion' is ideal. To achieve a 'class I occlusion' we would have to change your bite so we can achieve this which will prolong treatment and increase risk. However, in this practice we believe that creating a comfortable bite where you can chew in comfort is the best form of treatment. We agreed that it was not necessary to make major changes to your bite ('dental occlusion') because your present bite and jaw joint function works well for you. This usually means that your orthodontic treatment is quicker, has less risk and less complicated, too.

If you would like your bite to be changed substantially, then you should consider fixed braces, ideally provided by a Specialist Orthodontist. This form of orthodontics may be able to create a 'class I' occlusion and finish with upper and lower centre lines coincident.

CHOICE

Invisalign fits in better with most lifestyles compared with fixed braces because:

- it would be easier to keep your teeth and gums perfectly clean
- you will require less visits to the practice
- there is an incredibly low chance of needing an emergency appointment
- you will be able to continue eating your normal diet
- the aligners are more comfortable and less obvious than fixed braces

In general, straighter teeth are easier to look after, so your chances of maintaining a higher level of oral hygiene are improved if you undergo this treatment. Also, if you



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have straighter teeth, it will usually be easier for your dentist to provide a higher standard of dentistry with better treatment outcomes

Your 'material risks'

You need to be aware of the possibility of:

1. You need to wear the aligners at least 22 hours per day. If you do not follow the agreed plan, we may need to repeat the treatment planning ('known as a 'Mid-Course Correction') which will incur an extra charge of £1000.
2. You will need to attend for periodic review appointments at the practice (usually about every 4-8 weeks).
3. Your teeth will feel tender initially and you may need a mild pain killer, such as paracetamol. Your teeth will continue to feel tender when biting hard foods.
4. Your gums and lips may be scratched by the aligners. This usually wears off after a few days. The use of Diffiam oral spray can help reduce the discomfort.
5. Your teeth will shift position (or 'relapse') at the end of treatment. You understand that you will need to comply with the Retention Programme
6. You may develop tooth decay or gum disease if you do not follow our oral hygiene advice. This means that you should refrain from consuming foods and drinks containing sugar in between meals. You also need to brush with fluoride toothpaste after every meal and floss or interspace your teeth every day.
7. Your speech will be affected for the first few weeks of treatment.
8. Your bite may change during treatment and this may require some adjustments to the shape of your teeth at the end of treatment. Very occasionally this may mean adding some filling material to your teeth to enable them to bite together properly.
9. You *may* need to have extra orthodontic brackets and/or elastics attached to your teeth to efficiently complete some of the more difficult tooth movements.



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- 10. You may lose the bony support from around your teeth which could lead to the loss of one or more teeth. We have agreed that attempting to move these teeth will make it easier to achieve a better quality result in the subsequent treatment of any gaps. Loss of bony supports is a very unlikely risk.
- 11. If you have short roots, and it is theoretically possible that Invisalign treatment will cause further shortening of the roots. In extreme cases this may lead to the loss of the tooth. This again is a very unlikely risk in your case.
- 12. Fillings, crowns, and bridges could become loose during Invisalign treatment. This may incur extra charges.
- 13. If you have had a dead or abscessed tooth, it is possible that an infection may flare up during treatment. This may incur extra charges.
- 14. Very occasionally your jaw joint may become painful or stiff during treatment. If this persists, you may need treatment at extra charge.

Signed: _____ Name: _____ Date: ____ / ____ / ____
 /RISKS SPECIFIC TO YOUR TREATMENT (Declaration)

I UNDERSTAND THAT:

Signed: _____ Name: _____ Date: ____ / ____ / ____



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CHEWIES

Use of chewies is non-negotiable. These need to be used as instructed to ensure teeth move as per the schedule we have outlined.



THE FINE PRINT: Biological Warranties

Regular maintenance, professional hygiene and oral hygiene advice increase the chance of us maintaining oral health in our patients. With these tools we hope our patients will avoid decay and gum disease. However, these consequences are ultimately biological, down to patient habits and out of our direct control.

Therefore, we cannot make warranties about these potential consequences.

Should decay occur under a filling or crown that requires its replacement then this will not be covered by our warranties.

Signed: _____ Name: _____ Date: ____/____/____



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