

ELLIS ORTHODONTICS

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Generally, **EXCELLENT ORTHODONTIC RESULTS** can only be achieved with informed and cooperative patients. Therefore, you should be aware that orthodontic treatment, like any treatment of the body, has some risks and limitations. These risks are seldom severe enough to offset the advantages of treatment, but they should be considered when you decide to start orthodontic treatment.

AS YOUR ORTHODONTIST, I feel that the benefits from orthodontic treatment far outweigh the risks in your case.

Tooth decay, gum disease and permanent markings decalcification on the teeth can occur if orthodontic patients eat foods containing excessive sugar and or do not brush their teeth frequently and properly. These same problems also can occur in patients not in braces, but the risk is greater while in braces.	INITIALS _____
In some patients the length of the roots of the teeth may shorten during orthodontic treatment. Some patients are prone to this happening, some are not. Usually this is of no significant consequence, but on occasion it may become a threat to the longevity of the teeth involved.	INITIALS _____
The health of the bone and gums which support the teeth may be affected by orthodontic tooth movement if a condition already exists, and in some rare cases where a condition doesn't appear to exist. In general, orthodontic treatment lessens the possibility of tooth loss or gum infection due to malocclusion.	INITIALS _____
Teeth have a tendency to change their positions after treatment. This is usually only a minor change and faithful wearing of retainers reduces this tendency. Throughout life, the bite can change adversely due to the eruption of wisdom teeth, mouth breathing and other oral habits that are out of the control of the orthodontist.	INITIALS _____
Patients with malocclusion may have a high potential for Temporomandibular-Joint (T.M.J.) problems, which may become evident before, during or after orthodontic treatment. These may include joint pain, ear pain and/or headaches. Orthodontic treatment may help remove the dental causes of the T.M.J. syndrome, but not the non-dental causes.	INITIALS _____
Orthodontic tooth movement may aggravate the condition of a tooth that was traumatized by a previous accident or has large fillings, which may have damaged the nerve of the tooth. In rare instances this may lead to root canal treatment.	INITIALS _____
Allergies to medicines and orthodontic materials may occur during orthodontic Tx. If you are aware of these allergies they can be avoided, but if they are unknown to you, it is impossible to predict any reaction. People who are already allergic to certain food, or who have hay fever, are more prone to allergies to materials.	INITIALS _____
Sometimes orthodontic appliances may be accidentally swallowed or aspirated, or may irritate or damage the oral tissue. Also, <i>if improperly handled</i> , headgear may cause injury to the face or eyes or even blindness. But, if the patient is careful and follows the instructions given, the possibility of such a mishap is extremely rare.	INITIALS _____
Sometimes oral surgery or tooth removal is necessary in conjunction with orthodontic treatment, especially to correct severe jaw imbalances. There are extremely rare, life threatening risks and disabilities involved with oral anesthesia in surgery. You must discuss this with the oral surgeon that you and your family dentist select before making your decision to proceed with the surgery.	INITIALS _____
Occasionally, unexpected, or abnormal, changes in the growth of the jaws or shape and size of the teeth may limit our ability to achieve the desired result. If growth becomes disproportionate, the bite may change requiring additional treatment or, in some cases, oral surgery. Growth disharmony is a biological process sometimes beyond the orthodontist's control.	INITIALS _____
The total time required to complete treatment may exceed our estimate. Excessive or deficient bone growth, poor oral hygiene or poor cooperation in wearing the appliance the required hours per day broken appliances and missed appointments can lengthen the treatment time and affect the quality of the end results.	INITIALS _____
OTHER FACTORS NOT INCLUDED ABOVE THAT AFFECT THIS CASE ARE: _____ _____ _____	

I have read, understood, and have had all my questions regarding the risks of orthodontic treatment answered, as I have indicated by my initials, above. I have also been alerted to conditions that do or may exist, as also indicated by my initials and of the witness who has signed below. I also understand that should any of the above conditions threaten the health of this patient, this practice may terminate treatment.

I consent to the orthodontic treatment of _____ Relationship _____

Signature: _____ Date _____, Witnessed by: Amanda Williamson