



Certified Specialist BSc, DDS, Dip Periodontics, FBCCD
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INFORMED CONSENT & INFORMATION FOR RIDGE PRESERVATION / RIDGE AUGMENTATION SURGERY

Advanced periodontal disease, tooth fracture, or other types of abscesses may cause severe bone loss around a tooth, requiring extraction of the tooth. When the tooth is extracted, healing occurs by a combination of “shrinkage” of the remaining extraction socket bone and some bone growth from the base of the extraction site. The result is often loss of bone where the tooth used to be and depression in the remaining ridge of bone. This problem can now be avoided. At the time the tooth is extracted, the area is filled with one of a number of resorbable “calcium materials”, and the area is covered with a membrane barrier. The barrier prevents the gum tissue from growing into the extraction area and protects the underlying calcium materials which are forming into bone. The calcium materials encourage your own bone to grow into the area and these materials are totally resorbed and eliminated by the body. This treatment will often result in the complete regeneration of the lost bone in the area of the tooth extraction.

Regenerating damaged and lost bone at the time of extraction of the tooth provides the following advantages:

- The bone between the extracted tooth and the adjacent tooth is preserved or regenerated. The health of the adjacent tooth is thus improved
- A ridge deformity does not develop, and the appearance of the ridge is more natural. The aesthetics of the area is preserved or improved
- The regenerated bone allows placement of an implant to replace the missing tooth

If a ridge deformity exists because this procedure was not performed at the time the tooth was extracted, a ridge augmentation procedure can be performed at a later date with beneficial results.

After careful oral examination and study of my dental condition, Dr. Desai has advised me that I have a deficient alveolar ridge for future implant or bridge placement. I understand that this deficient ridge will compromise implant/bridge placement and thus health and longevity of the restoration. I also understand that a deficient ridge can continue to shrink without treatment with implant replacement.

In order to treat this condition, Dr. Desai has recommended that my treatment include ridge preservation/augmentation surgery which usually lasts 1 – 1.5 hours. It is done using local anaesthetic similar to my dental office. Small incisions are made to temporarily to elevate my gums to permit better access to the jawbone. Bone irregularities may be reshaped and then calcium graft material and/or a resorbable/non resorbable membrane will be placed and may be tacked into place. Stitches are then used to hold the gums in place during healing and a medicated dressing may be placed. The dressing remains for 7-10 days and are then removed or replaced and the stitches may be dissolving or may require removal when Dr. Desai recommends for my particular case.

I also agree not to fly in an airplane, helicopter or do any skydiving where sinus pressure changes occur. This can compromise grafting and affect success rates and have a higher risk of infection. If this occurs, re treatment or emergency treatment may need to be done at additional cost.

Date

Patient's Printed Name & Signature

Witness



**DOCTOR
PREETY
DESAI**
INC.

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INFORMATION SHEET FOR RIDGE PRESERVATION / RIDGE AUGMENTATION SURGERY

FAQ's:

1. *How long does a ridge preservation procedure take?* The extraction of the tooth and the placement of the graft materials takes approximately 60 minutes. Naturally, the exact length of time will vary from case to case. The stitches are removed 7-10 days later in a 10 minute visit. One or two ten minute check up visits may be schedule to ensure the area has healed correctly and an x-ray will be taken a few months later to evaluate the amount of new bone growth.
2. *Will the ridge preservation procedure hurt?* Only local anaesthetic is necessary to perform an extraction and ridge preservation procedure. During the visit you feel nothing since the area is numb. When the local anaesthetic wears off there will be some mild discomfort. Medication will be prescribed to control any discomfort you might experience. This procedure will not cause you to miss work etc.
3. *Does the barrier which will be placed to accomplish the ridge preservation remain in my mouth?* If a dissolving type of membrane is utilized, it will be gone around 4-6 weeks after the procedure. If a non-dissolving membrane is used it will be removed at the time of implant placement or earlier in a 15minute procedure.
4. *What is the cost f the procedure?* The cost of the ridge preservation procedure will vary with the situation. However, Dr. Desai will ensure that this matter is discussed with you thoroughly before proceeding with any treatment.
5. *How well does a ridge preservation procedure work?* The ridge preservation procedure is very predictable. The procedure rebuilds damaged bone, resulting in improved aesthetics, continued health of the adjacent teeth, and the establishment of adequate bone for implant placement, if necessary.

PRE-SURGICAL RECOMMENDATIONS AND INFORMATION

Please read the following carefully prior to your surgical appointment:

1. Have a quiet, restful evening before your surgical appointment.
2. Unless instructed otherwise, have a good meal prior to your appointment.
3. Wear a blouse or shirt with short sleeves, or with sleeves which can be rolled up to accommodate a blood pressure cuff.
4. If pre-medication has been prescribed to make you feel more relaxed during the surgical appointment (e.g. Ativan), you must have someone bring you to your appointment and accompany you home. You cannot drive a motor vehicle for the rest of that day.
5. If pre-surgical antibiotics (e.g. Penicillin or equivalent) have been prescribed for you due to medical reasons, please be sure to take them as directed.
6. Ideally, you should return home immediately following the surgical appointment, take any prescribed analgesic and/or antibiotics, and use an ice pack as directed in the post-operative instructions. Physical activity and talking should be kept to a minimum for the rest of the day.
7. You may return to work the day following surgery. However, if your work involves physical labour, it is suggested that you try to work at a somewhat slower pace.
8. It is suggested that you do no physical exercise during the first post-operative week to avoid any possible complications.
9. It is preferable that you do not fly in a commercial airplane during the first 4 to 5 days after the surgery.
10. If possible, do not have the surgical treatment less than 1 to 2 weeks prior to an important business or social event.
11. flying is restricted to 3 weeks after a sinus procedure

Please do not hesitate to ask any questions regarding the above.