



HILLER ORTHODONTICS

Building Smiles. Treating People.

CONSIDERATIONS & CONSENT

ALL FORMS OF MEDICAL AND DENTAL TREATMENT, INCLUDING ORTHODONTICS HAVE SOME RISKS AND LIMITATIONS. FORTUNATELY, IN ORTHODONTICS THE COMPLICATIONS ARE INFREQUENT. WHEN THEY DO OCCUR, THEY ARE USUALLY OF MINOR CONSEQUENCE. NEVERTHELESS, THEY SHOULD BE CONSIDERED WHEN MAKING THE DECISION TO UNDERGO ORTHODONTIC TREATMENT.

Oral Hygiene | All types of orthodontic hardware tend to trap food particles, holding them against teeth and gums. Cavities or permanent markings (decalcification - white lines or spots on the teeth) can occur if patients do not brush and floss frequently and properly or if bacterial plaque is not removed daily with excellent oral hygiene. In addition, it is especially important to continue regular visits to the family dentist during orthodontic treatment for thorough cleaning and early detection of any developing problems.

Tooth Vitality | A tooth that has been previously injured by a blow or has a large filling may require a root canal when it is moved by orthodontic hardware. These conditions are not caused by orthodontic treatment, but can flare up during the treatment period. Report any sensitivity to hot, cold, or sweets to Dr. Hiller.

Root Resorption | In some cases, the length of the roots of some teeth may be shortened during orthodontic treatment. Usually this is of no consequence, but on rare occasions, it may require curtailing treatment to avoid loss of a tooth or teeth. A progress x-ray may be taken during treatment to monitor continued root stability.

Tooth Damage | During removal of hardware, the teeth may be chipped and/or scratched. Although infrequent, this may require restorative treatment at the dentist.

Tobacco Use | All forms of tobacco can accelerate the gum disease process, slow teeth movement, and increase relapse tendency.

Retention | Teeth have a tendency to return toward their original position after treatment. Usually this is only minor. **Faithful wearing of the retainers reduces this tendency.** This commonly affects the lower front teeth. You should expect some changes in this area if retainers are not worn as recommended.

Growth Disharmony | Occasionally a person who has had a normal growth of the jaw may not continue to do so. If growth becomes uneven, the relationship of the jaws may change, requiring additional treatment or, in some case, surgery. Growth disharmony is a biological process beyond the orthodontist's control. People who are mouth breathers are more likely to have these changes.

TMJ | There is a risk that problems may occur in the temporomandibular joint (TMJ) just in front of the ear. In moving the teeth to new positions, the jaw may be uncomfortable for a while. Orthodontic treatment can improve dental cases of TMJ pain, but not in all cases. Problems with TMJ are very rare in children.

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Injury from Headgear | There have been a few reports of injury to the eye in patients wearing headgear. In every case, the patients were engaging in strenuous horseplay or other competitive activity while wearing the appliance. Patients are advised not to wear the appliance during these times.

Length of Treatment Times | The total length of treatment time can be longer than estimated. Lack of bone growth, use of tobacco products, poor patient cooperation, broken appliances and missed appointments are all important factors that can lengthen treatment and affect the quality of the result.

If you have any questions about any of these items, please do not hesitate to call or ask at your next appointment. It is essential that you inform the office of any changes in your medical or dental history during the course of your treatment.

I have read and understand the above and consent to treatment. I give permission to Dr. Hiller to use my clinical photographs, x-rays and study model for educational purposes, in scientific journals or magazines.

Patient/Responsible Party Signature

Date

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