

Teeth whitening (TW) is an effective, non-invasive elective dental procedure designed to lighten, whiten & brighten your teeth to their optimum natural brightness!

TW can only be performed in a healthy mouth. The amount of TW varies from patient to patient and cannot be predicted exactly. In general, yellow or brown teeth, teeth with extrinsic staining from tea, coffee or red wine, and darkened monochromatic teeth are easier to whiten in comparison to difficult intrinsic staining caused by antibiotics such as tetracycline!

Advantages of Teeth Whitening (TW)

Safe, effective, convenient and cost-effective way to enhance your SMILE! Whitened teeth seem to be less susceptible to dental decay & adhesion of plaque and calculus is less likely

Assessment for Teeth Whitening Treatment: Do you have any sensitivity to

Sweet Heat Cold Pain on biting & sensitivity to cold

The following information is given to you so that you can make an informed decision about having your teeth whitened. Please take as much time as you wish to make the decision about signing this form and please feel free to ask any questions about the procedure before doing so.

The active ingredient is hydrogen peroxide (HP) or carbamide peroxide (CP) in a glycerol base. If you are aware of any adverse reaction to this ingredient, please do not proceed with the treatment. NOTE: Human Liver produces upto 640mg of peroxide each day.

As with any treatment there are benefits and risks. The benefit is that teeth can be whitened fairly quickly in a simple manner. The risk involves the continued use of the peroxide solution for an extended period of time. Research indicates that using peroxide to whiten teeth is safe. The long term effects are unknown, acceptance of treatment means acceptance of risk.

The amount of whitening can vary from patient to patient, and the desired level of whitening cannot always be achieved. Whitening treatments are not intended to lighten artificial teeth, caps, crowns, veneers or porcelain, composite or other restorative materials. Therefore any previously placed white fillings/restorations will *most likely* need replacing after whitening. Replacement can be provided if necessary at a separate cost and is not included in the bleaching treatment cost.

Teeth with multiple colorations, bands, or spots due to tetracycline and fluorosis may not whiten as well or not at all.

During the entire course of the treatment it is advisable not to smoke, drink tea, coffee, red wine or eat berries or curries for atleast a few hours after bleaching

Most patients achieve a change within 2-4 weeks but some tetracycline type of stains may take longer bleaching times 6-12 months in some cases!

After the desired amount of tooth whitening has been achieved, stop the treatment.

Further dental treatment may be required following bleaching the teeth, these options could include microabrasion, bonding, porcelain laminate veneers, crowns or a combination of these to attain desired results

If you are whitening prior to the provision of veneers or crowns it will be necessary to wait at least 2-3 weeks after your final whitening prior to a definitive shade recording to match any new veneers/crowns to your existing natural teeth.

NOTE: No responsibility by the practice can be taken for mismatch of the colour of dental work after fitting i.e if you over whiten your natural teeth after restorations (veneers and/or crowns are fitted)

Potential Risks:

Sensitivity: may occur after a few days. This is usually slight and temporary, desensitising toothpaste as advised can be used. If your teeth become very sensitive then you must stop treatment for 3-4 days whilst it settles down and continue only if sensitivity subsides. In rare cases sensitivity can persist for longer periods of time. People with existing sensitivity, recession, exposed dentine, exposed root surfaces, cracked teeth, open cavities and leaking fillings may find that these conditions increase or prolong the sensitivity. Whitening may also cause inflammation of your gums, lips or cheeks. This usually subsides in a few days but may persist longer and may result in pain or discomfort.

Gum/Lip/Cheek Inflammation: this is due to inadvertent exposure of a small area of those tissues to the whitening gel. The inflammation is usually temporary which will subside in a few days but may persist longer and may result in significant pain or discomfort, depending on the degree to which the soft tissues were exposed to the gel.

Cervical Abrasion/Erosion: these conditions affect the roots of the teeth when gums recede. They are the grooves, notches or depressions where the teeth meet the gums that generally look darker than the rest of the teeth. They look darker because there is no enamel in these areas. Even if these areas are not sensitive, the whitening gel can potentially penetrate the teeth and cause severe sensitivity. These areas should therefore NOT be whitened or should be filled before the whitening is initiated!

Risk of Root Resorbtion: a condition where the root of a tooth dissolves either from the inside or outside. Although the cause of this is still uncertain, there is evidence that indicates the incidence of root resorbtion is higher in patients who have undergone root canals followed by whitening procedures.

Risk of Relapse/Regression: teeth whitening effects are not permanent it can relapse following sustained exposure to various staining agents and therefore needs top ups to maintain the result approximately every 6-48 months! depending on each case. Regression is far slower with daily home whitening technique using lower concentrations in comparision to chairside/power/in-office bleaching method.

Note : DO NOT bleach your teeth if you are pregnant although there here have been no reported adverse reactions, but the long-term clinical effects are unknown. It is your responsibility to inform us if you are pregnant, breast-feeding or have any known allergies/sensitivity to any bleaching products.

Method of teeth whitening: choose method for whitening your teeth is: (tick as appropriate)

Vital teeth bleaching: Yes Non vital tooth bleaching: Yes

Tooth_____ RCT present_____ Apical seal patency_____ Radiograph_____

Walking bleaching: Yes Inside outside bleaching technique:

Time of bleaching agent application: (tick as appropriate)

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|------------------------------------|--|--------------------------|
| Daytime Teeth Whitening: OR | using Hydrogen Peroxide 6% for 1-2 hours a day | <input type="checkbox"/> |
| Night time Teeth Whitening: | using Carbamide Peroxide 10% or 16% for 4-8 hours | <input type="checkbox"/> |
| Appointments | | |
| 1st visit: | Consent, Photographs & Shade recording & Impressions | <input type="checkbox"/> |
| 2nd visit: | Loading & fitting tray demonstration & Instructions | <input type="checkbox"/> |
| 3rd visit: | Review progress (1-4 weeks depending on case type) | <input type="checkbox"/> |

Preoperative shade: _____ **Shade guide used:** _____ **Patients desired shade:** _____

| | Cost of teeth whitening: | Cost £ | Pls tick |
|----------|--|---------------|--------------------------|
| 1 | Home Teeth Whitening using White Dental Beauty (WDB) (includes a set of custom-made soft bleaching trays for upper and lower arches & Whitening syringes) | £300 | <input type="checkbox"/> |
| 2 | Home & In-office combination Teeth Whitening using Enlighten Evolution3 (includes a set of custom-made soft bleaching trays for upper and lower arches & Whitening syringes) | £600 | <input type="checkbox"/> |
| 3 | In-office / on dental chair LASER Teeth Whitening | £750 | <input type="checkbox"/> |

Guarantees: There are no guarantees to the degree of tooth whitening.

Legal Standing in UK: Following a decision made by the House of Lords in 2001, whitening products fall within the terms of the Cosmetic Products (Safety) Regulations 1996. These regulations make it illegal to supply tooth whitening products. The question is whether a dental clinician using a tooth bleaching compound is supplying within the meaning of the legislation. Although the position of tooth whitening is uncertain, tooth whitening treatments are considered generally safe by most dental professionals. It is important to know that your dentist or hygienist has been trained to use whitening products but that the procedure is not without risk as explained in above paragraphs. GDC position statement on tooth whitening can be found on GDC website <https://www.gdc-uk.org/patients/illegal-practice/tooth-whitening>

| | |
|---|--------------------------|
| I have had the tooth whitening procedure fully explained to me and have had the opportunity to ask questions. I have read this information sheet thoroughly. By signing this document in the space provided below I consent to treatment and assume responsibility for the risks described above. I also consent to photographs being taken. I understand that they may be used for documentation and illustration of my whitening treatment. | <input type="checkbox"/> |
| <i>I agree to return as advised once treatment begins and at any recommended time afterwards</i> | <input type="checkbox"/> |
| <i>I have received a copy of this consent & Instructions sheet</i> | <input type="checkbox"/> |

Patient Name & Signature _____ **Date:** _____

Dental Surgeon Countersignature: _____ **Date:** _____

Instruction Sheet:

1. Brush your teeth thoroughly for 2 minutes with fluoride toothpaste and floss all teeth with a tape/string or tepe flossing material.
2. Prepare your tray by placing a small amount (rice grain size) of whitening gel into each of the reservoirs avoid the crowns and/or bridges as they are not ment to change colour
3. Before you place the tray one by one into the mouth you **MUST** make sure the teeth are dried with a tissue or cotton roll. Once teeth dry place the tray on the teeth - never bite into the tray to position them always use fingers and gentle force to position them over the teeth correctly
4. Do not swallow any excess gel; remove any excess with a tissue or cotton roll. Trays have been sealed quiet well so the excess that may ooze out should be none or barely minimal. Leave in your mouth for the right amount of time as advised by the dentist
5. Remove the trays and rinse your mouth and tray with cold water never use hot water to clean the trays as you may damage them
6. Brush teeth and gums with fluoride toothpaste then spit but **DO NOT** rinse
7. Clean and dry the trays carefully after use & store in cold dark place not under direct sunlight and not near the heat radiators

If your teeth become very sensitive to hot or cold, apply therapeutic desensitising toothpaste &/or gel to all the teeth, again spit but **DO NOT** rinse for upto 20 minutes.

If you experience any adverse reactions, stop treatment and contact our practice on 01206 769695

Always wash the trays thoroughly in **COLD** water after each application is completed and always store the trays in the box provided to keep them safe and free of damage. If you tend to grind your teeth at night, the trays may wear through, tear or distort and new trays may be required at periodic intervals. If you keep your plaster models safely, please return them to the practice and we can manufacture replacement trays in a couple of working days at a nominal cost.