



Centre dentaire de La Rive

Informed consent – EXTRACTIONS

Usually this type of surgery has a good success rate, it is possible that complications can occur during and after the surgery.

The most common complications are :

- Bleeding and / or haemorrhage
- Infection
- Temporary or permanent damage to the nerves supplying the tongue, teeth, gums, lip and chin
- Bone involvement and / or damage to the adjacent tooth
- Alveolitis or *Dry-Socket*
- Risk of communication with the sinus
- Jaw fracture (rare)

Note, however, that it is normal to have pain and swelling after such a procedure, that you may have difficulty opening your mouth, and bruises (blues) may appear on the cheeks.

Thus, I hereby certify that :

- I have been informed of possible complications including the risks of alteration (temporary or permanent) of nerve function.
- I also had the opportunity and took the time to ask my dental surgeon all the questions about some of the questions I had regarding this surgery.
- I have had sufficient reflection period and agree to proceed with the surgery.
- I agree to notify my surgeon if I suspect abnormal healing or any other problem with my surgery.

I agree to follow the post-operative recommendations given to me and to come to my check-ups if necessary.

Patient's signature : _____ Date : _____

Signature of Dentist : _____ Date : _____