



WHITENING TREATMENT INFORMED CONSENT

1. This is my consent for E-Care Dentistry and/or any of the properly trained staff to perform in-office whitening treatment on me.
2. I have had the opportunity to discuss the various options for whitening my teeth and elect to have in-office whitening treatment performed on my teeth.
3. I understand that although the dentist and/or dental staff have been trained in the proper use of this whitening system, the treatment is not without risk. The doctor and/or dental staff have explained to me that there are certain inherent and potential risks in any treatment plan or procedure, and that in this specific instance such operative risks include but are not limited to:
 - a) Tooth sensitivity/pain-during the first 24 hours after treatment, some patients can experience some tooth sensitivity or pain. Normally, tooth sensitivity or pain following treatment subsides within 24 hours, but in rare cases can persist for longer periods of time in susceptible individuals. People with existing sensitivity, recession, exposed dentin, exposed root surfaces, cracked teeth, abfractions (micro-cracks), open cavities, leaking fillings, or other dental conditions that cause sensitivity or allow penetration of the gel into the tooth may find that those conditions increase or prolong tooth sensitivity or pain after treatment.
 - b) Dry/chapped lips-treatment involves up to three, 20-minute sessions during which the mouth is kept open continuously for the entire treatment by a plastic retractor. This could result in dryness or chapping of the lips or cheek margins, which can be treated by application of lip balm, or petroleum jelly.
4. I understand that if I am pregnant or nursing, or think that I may be pregnant, it is recommended that I consult with my physician before undergoing this procedure.
5. I understand that whitening treatments only lighten the natural tooth structure and cannot lighten crowns, veneers, composite, or other restorative materials.
6. I understand that the results of this whitening treatment cannot be guaranteed.

I CERTIFY THAT I HAVE HAD AN OPPORTUNITY TO READ AND FULLY UNDERSTAND THE TERMS WITHIN THE ABOVE CONSENT AND THE EXPLANATION MADE, AND THAT ALL QUESTIONS HAVE BEEN ASKED AND ANSWERED TO MY SATISFACTION.