

OF MEMPHIS

Periodontal, Laser and Dental Implant Therapy

6268 Poplar Avenue· Memphis, TN 38119 · phone 901-761-3770 · toll free 800-824-1628 fax 901-761-3775 www.PerioMem.com Info@PerioMem.com

Roger D. Craddock, D.D.S. Mitchel S. Godat, D.D.S., M.S. Board Certified Periodontist Partners Emeritus: Preston D. Miller, Jr., D.D.S. James R. Ross, D.D.S., M.S.

LANAP INFORMED CONSENT

I consent to Dr. Roger Craddock or Dr. Mitchel Godat (circle one), performing on me the following:

LASER ASSISTED NEW ATTACHMENT PROCEDURE (LANAP)

Doctor and staff have provided me with literature describing the LANAP procedure which I have read. I understand LANAP includes bite adjustment and may require the use of a bite guard. I understand I may ask the Doctor any question I may have before consenting to LANAP.

I. ALTERNATIVE THERAPIES

Doctor has previously explained to me alternatives, benefits, and potential complications of treatments for my periodontal disease as follows:

- A. PERIODONTAL FLAP/SURGERY
 After local anesthesia injections, flap surgery involves surgically cutting my gum tissues.
 After the gums are flapped and surgically lifted away from my teeth, the underlying diseased gum tissue is scooped out, teeth roots scraped, diseased bone trimmed and/or grafted and the flap of gum tissue sutured closed.
- B. NON-SURGICAL ROOT PLANING ALONE
 After local anesthetic injections of my gums, root surfaces are scraped and deep cleaned
 (planed) to remove bacterial plaque containing tartar (calculus) deposits on my teeth roots.

II. THERAPEUTIC BENEFITS

Periodontal therapy is designed to eliminate or substantially reduce periodontally diseased gum pockets to help control or prevent future periodontal disease progression.

LANAP reduces periodontal gum pocket depth by helping:

- A. The dentist to have improved visualization of the laser-detached gum pocket soft tissue linings to aid scaling and root planning for removal of tartar (calculus) deposits (root cleaning);
- B. Reattachment of the laser treated gum tissues to the roots by promoting growth of new bone and/or root surfaces.

LANAP treatments are generally less painful than flap surgical procedures and in doctor's opinion have greater predictability for reattachment of gum tissue and bone growth. Thus, LANAP helps promote long term periodontal health.







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III. COMPLICATIONS

- A. Non-surgical scaling and root planning alone may not prove successful in eliminating or substantially reducing deeper pockets thereby necessitating flap surgery or LANAP for further periodontal pocket depth reduction.
- B. Periodontal surgery treatment risks include post-operative bleeding, infection, swelling, sinusitis, and on rare occasions in surgeries close to facial nerves persistent numbness and/or pain, burxism, tooth sensitivity, allergic response to medication. LANAP post-surgical complications, if any, are usually milder, less severe and not as long lasting as potential conventional periodontal flap surgery complications.
- C. LANAP, as with all periodontal procedures, may not be entirely successful in gum pocket reduction or new attachment. Success is not guaranteed. Nonetheless, LANAP research demonstrates in almost 90% of LANAP treated patients no LANAP retreatment was necessary within the first 5 years post-operatively.

NON-TREATMENT RISKS

Doing nothing can worsen my periodontal disease including increased gum pocket depth which risks early (premature) teeth loss, infections, and abscesses. Lost teeth require replacement with costly implants, crowns, bridges, or partial/complete dentures.

IV. PATIENT COMPLIANCE

I agree to follow Doctor's written pre & post-operative instructions, to perform post-surgical oral hygiene and to take medications given or prescribed.

I also agree to schedule regular periodontal maintenance visits quarterly or as my dentist and/or hygienist may recommend to aid in maintaining my periodontal health.

| Date | Patient or Guardian | |
|------------------------------|---------------------|---|
| Witness | | |
| LANAP consent signature time | Dr. Signature | |
| Last updated 8/5/11 | | Contributing Doctor, Edwin Zinman, D.D.S., J.D. |

All Consent forms should be signed and returned or faxed to our office 3-5 days before surgery. Fax: 1.901.761.3775



