## WHITENING CONSENT FORM

You have chosen to elect for a tooth whitening procedure. This will lighten the colour of your teeth using a peroxide bleaching product. Whitening products will act only on natural tooth tissue, and will not whiten fillings, crowns, caps and bridges etc.

TIP: If required, have any front fillings or crown work changed after whitening to match in with your new whiter smile.

The whitening gel may make the teeth sensitive whilst the product is used and for a few days after treatment. Good sensitive toothpaste such as Sensodyne can be used to help with any sensitivity.

TIP: Apply some Sensitive toothpaste in to the trays without the whitening gel, and wear this overnight. This will help with sensitivity.

Results are always varied. The degree of whitening will depend on several factors including age, condition of teeth, and thickness of teeth, hygiene and natural colour of your teeth. Some areas of the teeth may whiten first or more and you may need to increase the whitening time to get a more pleasing result. Any white patches or patches of discolouration may become more apparent initially and may even out with time or after prolonged whitening treatment.

Try to avoid strong stained foods such as beetroot, curry and wine while you are doing the whitening. It is also better to avoid tobacco use. These products will not stop the teeth from whitening, but may delay the whitening process.

You may wish to top up the whitening again in around one year to 18 months time.

TIP: Generally avoiding strongly stained foods will keep the teeth whiter, for longer.

Teeth whitening is contraindicated in patients who:

Are pregnant or lactating
Are allergic to any of the ingredients
Are under the age of 14
Have untreated decay or severely broken teeth

Alternative treatment to whitening would be to have veneers or crowns placed on the teeth. Though these can be good for some patients, they usually require drilling preparation of the natural teeth.

Any photographs that have been taken may be used for illustration purposes and on our website or practice marketing materials. No reference to you will be made and only the area immediately around the mouth will be visible. Please write 'NO' on the line if you are not happy for us to use the photographs that we may take of your teeth

TIP: remember to smile as much as possible and show off your new white smile!

I have read the above information and had the chance to ask any questions. Any questions I had have been answered and I fully understand the treatment I am consenting to, as well as any risks and alternatives.

Patient name and sign:	Dentist name:
Date:	