

Consent — Having a Tooth Taken Out

Tooth extraction (XLA)

This form explains what having a tooth out involves, the benefits, the risks, and the alternatives, so you can make an informed decision. Please read it, ask us anything you are unsure about, and sign at the end if you are happy to go ahead.

What this treatment is

An extraction means removing a tooth completely. Sometimes this is simple; sometimes we need to ease the gum back, remove a little bone, or divide the tooth into pieces to take it out gently. Occasionally, to protect important structures (such as a nerve) or because of your medical history (for example a tendency to bleed), we may remove only the top of the tooth and leave the root in place — this is called decoronation.

Why we may recommend it (the benefit)

Taking the tooth out can relieve pain, remove infection, or deal with a tooth that cannot be saved. We will always explain why we are recommending it for you.

Alternatives

Depending on the diagnosis there may be other options. We will have considered: root canal treatment, a filling, a crown, gum treatment, removing only the top of the tooth (leaving the root), or doing nothing. We will talk these through with you.

Risks and things that can happen

- Pain or discomfort, bleeding, swelling, bruising and a stiff jaw — these can last several days.
- Infection in the socket. This may need antibiotics and/or further treatment. If antibiotics are needed, a further appointment and the cost of the visit and the medicine will apply.
- Less common: a 'dry socket' (loss of the blood clot); loss or loosening of nearby fillings or crowns; injury to nearby teeth or soft tissues; jaw fracture; an opening into the sinus (upper back teeth); or swallowing/breathing in a tooth fragment or restoration.
- Small pieces of root can break off. Depending on size and position, they may be left safely in the jaw or may need a further small procedure to remove.
- **Nerve disturbance.** It can be impossible to avoid touching, stretching or bruising nerves in the jaw. This can cause numbness, tingling, itching or burning of the lip, tongue, chin, teeth or mouth — usually temporary, but rarely permanent.
- Taking the tooth out may not relieve your symptoms, and further treatment may be needed.

Local anaesthetic (the numbing injection)

You will have a local anaesthetic injection. Rarely, people react to the anaesthetic (allergy or other reaction) or have temporary or, very rarely, lasting injury to nerves or blood vessels from the injection. The injection site may feel sore afterwards, and your jaw may ache from being open.

If you take blood thinners

Blood thinners (for example warfarin, apixaban, rivaroxaban, dabigatran, edoxaban or clopidogrel — aspirin is usually lower risk) increase the chance of heavier or longer bleeding. Please tell us before treatment. We may need extra measures such as a dressing in the socket and stitches, may need to check your INR (for warfarin) and time the appointment carefully, and may occasionally advise speaking to your GP or specialist first. This can mean extra treatment, extra cost, or that we defer the extraction or arrange it in a specialist setting.

If you take bisphosphonates or similar bone medicines

If you take, or have ever taken, bisphosphonates or other anti-resorptive / anti-angiogenic medicines (for example alendronic acid, risedronate, ibandronate, zoledronic acid, denosumab, or some cancer treatments), please tell us before treatment. Rarely these can stop the jaw bone healing properly after an extraction, a condition called MRONJ (medication-related osteonecrosis of the jaw). The risk is higher with injected forms and longer use. We may take extra precautions, choose a more conservative approach, or recommend referral to a specialist / oral surgery service.

Seeing a specialist

This treatment can also be done by a specialist. Where there are complicating factors (such as blood thinners, bisphosphonate use, a difficult or surgical extraction, or a complex medical history), you can ask to be referred. By signing this form you confirm you understand the risks and choose to have your own dentist carry out this treatment, and that you can ask to see a specialist if unexpected difficulties arise.

Notes & customisation

Your consent

My consent. I have read and understood this information. I have had the chance to ask questions and have them answered. I understand what the treatment involves, its benefits and risks, the alternatives, and that I can refuse all or part of it at any time. I understand no guarantees have been made about the result. I agree to go ahead with this treatment, on the basis of this form together with what my dentist discusses and personalises with me on the visit, and the Home Visit Terms & Important Information that apply to all treatments.

Patient (or representative) name

Relationship to patient (if not the patient)

Patient / representative signature

Date

Dentist name

Dentist signature & date

Our **Home Visit Terms & Important Information** (which apply to all treatments) form part of this consent and are provided alongside it.