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Dear Patient / Legal Representative;

To be informed about your health condition / your patient's health condition and all kinds of medical, surgical or diagnostic procedures recommended for you / your patient and their alternatives, benefits, risks and even possible harms, and to reject, accept all / some of them or the procedures to be performed. You have the right to stop at any stage. This document, which we want you to read and understand, has been prepared not to scare you or keep you away from medical practices, but to inform you and obtain your consent in determining whether you will consent to these practices. Before deciding whether to accept the oral and dental health services and recommended treatment offered by our center, all kinds of treatment and examination procedures are subject to patient permission and approval in accordance with **Article 14 of the Medical Deontology Regulation**. Before starting treatment, if the patient has systemic disorders (**heart, diabetes and blood disease, blood pressure, goiter, epilepsy, etc.**), **an infectious disease (hepatitis, etc.)**, is receiving **chemotherapy or radiotherapy, is pregnant or suspected of being pregnant, has asthma or is allergic to any drug**, if any. It is important for both his own safety and the physician to share the medications he uses with his physician. Please read the information form below carefully about the treatments to be applied by your dentist and sign the form. Ask your doctor to explain anything you do not understand.

**TO INFORM**

PRELIMINARY DIAGNOSIS: : .....

PLANNED TREATMENT/PROCEDURE:.....

NAME/SURNAME OF THE PHYSICIAN WHO WILL PERFORM THE PROCEDURE:.....

**INFORMATION ABOUT THE TRANSACTION:**

- **GRAFTING** literally means compensating/complementing the missing tissue. In case of bone loss from the jaws due to age-related osteoporosis or other reasons, grafting may be required to make a prosthesis or implant in these areas or during implant application.
- In **GUIDED TISSUE REGENERATION (GDR)** operation, following local anesthesia, a gingival incision is made in the relevant area and the gum is removed. Inflammatory tissues and diseased root surfaces in the area are cleaned. Then, a resorbable or non-dissolvable membrane is placed to cover the bone defect and/or bone graft to prevent the gum from migrating between the bone and tooth surface, which would impair healing. The gum is stitched.
- The stitches are removed after approximately 2 weeks. If the membrane used is a non-dissolvable type, the membrane is removed with a second minor surgical procedure after 6-8 weeks; if it is a soluble type, there is no need for a second surgery.
- There are alternatives for the materials used in bone grafting. The patient's own bone can be taken from a suitable area and placed in the area. Although the ideal graft is the graft taken from the patient himself, human or animal bone or tissue-friendly materials manufactured synthetically and subjected to various sterilization methods can also be preferred.
- You/your companion may need to take an x-ray to examine the teeth and surrounding tissues in detail at the beginning of the treatment, during the treatment and after the treatment for control purposes.

**EXPECTED BENEFITS FROM THE PROCESS:**

- In case of bone loss from the jaws due to age-related osteoporosis or other reasons, grafting may be required to make a prosthesis or implant in these areas or during implant application. There are alternatives for grafting bone tissues. The patient's own bone can be taken from a suitable area and placed in the area.
- Sufficient bone level will be provided for the prosthesis (implant/total prosthesis).
- It ensures that the jaws are positioned in their correct relationship. Therefore, healthier and more comfortable restorations can be made with graft applications.

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**CONSEQUENCES THAT MAY BE ENCOUNTERED IF THE PROCEDURE IS NOT IMPLEMENTED:**

- It can be kept under maintenance treatment without any treatment other than dental scaling and routine checks. In this case, destruction may continue in the relevant area and tooth loss may subsequently occur.
- If the grafting process is for implant application, the implant cannot be placed as there will not be enough distance to be placed and the implant cannot be applied with the desired success or the implant application cannot be done at all.
- Since there will not be enough bone during the prosthesis phase, total prosthesis retention will not be achieved.

**ALTERNATIVES TO THE PROCEDURE, IF ANY:**

- No treatment may be performed other than dental scaling and routine check-ups. Apart from this, the gum on the tooth is removed following the gum incision made under local anesthesia, just to provide the physician with better visibility and access to the diseased area. Inflammatory tissues and diseased root surfaces in the area are cleaned and the gums are sutured without any material (Flap operation).

**RISKS AND COMPLICATIONS OF THE PROCEDURE:**

- During planned treatments and procedures, local anesthesia-related or routine surgical complications may develop.
- If you have a history of allergy to local anesthesia, heart disease, blood diseases, high blood pressure or other general health-related conditions, be sure to warn your physician.
- Your doctor is not responsible for any problems that may occur due to misrepresentation. Pain, swelling, burning, infection, temporary or permanent nerve damage and unexpected allergic reactions may develop during and after local anesthesia application. Allergic reactions; Itching, rash, nausea, vomiting, difficulty breathing, increase (tachycardia) or decrease (bradycardia) in heart rate, may be life-threatening with a very low probability.
- Successful results may not be achieved due to reasons such as poor oral hygiene, missing appointments, and not following the doctor's recommendations and warnings regarding treatment.
- Your doctor is not responsible for any problems that may occur due to misrepresentation.
- Bleeding is the most important of these. If you are using an anticoagulant drug such as Aspirin, Coumadin, Plavix, you must stop using it 3 days in advance. Due to bleeding during the surgery, the surgery can be terminated by tamponade. Packing with local anesthesia or another surgery may be required to stop bleeding after surgery. Due to blood loss, intravenous blood transfusion may be required.
- Drop in blood pressure and pulse: There may be fluctuations in pulse and blood pressure during or after the procedure. This event may even lead to loss of consciousness and fainting.
- Pain: You may feel anesthesia-related pain in the area during and after anesthesia. Additionally, headaches may occur during and after the procedure.
- Nervous complications: Temporary or permanent neural damage (complete numbness, hypersensitivity) may occur after anesthesia, although rarely.
- Nausea and vomiting: May occur during or after the procedure. In such cases, the necessary intervention can be made by the physician and the relevant healthcare team.
- **Infection:** Each injection is made with syringes used once. Apart from this, disinfection of the area also provides control of infection that may occur after the procedure.
- Complications related to muscles: After anesthesia, there may be limitation of movement due to muscle stiffness in the application area and a decrease in mouth movements.
- Subsequent anesthesia applications: Anesthesia may be repeated due to reasons such as anatomical differences that vary from person to person, the length of the procedure, the patient's low pain threshold and the patient stating that he or she feels pain from the procedure. The number of applications is planned as the patient's systemic condition allows.
- Allergic reactions: Depending on the foreign reaction created by the anesthetic solution in the person's body, mild reactions such as skin rashes, rashes and itching may occur, as well as serious effects that may include shortness of breath, decreased pulse, decreased blood pressure and cessation of breathing and heartbeat. These may occur as soon as anesthesia is applied, or they may occur hours after the procedure.
- Damage the patient may cause to himself: Since the effect of anesthesia continues for a while after the tooth extraction or procedure is completed, the patient may harm himself due to biting.
- The need to remove dentures and replace them after treatment, exposure of the membrane if a membrane is used, early removal if necessary, and loosening of the teeth.
- If the patient moves suddenly during anesthesia, the local anesthetic needle may break or the anesthesia may be applied to the wrong place.

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- Especially during the extraction of posterior teeth, color changes may be observed on the face due to narrowing of the vessels in this area, which may last several hours.
- There may be general discomfort after the operation. There may be swelling that may require other additional treatments. Infection may develop, which may require other additional treatments.
- Injuries may occur to the nerves that control facial muscles. This condition may develop either immediately after the surgery, due to the complete cutting of the nerves during the surgery, or a few weeks after the surgery, due to edema or pressure around the nerves. In both cases, it may be permanent.
- Visual impairment or blindness may occur. There may be damage to the tear glands or ducts.
- There may be damage to the salivary glands or ducts. There may be slowly healing cracks and mouth sores that may occur due to tension in the corners of the mouth. Restriction in opening the mouth during recovery; This may occur due to swelling or muscle damage, or it may develop as a result of stress on the joint if there is a jaw joint problem.
- There may be a fracture in the jaw bone. There may be injury to the nerve lying under the teeth in the lower jaw; Consequently, there may be pain, numbness, tingling and sensory disturbances in the cheeks, lips, tip of the jaw, gums and tongue, which may persist for several weeks, several months or, in rare cases, permanently. There may be damage to the teeth or restorations (fillings, coatings).
- Although rare, graft loss may occur after the procedure. The graft taken from the patient or ready-made may not adhere to the bone at all and healing may not be achieved. If the patient's gums are thin and there is no attached gum, the stitches may open, the graft may be exposed, and graft loss may occur.

#### **ESTIMATED DURATION OF THE PROCESS:**

- The procedure time varies depending on the extent of the operation, its complexity, the number of implants and complications during the procedure, but it can take an average of 1 to 2 hours.

#### **POSSIBLE UNDESIRABLE EFFECTS OF THE DRUGS TO BE USED AND POINTS TO BE CONSIDERED:**

- If local anesthesia is to be applied to provide pain control during treatments, if necessary, the gums or the inner part of the cheek are first anesthetized with a topical anesthetic substance (spray). When the area is numb, anesthetic liquid is injected with a syringe and the tooth and the area where it is located are numbed for a while. After local anesthesia, although rare, the patient may experience allergic reactions, loss of sensation, bleeding, temporary muscle spasms, and temporary facial paralysis.
- Local anesthesia is a successful application as long as there are no anatomical differences or acute infections in the area. When local anesthetic substances are applied to the area to be treated, they temporarily stop nerve conduction and provide numbness **for 1-4 hours**, depending on the amount of the substance applied and the place of application. For this reason, eating and drinking is not recommended until the numbness subsides to prevent wounds on the inside of the cheek and lips due to biting.
- In case of bleeding during the application, various haemostatic drugs (Transamine amp and K vit.amp. etc.), various haemostatic medical materials, anti-inflammatory agents, graft-membrane material, periodontal pastes can be used when necessary. An allergic reaction may occur to the active ingredients contained in these agents.
- You will need to use some medications during and after the procedure. The medications your doctor recommends you use will have some side effects. These side effects include nausea, vomiting, weakness and drowsiness, and anaphylactoid reactions.

#### **THINGS THE PATIENT SHOULD CONSIDER BEFORE AND AFTER THE PROCEDURE:**

- The procedure can also be performed locally/regionally/infiltratively. Therefore, **take aspirin, vitamin E, coenzyme Q, etc. for 3 days before the procedure.** You should not take blood thinners such as: If you are using medication or similar substances, or if you have an infectious disease such as AIDS, Hepatitis B/C, or a problem such as diabetes, heart, high blood pressure or kidney failure, you must inform your doctor.
- Before giving an anesthetic agent, your doctor should be informed about any systemic disease, pregnancy, any medications used, or any allergic condition. Excessive use of alcohol and cigarettes weakens the effect of anesthesia. It then hinders the healing process.
- Avoid sudden movements (moving the head, intervening with hands) while performing the procedure inside the mouth. Failure to pay attention may cause injuries to the surrounding tissue and adjacent teeth.
- The rate of lung infection (microbial diseases), thrombosis, heart and lung complications (adverse situation) is higher in smokers. Quitting smoking 6 weeks before the procedure may help reduce the risk.
- Oral care (mouthwash, etc.) should be taken into consideration to protect against infections.

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- After the application, nothing should be eaten or drunk for 2 hours, and soft and warm foods and drinks should be consumed in the first days. There may be a period of sensitivity to cold hot drinks and foods.
- If your pain complaint persists, please contact your physician.
- In case of an existing systemic disease or if any medication you use due to a disease prevents or negatively affects the surgical treatment to be performed, you may be asked for consultation from your relevant doctor regarding the relevant disease and drug use. As your dental treatment continues, different or additional treatment needs may arise from the treatment plan determined at the first examination. You will be informed by us if there are changes.
- After the procedure, ice should be applied externally to the procedure area to reduce swelling and bruising.

**PROBLEMS THAT MAY OCCUR IF NOT PAY ATTENTION TO THE POINTS THAT MUST BE FOLLOWED:**

- Your doctor will inform you about the problems you may experience if you do not pay attention to the precautions.
- The mouth tampon should not be removed for half an hour after the application, the tampon should not be changed frequently and spit out. Blood coming into the mouth should be swallowed, otherwise your bleeding will increase.
- Wound areas should not be opened and tampered with, otherwise your stitches will open and the wound will become infected.
- You should not drink or eat anything for the first 2-4 hours, and soft and warm foods and drinks should be taken on the other days.
- After the procedure, attention should be paid to oral cleaning (brushing teeth, etc.) to protect the extraction site from infections. Since stitches will be applied after the procedure if necessary, regular dressings must be made after the procedure until the area heals, and periodic check-ups must be made on the dates determined by the physician.

**HOW TO REACH MEDICAL HELP ON THE SAME ISSUE IF NECESSARY:**

- Not accepting treatment/surgery is a decision you will make with your free will. If you change your mind, you can personally reapply to the clinics/hospitals that can perform the treatment/surgery in question.
- In case of possible side effects related to the practices performed in our institution, emergency interventions will be carried out by the responsible physician and relevant healthcare personnel. If you encounter any complications; You can apply to our clinic without an appointment. **Phone: +90 232 330 04 67/68**

• **Medical research:** Reviewing clinical information from my medical records for the advancement of medical study, medical research, and Physician education; I give my consent provided that the patient confidentiality rules in the patient rights regulation are adhered to. I hereby consent to the research results being published in the medical literature as long as patient confidentiality is protected. I can refuse to participate in such a study.

