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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:

- **IMPLANT-SUPPORTED PROSTHESES** are an alternative treatment method for traditional dentures. The purpose of placing dental implants to make a fixed or removable prosthesis on the implant; It is to provide support and retention for crowns, bridges, removable or fixed prostheses in cases where natural teeth are not available.
- Basically, it refers to placing specially produced titanium screws into the jaw bones where one or more teeth are missing and connecting appropriate crown-bridge or removable prostheses to the retaining mechanisms on them.
- As can be seen, implant-supported prosthesis treatment is a two-step treatment method that requires direct participation of the patient in terms of cost. Good treatment planning is very important for the success of the treatment and patient satisfaction. Measurements can be taken again for prostheses, or if the patient has a usable prosthesis, implant connections can be made to this prosthesis. It requires a high degree of patient compliance.
- The patient's expectations, general health status and condition of the jaw bones are factors that directly affect the treatment. For this reason, the physician who will perform surgical and prosthetic procedures will examine you together and want to perform various procedures for planning.
- Treatment planning can only be shared with you and submitted for your approval at the end of this stage. Despite all these precautions, it should not be forgotten that biological tissues are studied and changes in treatment planning may be necessary due to unpredictable factors at various stages.
- Before starting, during and after treatment, you may be asked to have various radiological examinations (periapical radiography, panoramic radiography, intraoral tomography) for surgical or prosthetic reasons.
- **Implant Treatment:** Implants made of titanium, similar to the root form, are placed in the jaw bones and prostheses are planned to replace the lost teeth. The aim of this treatment is to treat the problem caused by tooth loss and to increase chewing efficiency. Implants are placed surgically. First, an incision is made on the soft tissue in the area where the implant will be placed. The bone is exposed and the implant slot is prepared with special tips. The implant screw is placed in this slot opened in the jawbone, and the area is closed with stitches. The stitches are removed after a week. It is normal to experience mild pain and swelling during this one-week period. It is usually left to heal for 2–4 months, longer if necessary. Parts that will support the prosthesis are attached. The next stage is the construction of the prosthesis.
- **Prosthetic Treatment:** Prosthetic treatment to be applied begins at the planning stage of implant-supported prosthesis treatment. Your expectations for the final prosthesis, your systemic and intraoral condition, and the fact that a significant portion of the treatment materials will be provided by you for a fee will have an impact on the prosthetic treatment plan. In the initial phase of treatment, the fees you pay for the purchase of implant screws and surgical procedures do not include prosthesis construction fees. You must pay a separate fee for fixed or removable prostheses

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placed over your implants. In this case, treatment fees will be covered by you. Especially in cases where teeth are completely or partially lost, it may be necessary to make some prostheses for the surgical stage (surgical templates or some prostheses that you need to use immediately after the surgical stage). In this case, treatment fees will be covered by you. In cases of partial or total edentulism, you may need to use temporary dentures following the placement of implants. You may not be able to use these prostheses after the end of treatment. Treatment expenses for these prostheses will be covered by you. The construction of partial and total dentures, or fixed dentures, can only be started 10-15 days after implant healing caps are installed. Some disruptions during the surgical phase or the healing process may require deviating from the recommended treatment plan or using extra materials to carry out this treatment plan. New treatment planning will be carried out with your approval. However, you may still need to pay again for some materials to be used in this planning.

EXPECTED BENEFITS FROM THE PROCESS:

- There is no need to cut/reduce the teeth adjacent to the edentulous area, which is required in the construction of classical fixed prosthesis.
- Neighboring teeth are protected and more functional and aesthetic fixed prostheses can be made. It can be used to help increase retention in removable dentures.
- Patient comfort is provided along with increased function and aesthetics.

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

- If a removable prosthesis is not made; Functions such as chewing and speaking cannot be performed properly and aesthetic problems arise. If there is decay if the procedure is not performed, it may progress, your current complaints may continue, and when it becomes untreatable, your tooth may be extracted.
- The alternative is implant treatment. With implant-supported removable dentures, retention, function and aesthetic concerns are reduced and patient comfort is ensured. Pain is felt during the procedure and the risk of bleeding may increase afterwards or the procedure may not be performed.
- Fractures in severely damaged teeth, insufficiency in chewing function in cases where tooth deficiencies are not treated with bridge prostheses, teeth shifting or elongating towards the gap may change the closure, caries in adjacent teeth, gum problems, speech and aesthetic disorders, jaw bone melting, joint problems.

ALTERNATIVES TO THE PROCEDURE, IF ANY:

- If the patient is not uncomfortable with being toothless, he/she may not have a denture.
- Your missing teeth can be treated with classical methods other than implant-supported dentures. Alternative treatments to implant-supported dentures are fixed or removable dentures.
- There is no need to cut/reduce the teeth adjacent to the edentulous area, which is required in the construction of classical fixed prosthesis. Neighboring teeth are protected and more functional and aesthetic fixed dentures can be made. It can be used to help increase retention in removable dentures. Patient comfort is provided along with increased function and aesthetics.
- The most suitable one of these prostheses varies from person to person depending on factors such as the number of remaining teeth, which teeth the remaining teeth are, their location in the mouth, their placement, the health of your teeth, the importance you attach to your oral care, and your general health condition.
- In cases where tooth deficiencies cannot be restored with implant-supported dentures, it is recommended that you treat your missing teeth with other classical approaches that your doctor deems appropriate.

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.
- Habits that may cause trauma to teeth/implants, such as smoking, alcohol addiction, teeth grinding, pose a risk for the success of implant treatments, so be sure to consult your physician on these issues before starting treatment.
- Many problems may occur in implant-supported fixed and removable prostheses, which may vary from patient to patient. Some of these problems are listed below:
 - o Infection in the gum around the implant, bone loss in the neck area of the implant, bone loss around the implant, partial or complete loss of connection of the implant with the bone, resulting in the necessity of surgical removal of the implant
 - o Screw loosening, screw jamming, aspiration and swallowing as a result of screw loosening

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- o Screw breakage, fractures in the neck area of the implant, fractures in the upper part of the implant, which we call the abutment,
- o Complete removal of the implant as a result of its inability to connect with the bone
- In fixed implant-supported dentures, in addition to many different problems that are not limited to the problems mentioned below but vary from patient to patient, problems similar to dentures applied to natural teeth may occur.
 - o Inability to achieve the ideal aesthetic appearance in cases such as insufficient amount of bone and inability to provide adequate support to the cheek and lip, the appearance of the neck area of the implant, the reflection of the metal color from the gum, and restrictions that may occur regarding the color or shape of the prosthetic teeth.
 - o Removal of the occlusive material in screw-retained crown and bridge prostheses, screw loosening, removal or loss.
 - o The prosthesis cannot be positioned properly as a result of the implant not being positioned ideally or the implant cannot be used as a support for the prosthesis.
 - o In implant-supported dentures, food gets stuck and air escapes into the areas prepared for cleaning by the patient.
 - o Loosening or dislocation of the crown or bridge on the implant supports,
 - o Fractures, spillings in crown or bridge materials (porcelain, metal, etc.),
 - o Occlusal adjustment may be required for prostheses
 - o Need to replace crowns and bridges,
- In removable implant-supported dentures, in addition to many different problems that are not limited to the problems listed below but vary from patient to patient, problems similar to dentures applied to natural teeth may also occur
 - o Food accumulation under the prosthesis
 - o Dentures causing dents
 - o Wear and deterioration of the implant holders, rubber or metal parts due to use, deterioration of the holder parts as a result of misuse and the need for renewal. Replacement of these parts is mandatory and requires the patient to pay an additional fee.
 - o Dislocation or loss of the attachment part of the prosthesis. In this case, replacement of the parts is mandatory and the patient must pay an additional fee.
 - o Decreasing and loosening of denture retention over time, need for feeding in dentures.
 - o Fractures or cracks in prostheses
 - o Problems with speech
 - o Occlusal adjustment needs
 - o Fractures or cracks in dentures, dislocation or breakage of denture teeth, wear over time.
 - o Discoloration of the prosthesis material, deterioration or wear due to time or misuse, and the need to completely replace the prosthesis. You should definitely consult your doctor as soon as possible for any problems that may occur with implant-supported dentures.

ESTIMATED DURATION OF THE PROCESS:

- 20 business days for fixed and removable implant-supported dentures.

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 used 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.

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THINGS THE PATIENT SHOULD CONSIDER BEFORE AND AFTER THE PROCEDURE:

- The procedure can 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.
- 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.
- The completion of prosthetic treatment does not mean that you will not come to our clinic again. Check-up appointments to be notified to you by our physician are important.
- Daily care and home care are important for implant-supported dentures. In order to be able to use your prostheses and implants for many years, it is vital for you to attend check-up appointments and clean them in accordance with your doctor's recommendations.
- All dentures show fatigue in various ways over time. Due to this fatigue, some parts of your prosthesis may need to be renewed or replaced over time.
- As with traditional prostheses, implant-supported prostheses may require renewal over time. As long as the implants are not damaged, this does not require any action other than the renewal of the prosthesis. However, you may have to pay for these treatments.
- You must use the night plate recommended by your doctor regularly. You should see a dentist every six months for a check-up.
- If your doctor has applied a Botox procedure, this application should be renewed every 6 months.

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.
- 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.
- In order to avoid oral and gum problems, denture and intraoral care must be done regularly.
- In case of a complaint or problem regarding the prosthesis, the patient should not try to fix it himself and should consult his physician.
- In some diseases (systemic lupus) and in very rare cases, sensitive people may develop allergies to the materials used in the construction of all prostheses. Follow your doctor's recommendations.
- Getting used to dentures is a matter that takes some time. During this process, patients should take small bites into their mouths, chew the food slowly without opening their lips, and use both right and left sides while chewing. In the first days of wearing the dentures, it is recommended not to eat soft foods (hard foods, nuts, etc.) and not to chew gum.
- You must use the NIGHT PLATE recommended by your doctor regularly. If there is a BOTOX PROCEDURE applied, this application should be renewed every 6 months. Otherwise, there is a high probability of fractures and falls.

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 am aware that I may refuse to participate in such a study and that this refusal will not adversely affect my treatment in any way.



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APPROVAL

I have read the above information and have been informed by the physician who has signed below. I was informed about the purpose, reasons and benefits, risks, complications, alternatives and additional treatment interventions of the treatment/procedure to be performed. I approve this transaction consciously, without needing any further explanation, without any pressure. (**Hand written "I READ, UNDERSTAND, RECEIVED A COPY"**)

.....

<u>Patient</u>	<u>Signature</u>	<u>Date/Time Consent Received</u>
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Name-Surname (**hand written**)

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...../...../.....

IF THE PATIENT CANNOT CONSENT:

<u>Patient / legal representative</u>	<u>Signature</u>	<u>Date/Time Consent Received</u>
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Name-Surname (**hand written**)

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REASON FOR THE PATIENT'S FAILURE TO CONSENT (TO BE FILLED IN BY THE PHYSICIAN):

I will inform the patient/legal representative whose name is written above about the disease, the treatment/procedure to be performed, the purpose, reason and benefits of this treatment/procedure, the care required after the treatment/procedure, the risks and complications of the treatment/procedure, the alternatives of the treatment/procedure, if necessary for the treatment/procedure. If necessary, adequate and satisfactory explanations have been made about the type of anesthesia to be applied and the risks and complications of anesthesia. The patient/legal representative has signed and approved this form with his/her own consent, stating that he/she has been adequately informed about the treatment/procedure.

<u>PHYSICIAN WHO WILL APPLY THE TREATMENT/PROCEDURE</u>	<u>Signature</u>	<u>Date / Time</u>
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Name and Surname:.....

...../...../.....

Title :.....

IF THE PATIENT HAS A LANGUAGE / COMMUNICATION PROBLEM;

I translated the explanations made by the doctor to the patient. In my opinion, the information I translated was understood by the patient.

<u>Translator's</u>	<u>Signature</u>	<u>Date / Time</u>
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Name and Surname (**hand written**):

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EXPLANATION:

- You can apply to the **Patient Rights Unit** during the day for all your complaints about medical practices or any issue you want to address.
- **Legal Representative:** Guardian for those under guardianship, parents for minors, and first degree legal heirs in cases where these.