

Stage 1 | Assessment and treatment planning

Step 3

Consultation and consent

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Overview



Assessment and treatment planning



Step 1 | Patient's expectations,
history and examination



Step 2 | Treatment planning



Step 3 | Consultation and consent



Step 4 | Fabrication of the surgical drill template

Surgical procedures



Step 1 | Implant surgery



Step 2 | Post-operative review and suture removal

7–10 days

6–8 weeks

Prosthetic procedures



Step 1 | Abutment insertion, modification and
relining of a lower complete denture



Step 2 | Lab-side relining of a lower complete
denture



Step 3 | Insertion of the final overdenture and
patient instructions

1 week

Aftercare and maintenance



Step 1 | Review visit

3–6 months
(or as necessary)



Step 2 | Maintenance visit



In clinic with patient



Office / Lab work

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Introduction






After you have thoroughly evaluated the findings from the patient's expectations, history and examination, and the [Treatment Planning](#) steps in your office, this module guides you in preparing a comprehensive discussion, in order to gain the patient's

acceptance for treatment. This discussion is an important stage of communication with your patient and a key factor for a successful treatment outcome. It is also essential for patient motivation and compliance. Although the information and documentation, such as a signed consent*, in this step are highly relevant, this consultation should serve as more than just a legal step in the patient's treatment. Successful practice building also relies on this important step.

Be prepared for a comprehensive discussion with the patient to gain acceptance of implant treatment.

Learning objectives

-  Be able to discuss the ideal treatment plan and any open questions with the patient, along with risks, benefits and alternatives to the proposed treatment.
-  Use the detailed information provided to obtain informed consent from the patient before the start of implant treatment.
-  Discuss financial aspects and payment options.

*Statutory provisions may vary between countries



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1. Discussion
with the patient




1. Recommendations for discussion with the patient

- Do not provide too much information at a time and only focus on what is essential.
- Avoid medical and technical terminology.
- Use paraphrases, pictures, animations and drawings.
- Hand out information in written form.
- Do not provide important information that requires making a decision immediately prior to the surgical procedure.
- Allow enough time to answer questions.

How to structure your discussion with the patient for a successful consultation.



2. Checklist of information for the patient

- ☐  General patient information on dental implants
- ☐ Overall treatment time: total treatment time generally takes 3 to 4 months for a straightforward case from placing the implants until delivery of the overdenture
- ☐ Number, frequency and duration of appointments
- ☐ Type of implant and material to be used
- ☐ Expected discomfort from the procedures and period of limited denture comfort
- ☐ Approximate estimation of treatment costs and maintenance
- ☐ Limitations of treatment
- ☐ Consequences of not performing any treatment (e.g. denture instability)
- ☐ Possible alternative treatment options
- ☐ Post-operative care and medications
- ☐ Expectations for patient's compliance and information on long-term care:
 - Maintenance schedule and estimated involved costs
 - Consequences of not returning for follow-up
 - Importance of oral hygiene maintenance at home
 - Information that biological complications could occur and that dentists are not liable for these cases
- ☐ Financial management of failure
 - What kind of failures will be covered by the dentist
 - What costs will the patient be responsible for

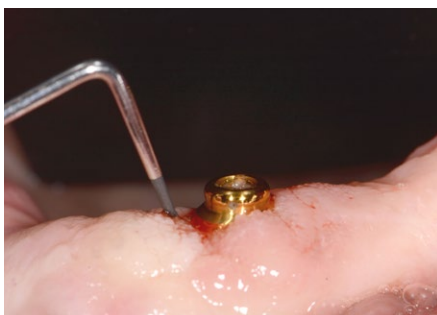
The kind of information you should provide to your patient.



3. Risks and complications associated with dental implants

Generally, more than 80 % of implant-supported overdentures remain in continuous service after 10 years.¹ It is important to note that published data cannot serve as a guarantee for any particular implant case. Nevertheless, you should:

- Be informed about the expected survival and complication rates of implants and implant-supported overdentures
- Be able to discuss examples of some long-term complications associated with implants:



- Peri-implantitis
- Loss of retention
- Wear/corrosion of retentive elements
- Fracture of overdenture
- Abutment screw loosening
- Loss of retention (Matrix activation change of LOCATOR® Replacement Males)
- Loss of stability (Rebasing or relining of the overdenture)

Your patient should be informed about precautions and complications, in particular due to mishandling and neglected hygiene.

Your patient should be informed that no major social events should be planned during the week following implant placement.

Immediately after the insertion of dental implants, your patient should avoid any physical exercise.

A very high proportion (> 80%) of implant-supported overdentures are still in use after 10 years.

Be aware of the risks and complications that are possible with implant treatment.

Inform your patient of the need for good oral hygiene.

Inform your patient of the need to refrain from exercise and social events immediately following implant placement and for the week thereafter.



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3. Risks and complications



The patient may experience some temporary symptoms such as:



- Pain
- Bleeding
- Swelling or peri-implant inflammation
- Bruising
- Difficulty in wound healing
- Difficulties in normal mouth opening affecting speech or eating.

Warn your patient about temporary post-operative symptoms.

More severe and persistent complications can include:

- Chronic pain in connection with the dental implants
- Nerve damage leading to transient or permanent anesthesia, paresthesia or dysesthesia
- Localized or systemic infection
- Injury or damage to inferior alveolar nerve or lingual nerve, which can result in transient but sometimes permanent numbness of the lip, tongue, chin, or mucosa
- Fracture of implant(s), bone or denture
- Non-osseointegration of implants, peri-implantitis.

Inform your patient about other possible post-operative symptoms and complications.



4. Obtaining informed consent from the patient


As oral and written consent are legally required in most countries, you should ask the patient to sign an informed consent form, preferably 24 hours prior to any treatment. We advise you to keep a record of the nature of the conversation with your patient, the information provided and the patient's decision.

A signed, written informed consent can serve as documentation should any legal issues arise. The structure and content of the consent form may depend on the law in individual countries. You should individualize the consent form for each patient according to the specific requirements of the case.

Ensure that the patient understands what has been explained and that they have consented to the procedure.

The written informed consent should include:

- **Diagnosis**
- **Recommended treatment**
- **Surgical and prosthetic phases of procedures**
- **Benefits and alternatives**
- **Common risks and limitations**
- **Consequences of not performing the treatment.**

Here is an example of a  [Surgical Consent Form for Dental Implantation](#) used in standard situations.

Ensure your patient understands and signs a consent form verifying that they are fully informed and accept the procedure and its risks and benefits.



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5. Final steps
during patient
consultation



5. Final steps during patient consultation

1. Agree on the expected outcome of the treatment to set the basis for the chosen treatment procedure.
2. Arrange an appointment with your [🔗 dental technician](#) and your patient for duplication of the denture for an X-ray and [🔗 surgical drill template](#).

Plan the fabrication of a surgical drill template with your dental technician.



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REFERENCE

- 1 Rentsch-Kollar A, Huber S, Mericske-Stern R. Mandibular implant overdentures followed for over 10 years: patient compliance and prosthetic maintenance. J Prosthodont 2010;23(2):91–98.



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DISCLAIMER

Straumann® Smart is a blended training and education program focused on the education of general dentists who want to become surgically active in the field of dental implantology. The program is limited to information pertaining to straightforward implant cases and focuses on a reduced portfolio of products that are suitable for the treatment of such cases.

All clinical Straumann® Smart content – such as texts, medical record forms, pictures and videos – was created in collaboration with Prof. Dr. Christoph Hämmerle, Prof. Dr. Ronald Jung, Dr. Francine Brandenburg-Lustenberger and Dr. Alain Fontollet from the University of Zürich, Clinic for Fixed and Removable Prosthodontics and Dental Material Science, Switzerland.

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