



LETTER OF AGREEMENT

COOPERATION: THE BIGGEST SINGLE ITEM IN SUCCESSFUL ORTHODONTIC TREATMENT!

Proper oral hygiene is absolutely necessary. Poor oral hygiene may result in decalcification (permanent white markings on the teeth which are early stages of decay), gum disease, bone loss, or decay. Braces protect the teeth, but the accumulation of food and plaque surrounding the braces must be thoroughly removed after eating. The patient will be instructed on brushing and flossing techniques and advised to use a fluoride rinse daily. It will be necessary to limit sugar intake and avoid foods such as POPCORN, NUTS, ICE and CHEWY OR HARD CANDY AND HARD OR CRUNCHY FOODS. DRINKING SODAS DAILY CAN LEAD TO DECALCIFICATION AND DECAY.

IT IS ESSENTIAL THAT OUR INSTRUCTIONS REGARDING THE WEAR AND CARE OF APPLIANCES BE CAREFULLY FOLLOWED. Failure to wear elastics or headgear (when prescribed) may cause a poor result and/or result in longer treatment time. Please bring all removable appliances to the office for adjustment. Broken appliances and missed appointments may increase the time of treatment. In case of breakage, call our office for an emergency appointment. If a patient breaks appliances excessively an extra fee may be accessed. (See attached breakage policy.)

APPOINTMENTS: Appointments are scheduled at intervals for best treatment progress. They will be scheduled approximately every 3 to 8 weeks; average time is 15-30 minutes. We will attempt to schedule most appointments at your convenience; however, some appointments will be during school. We can assure you that these will be kept to the minimum consistent with the proper progress of treatment. After school appointments are reserved for brief procedures. Any appointments requiring more time such as appliance placement, repairs and major adjustments will be made in the morning or early afternoon hours. This allows most regular adjustments to be scheduled after school hours. If any part of the braces becomes loose, broken, or deformed, **contact the office as soon as possible and prior to your next appointment to schedule an appropriate time for repair.** This is very important since time reserved for regular appointments does not allow extra time for repairs. MISSED APPOINTMENTS are important factors which can lengthen treatment time and adversely affect the quality of the final results.

DENTAL CHECK-UPS: Check-ups should be scheduled with your family dentist to ensure early detection of cavities, and for six month cleanings and fluoride treatments. Adults should maintain thorough cleanings every three to six months during treatment. If it is possible to remove and replace arch wires for cleaning appointments, we will help coordinate these appointments with your family dentist. We need 6-8 weeks prior notice to be able to coordinate with your dentist's schedule. **Routine use of fluoride mouth rinse along with proper brushing and proper flossing is critical to the long term health and appearance of your teeth.**

TREATMENT TIME: Treatment time in appliances may vary from six months to thirty plus months depending on degree of difficulty. Following active treatment, retainers are usually worn for six months full time and at night indefinitely. Retainers following Phase I are usually worn only at night.

DISCONTINUATION OF TREATMENT: Occasionally, the development of unforeseen circumstances which may interfere with success of the treatment occur. Such circumstances may pertain to lack of patient cooperation, failure to keep a high standard of oral hygiene, or failure to adhere to the financial agreement. However, unless a satisfactory solution is reached, the orthodontic service will be discontinued.

VACATION: If you plan to be on vacation for an extended period of time, please advise us so that we may adjust your appliances before you leave and as soon as you return.

TRANSFER FROM PRACTICE: In the event of a move prior to completion of treatment, the initial fee and monthly balance must be paid up to date. We will then forward a copy of your diagnostic records to your next Orthodontist once we receive their request.

TRANSFER INTO PRACTICE: Current x-rays and diagnostic records are required to evaluate treatment progress and services needed to complete orthodontic care. There is a special reduced fee for transfer records. The fee for treatment will be on a monthly basis until active treatment is completed. The deband/retention fee will then be due.

POTENTIAL RISKS: The benefits of correcting a malocclusion will, in nearly every case, outweigh the potential risks; however, you should be aware of the following:

ROOT RESORPTION-SHORTENING OF ROOT ENDS: This occurs in a small percentage of patients. In most cases, the shortened root ends are not a disadvantage; however in the event of gum disease, it could affect the longevity of the teeth. Root resorption also occurs from trauma, impaction, heredity endocrine disorders, and for other unknown reasons. Incorrect elastic wear may also contribute to root resorption.

TEMPOROMANDIBULAR JOINT (T.M.J.) PROBLEMS: Although rare, this may occur. Tooth alignment or bite correction can improve tooth-related causes of T.M.J. pain, but not in all cases. Many factors including stress, trauma, heredity, and clenching appear to play a role in joint pain.

NERVE DAMAGE: A tooth that has been traumatized from a deep filling, or even a minor blow, can die over a long period of time, with or without orthodontic treatment. An undetected non-vital tooth may flare up during orthodontic treatment, requiring root-canal treatment.

PERIODONTAL DISEASE: Periodontal (gum and bone) disease can develop or worsen during orthodontic treatment due to many factors, but most often due to lack of adequate oral hygiene. You must have your general dentist, or if indicated, a periodontist monitor your periodontal health during orthodontic treatment every 3-6 months. If periodontal problems cannot be controlled, orthodontic treatment may have to be discontinued prior to completion.

HEADGEAR: Headgear or appliances that are worn inappropriately, worn during active sports or play or “horsed around with” can cause eye or facial injuries. Wear instructions must be followed to the letter.

GROWTH PATTERNS: Occasionally a person, who has grown normally and in average proportion, may not continue to do so. If growth becomes disproportionate, the jaw relation can be affected and the original treatment objectives may have to be compromised. Skeletal growth disharmony is a biological process beyond the control of the orthodontist.

IMPACTED TEETH- TEETH UNABLE TO ERUPT NORMALLY: As an aid to orthodontic treatment, it is sometimes necessary to remove permanent teeth. When teeth are extracted, it is possible that small spaces may open in the extraction site after the braces are removed. This space is seldom a health or cosmetic problem. If a space does occur and it is a problem, it may require restorative dental procedures such as bonding to close the space. When teeth are impacted and the treatment of choice is to try to orthodontically move these teeth into proper alignment, it may be necessary to have these teeth surgically exposed. When surgery is performed, there may be some compromise of tissue or bone, and it may be necessary to repair this soft tissue or bone. It is also possible that the impacted tooth will not respond to orthodontic treatment. It would, therefore, have to be removed. It is very difficult to project a specific amount of treatment time necessary to properly align an impacted tooth, therefore, aligning an impacted tooth often prolongs the total time in orthodontic treatment.

EXTRATIONS: Some cases will require the removal of deciduous (baby) teeth or permanent teeth. There are additional risks associated with the removal of teeth which you should discuss with your family dentist or oral surgeon prior to the procedure.

FEE FOR TREATMENT: The treatment fee is based on the severity of the malocclusion and the length of active treatment required. In some instances the treatment may be completed before the payments. In other instances the payments may be completed before the treatment. It is customary that the account be current or paid in full prior to the removal of the appliances. The fee does not include work done by the general dentist or any work done by another dental specialist if it becomes necessary during the course of treatment.

ORTHODONTIC INSURANCE: The financial responsibility for dental services lies with the patient. Dental insurance is a contract between the patient and their insurance company. Insurance is filed as a courtesy to our patients. Verification does not guarantee payment by your insurance carrier(s). The actual processing and payment of benefit is determined by your employer and carrier only. **Any amount not paid by your insurance will be your responsibility.**

It is important to know that most insurance companies do not pay their portion in one lump sum. Most insurance companies make an initial “down payment,” followed by either monthly or quarterly payments over the course of treatment. Please check your insurance balance prior to

cancelling any policy you have in place. If there are any changes in your insurance information, please notify Molly Wheeler or Gina Brown in the billing department at 615-377-7777.

RETENTION PHASE: Retention appliances are designed to complete the last phase of orthodontic care. The treatment fee includes one set of retainers and all appointments for 1 year following active treatment. Appliances must be worn as directed. The doctor and staff are not responsible for dental shifting due to patient negligence in not wearing retainers as prescribed. The American Association of Orthodontics recommends life time retention.

Satisfactory corrections of an orthodontic problem can only be obtained if everyone concerned accepts their responsibilities and gives their full cooperation. By following these general office policies the doctor and staff are able to provide quality orthodontic care under the most favorable circumstances for our patients. Your understanding and cooperation is appreciated.