

Informed Consent For Dental Implants

To avoid legal litigation and to improve doctor-patient relationship, a valid consent for the implant treatment planning is essential. The patient should fully understand and agree to the various stages of the treatments as planned. The consent should be a continual process before and during each stage of the implant surgeries. A tailor-made consent or designed by the patient's own words have been proposed but the dentist must use his professional judgment and to decline any demands that is beyond the dentist's capacity and trainings. Good communication plays a major role during the consent procedures.

UNDERSTANDING INFORMED CONSENT

To improve the quality of implant services and communication, written consent has been suggested to replace the traditional verbal format.

It plays important roles in patient education and doctor-patient relationship. The patient wants to be part of the decision-making process in treatment planning. Most dentists recognise their ethical and moral obligations to discuss treatment planning with their patients. (1)

The present climate of increasing levels of litigation suggests valid consent must be obtained before any surgery begins. Otherwise, any physical contact may be considered as assault.

The process of consent starts when the patient makes an appointment and continues throughout all stages, it is not a single event. Although the law considers verbal consent is sufficient for general procedures, however, implant surgeries require written consent especially when sedation is involved. (2)

HOW TO OBTAIN CONSENT

Consent can be informed or implied and expressed consent. By sitting in the dental chair and opening the mouth indicate their agreement to a minor procedure such as examination. It does not imply he/she agrees to other treatments.

Expressed consent is when a patient indicates either orally or in writing that they agree to undergo complicated

surgeries. Signed consent may be invalidated if patient is rushed to sign or confused or unsure at the time. Professional or translating help is needed for incapable or patients with language barriers. A second opinion can be obtained for certain cases. Signature is only the evidence of discussion of the proposed treatment and consent is never a 'blind contract'.

For consent to be informed, patient must be given full explanation of the proposed treatment inclusive of risk and benefits details and also have been given chance to question. All questions should be answered truthfully. A duty of disclosure of all seriousness of risks is necessary. Dentists should adapt a usual practice of informing all patients in similar circumstances of all specific risks. Good communication means equal interactive participation between dentist and patient.

Consent can be withdrawn and regularly re-validated throughout treatment. Leaflets containing additional information are useful for complex procedures. Lists may be of assistance but cannot be regarded as sufficient.

Different forms are designed for under 18 and disabled patients. If a child rejects to a procedure, a written consent by the guardian may not be accepted. Customisation of consent form is essential for local situations.(3) A tailor-made consent form can be designed even in the patient's own words, which can improve the communication process and expression of understanding.

Staff mandatory training is important for improvement of consent process.