

Dr. Earl Minuk's Cosmetic SkinClinic & Laser Centre

Informed Consent for WhiteSpa Teeth Whitening Process

**Please read, print, complete.
Bring signed copy to our Clinic treatment day.**

Introduction

The following information is provided to me, so that I can make an informed decision about having my teeth cosmetically whitened. I am dissatisfied with the present colour or shade of my teeth and understand my teeth may achieve a whiter appearance by using the WhiteSpa Process. I am aware that a Dentist does not supervise the procedure and Dr. Minuk's SkinClinic is not a Dental facility.

Description of the Procedure

The process is designed to lighten the colour of my teeth using a combination of a peroxide-based gel and a specially designed lamp. The process consists of two major steps. First, the whitening gel will be applied to my teeth. Second, my teeth will be exposed to the light from the lamp to begin the whitening actions. During the entire process, a plastic retractor will be placed in my mouth to keep it open. Lip balm will also be applied as needed and I will be provided a pair of protective eyewear. Treatment will take about an hour and I can expect to be at the Clinic for 1-1/2 to 2 hours.

Alternative Treatments

I am aware of alternative treatments:

- Whitening Toothpaste; white-strips
- Other In-office Whitening Treatments provided by a dentist
- Other over-the-counter Whitening Gels
- Take-home Whitening Kits

Costs

I understand that the cost of my WhiteSpa process is determined by my aesthetic professional. I understand that only natural teeth may whiten and that any restorative material exposed to the whitening gel and light will not whiten. It may be necessary to have these materials replaced by my dentist to match the new tooth shade. I have taken into account this possibility and will bear these costs on my own.

I AM AWARE THAT A 72 HOUR CANCELLATION NOTICE IS REQUIRED TO CANCEL OR CHANGE AN APPOINTMENT AND FAILURE TO PROVIDE ADEQUATE NOTICE MAY RESULT IN A \$150 ADMINISTRATION FEE.

Side-effects

I understand that the results of the WhiteSpa process may vary or regress due to a variety of circumstances. I understand that almost all natural teeth can benefit from the WhiteSpa process, and are not intended to lighten artificial teeth, caps, crowns, veneers or porcelain, composite or other restorative materials. Teeth darkly stained yellow or yellow-brown frequently achieve better results than people with grey or bluish-grey teeth. I understand that teeth with multiple coloration's, bands, splotches or spots due to tetracycline use or fluorosis may have less dramatic whitening results. I understand those teeth with fillings; cavities may not lighten and are usually best treated with other nonbleaching alternatives. I understand that the WhiteSpa process is not recommended for pregnant or lactation women, or clients under the age of 16 years.

I understand that the results of my White Spa Process cannot be guaranteed.

I understand that whitening treatments are considered generally safe by most dental professionals and are sold over-the-counter to individuals. I understand that although my aesthetician has been trained in the proper use of the WhiteSpa process, the treatment is not without side effects. I understand that some of the potential side effects of this treatment include, but are not limited to:

Tooth Sensitivity – During the first 24 hours after a WhiteSpa process, some clients can experience some tooth sensitivity. While uncommon with WhiteSpa process, tooth sensitivity is a common side effect of peroxide-based tooth whitening. It is usually mild, but it can be worse in susceptible individuals. Normally, tooth sensitivity following the use of peroxide-based whitening products subsides within 24 hours. People with existing sensitivity, recently cracked teeth, abfractions (micro-cracks), open cavities, leaking fillings, or other dental conditions that cause sensitivity may find that those conditions increase or prolong tooth sensitivity after the WhiteSpa process.

Gum Irritation – In rare cases, whitening gel may come in contact with the gum tissue during the process and may cause inflammation or whitening of your gums or gum line. This is due to inadvertent exposure of a small area of those tissues to the whitening gel. The inflammation and/or whitening is usually temporary and will subside almost immediately, white colour change in the gum tissue will revert within 30 minutes.

Dry Lips – The WhiteSpa process may take up to an hour during which the mouth is open for the entire treatment by a plastic retractor. This could result in dryness or chapping of the lips or cheek margins, which can be treated by application of lip balm, petroleum jelly, or Vitamin E cream.

Effects– After the WhiteSpa process, it is natural for the teeth to regress somewhat in their shade over time. This is natural and should be very gradual, but exposing the teeth to various staining agents can accelerate it. I understand that the results of the process are not intended to be permanent and therefore, repeat or touch-up process may be needed for me to maintain the tooth shade I desire for my teeth.

In signing this informed consent I am stating that I have read the entirety of this form and I fully understand all the information provided; including the possible risks, complication and benefits that can result from the Natural WhiteSpa process, and furthermore, I agree to undergo the treatment as described by my aesthetic professional.

Signature

I have read and understand the entire document and that I give my permission for the WhiteSpa process to be performed on me.

Signature: _____ **Date:** _____

1. Personal Information

Name (print): _____ Birth date: _____
Address: _____ City: _____ Postal code _____
Manitoba Health Number _____
Phone: home _____ work _____ cell _____
Email: _____ @ _____

2. Medical Information:

i) Are you taking any medications, blood thinners, anti-inflammatory pills or ASA? Yes No (circle)

Please list: _____

ii) Do you have allergies to medications? Yes No (circle)

Please list: _____

iii) Have you ever been diagnosed with hepatitis or HIV? Yes No (circle)

iv) Are you a smoker? Yes No **Do you have diabetes?** Yes No

v) List any medical problems or history including liver, chest, heart or kidney disease

vi) Please indicate which cosmetic procedures you have had in the past:

- Botox Restylane, Sculptra or Juvederm Filler Photo-facial
- Fraxel or Pixel laser Spider leg vein therapy Thermage
- Cosmetic laser treatment of facial veins, brown spots or wrinkles
- Laser hair removal
- Other (including cosmetic surgery) _____
- Dental teeth whitening: Please list types _____

vii) Do you have veneers, crowns or teeth bonding? Yes No

viii) Are you pregnant or breast-feeding? Yes No not applicable

ix) Are you interested in information on any of our cosmetic treatments and procedures?

List the ones of interest: _____

3. How did you hear of Dr. Minuk’s SkinClinic & Laser Centre

- Advertisement: TV radio Free Press Sun other ad _____
- Friend or family member Internet search drive by or live in area news/tv article Doctor referral
 - yellow pages/phone book

4. How do you rate the usefulness of our website?

- Very helpful helpful just OK needs work

Comments: _____

I wish to be notified of email promotions and new treatments

Email: _____ @ _____