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## **Patient Receipt of The Facts About Fillings**

I hereby acknowledge that I have received a copy of The Facts About Fillings provided by Prestige Dental. I have reviewed the contents of this document and have been given the opportunity to address all questions and concerns regarding this Document with my doctor prior to my treatment.

Patient Name	_
Patient Signature	_ Date
If Minor: Name of Parent or Guardian	Relationship
Signature of Parent or Guardian	Date

As required by Chapter 801, Statutes of 1992, the Dental Board of California has prepared The Facts About Fillings to summarize information on the most frequently used restorative dental materials. Information on this document is intended to encourage discussion between the patient and dentist regarding the selection of dental materials best suited for the patient's dental needs. It is not intended to be a complete guide to dental materials science.

The most frequently used materials in restorative dentistry are amalgam, composite resin, glass ionomer cement, resin-ionomer cement, porcelain (ceramic), porcelain (fused-to-metal), gold alloys (noble) and nickel or cobalt-chrome (base-metal) alloys. Each material has its own advantages and disadvantages, benefits and risks. These and other relevant factors are compared in the attached document. The statements made are supported by relevant, credible dental research published mainly between 1993 - 2001. In some cases, where contemporary research is sparse, we have indicated our best perceptions based upon information that predates 1993.

The reader should be aware that the outcome of dental treatment or durability of a restoration is not solely a function of the material from which the restoration was made. The durability of any restoration is influenced by the dentist's technique when placing the restoration, the ancillary materials used in the procedure, and the patient's cooperation during the procedure. Following restoration of the teeth, the longevity of the restoration will be strongly influenced by the patient's compliance with dental hygiene and home care, their diet and chewing habits.

Both the public and the dental profession are concerned about the safety of dental treatment and any potential health risks that might be associated with the materials used to restore the teeth. All materials commonly used (and listed in The Facts About Fillings) have been shown -- through laboratory and clinical research, as well as through extensive clinical use -- to be safe and effective for the general population. The presence of these materials in the teeth does not cause adverse health problems for the majority of the population. Some dental materials contain chemicals on the State of California's Proposition 65 list of chemicals known to the state to cause reproductive toxicity and other harm. With all dental materials, the risks and benefits should be discussed with the dentist, especially for those in susceptible populations.

All dental restorative materials (as well as all materials that we come in contact with in our daily life) have the potential to elicit allergic reactions in hypersensitive individuals. These must be assessed on a case-by-case basis, and susceptible individuals should avoid contact with allergenic materials. Documented reports of allergic reactions to dental amalgam and composite resin exist (usually manifested by transient skin rashes in individuals who have come into contact with the material), but they are atypical. Other dental materials that have elicited significant concern among dentists are nickel-chromium-beryllium alloys used predominantly for crowns and bridges. Approximately 10% of the female population are alleged to be allergic to nickel.1 The incidence of allergic response to dental restorations made from nickel alloys is surprisingly rare. However, when a patient has a positive history of confirmed nickel allergy, or when such hypersensitivity to dental restorations is suspected, alternative metal alloys may be used. Please let your dentist know if you have a known allergy or hypersensitivity to any material.

1 Merck Index 1983. Tenth Edition, M Narsha Windhol z, (ed).