

**ACKNOWLEDGMENT AND CONSENT FOR EXTRACTIONS**

Alternatives to removal of teeth have been explained to me (root canal, crown and bridge procedures, periodontal therapy, etc.) but I am choosing to have the tooth/teeth extracted instead. I understand the risks involved in having teeth removed, some of which are pain, swelling, spread of infection, and dry socket. I agree to follow the instructions given to me at the end of my procedure to ensure adequate healing. I understand that I may need further treatment by a specialist if complications arise during or following treatment, the cost of which is my responsibility. I agree to address any questions and/or concerns with Dr. Linkous before the procedure begins.

\_\_\_\_\_

Print Patient's Name

\_\_\_\_\_

Signature of Patient/Legal Guardian

\_\_\_\_\_

Date

Patient's estimated out-of-pocket expense for today: \$ \_\_\_\_\_

**\*\*\* Please note the following:**

Dr. Linkous will decide if you should need a mild narcotic after the extraction to help with any discomfort that may arise. If you are given a prescription, the following policy will apply: If you experience pain at the extraction site, and you have taken all of the pain medication, you will be required to come back to the office for an examination before we can refill the prescription. The most common cause of extended pain after an extraction is a dry socket, which requires in-office medications to be placed directly in the socket. Pain medication will not alleviate this type of pain. Therefore, the pain must be assessed to determine the cause before further prescriptions will be authorized. There will not be a charge for this visit, if the pain is a result of a dry socket. However, if we cannot find adequate cause for the pain, patients could be charged an office visit fee. There will be no exceptions to this policy