Braces Removal and Retainer Consent Form

Ι	am happy with the

the consent to remove my (my child's) braces/appliances. Thank you 🙂

Congratulations! On your approval today your braces are coming off to unveil your beautiful smile! You are now entering an important phase of your treatment—the Retention Phase.

Completed orthodontic treatment does not guarantee perfectly straight teeth for the rest of your life. Teeth have a memory and often try to move back to their original positions. Retainers are required to keep your teeth in their new positions. Regular retainer wear is necessary for lifetime as your body is continually undergoing growth and maturation. Minor irregularities, particularly in the lower front teeth may occur. In summary, you need your retainers to keep your teeth as straight as possible. But even with good retainer wear, your teeth may move slightly

Retainer Instructions and Responsibilities

end results and I shall now give Dr_

I understand that I have the following responsibilities:

1. Wear my removable retainers 22 hours a day (including sleeping) for the first year

followed by "3 times a week night-time for life-time" wear.

- 2. Do not wear my removable retainers during eating to prevent damage.
- 3. Keep my removable retainers in the proper case when not wearing them.
- 4. Maintain my scheduled retention appointments as prescribed by my dentist with special interest in orthodontics
- 5. Bring removable retainers to my retention appointments.
- 6. Clean around my fixed bonded wire retainer thoroughly. Will consider seeing hygienist if plaque scores are higher.
- 7. If your retainer breaks or is not fitting properly call 01206 769695 immediately to get it checked by the dentist and possibly have it mend or replaced. This may incur a



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charge which will be mentioned when you come to see our dentist.

Lost or Broken Retainers

Your retainers are made using only the best possible material. If a retainer is lost or damaged, call us on 01206 769695 immediately to schedule an appointment. There will be a laboratory charge per retainer replacement.

If further treatment is required due to unexpected growth or noncompliant retainer wear, additional charges will be applied.

I understand the above information. I have had an opportunity to ask any questions and I have had those questions adequately answered.

Patient:

Parent/Guardian:

Date:

