



CAMBRIDGE ACADEMY OF
DENTAL IMPLANTOLOGY

CHECKLIST

CONSENT

ENSURE THAT THE FOLLOWING HAVE BEEN CARRIED OUT AND RECORDED

- ☐ Patient informed of the clinical findings and diagnosis
- ☐ Patient informed of any concerns regarding accuracy of the diagnosis
- ☐ Patient informed of all treatment alternatives (e.g. bridges, dentures, orthodontics) and the risks/benefits/approximate costs of each option
- ☐ Patient informed of option to have no treatment, and of any associated risks of having no treatment
- ☐ All material risks for the specific case discussed with the patient
- ☐ Prognosis for proposed treatment explained to the patient
- ☐ Expected benefits of the proposed treatment discussed
- ☐ Patient given an opportunity to ask questions
- ☐ Patient asked if he/she has any particular concerns
- ☐ Full consent process backup up as a written document
- ☐ Patient declares that they fully understand all information discussed



CAMBRIDGE ACADEMY OF
DENTAL IMPLANTOLOGY

- ☐ Patient and dentist sign 2 copies of the consent document (one copy given to the patient and the other filed in the clinical records)
- ☐ Consent revalidated verbally at each appointment
- ☐ Sufficient time allowed for the patient to consider treatment (for non-emergency elective implant treatment we recommend a minimum of 2 weeks)