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**Re: INFORMED CONSENT**

**By STATE LAW, we are required to advise patients of the diagnosis, method and manner of proposed endodontic therapy, possible complications, and alternative treatments.**

**Endodontic (root canal) procedures have a high degree of clinical success, ranging from \_\_\_\_\_ . Many factors influence the treatment outcome: the patient's general health, periodontal bone support, strength of the tooth due to cracks, cavities, fillings, shape and condition of the nerves within the roots. The tooth may normally be sensitive following appointments and even remain tender for some time after treatment is completed. Fractures are one of the main reasons why root canals fail. Unfortunately, some cracks that extend into the root are invisible and hard to detect. Crowns (caps) are frequently placed over completed root canal therapy for protection. Proper oral hygiene is necessary as root canal teeth can still decay. Although endodontic therapy is highly successful, it is still a biological procedure, so it cannot be guaranteed. Occasionally, a tooth that has a root canal may require retreatment, surgery, or even extraction.**

**Complications are extremely rare. Associated risks include: postoperative discomfort or swelling, infection, trismus (restricted TMJ jaw opening), instrument breakage, root perforation, sinus perforation, paresthesia (nerve numbness), restoration damage, inability to negotiate full length of canals due to severe curvature or calcification, lost temporary, damage to adjacent hard or soft tissues, tooth discoloration, allergic reaction to prescribed medication.**

**I hereby authorize Drs. Kenneth Parks/P. Cole Riley Jr. and assistants of choice to treat tooth/teeth# \_\_\_\_\_ for \_\_\_\_\_ .**  
**(Name)**

**Alternative treatment including no treatment \_\_\_\_\_**

**I have been given the opportunity to discuss treatment and question the doctor. Yes or No**

**Patient's Signature \_\_\_\_\_**

**Parent/Guardian Signature \_\_\_\_\_**  
**(If Minor)**

**Witness \_\_\_\_\_**

**Date \_\_\_\_\_**