DR AFSHIN YOUSEFPOUR
Chirurgie Plastic du Visage
Chirurgie Maxillo-Faciale

Medical information and informed consent form

Implant surgery

Treating surgeon: Dr Afshin Yousefpour

Specialty: Oral and maxillofacial surgery

Patient:

Surname and first name: .....

Date of birth: .....

Date of surgery: .....

Planned implant site(s): .....

1. Description and purpose of the procedure

The procedure consists of the surgical placement of one or more titanium (or zirconia) dental implants in the jaw bone. The aim is to create a stable anchorage that will later support a dental prosthesis (crown, bridge or stabilised removable denture).

The surgeon has first assessed the feasibility of the procedure with clinical and radiological examinations (in particular 3D imaging / CBCT).

2. Surgical risks and potential complications

Like any surgical act, implant placement carries uncertainties and a risk of immediate or delayed complications, even when carried out according to best practice and current scientific knowledge:

- **Common post-operative complications:** Pain, swelling, bruising, moderate bleeding or temporarily limited mouth opening.
- **Infections:** A local infection may occur after surgery, requiring antibiotics, drainage or, exceptionally, early removal of the implant.
- **Nerve complications:** In the lower jaw, there is a risk of injury, stretching or compression of the inferior alveolar nerve or the lingual nerve. This can cause altered sensation (paraesthesia, hypoaesthesia, numbness, tingling or dysaesthesia) of the lower lip, chin or tongue. These injuries are usually reversible within a few weeks to several months, but in rare cases may be prolonged or permanent.
- **Sinus or other anatomical complications:** In the upper jaw, there is a risk of perforation of the sinus membrane, displacement of the implant into the maxillary sinus, or reactive sinusitis.
- **Injury to adjacent structures:** Risk of trauma, root injury or loss of vitality of a healthy neighbouring tooth.
- **Bone complications and haematomas:** Risk of fracture of a bone wall or of a haematoma in the floor of the mouth that may require urgent treatment.

3. Implant failure rate and risk factors

Although implantology has a high overall success rate (between **95 % and 98 %**), there is no such thing as zero risk. The rate of early failure (lack of osseointegration) or late failure (later loss of bone anchorage) lies between **2 % and 5 %**.

Failure may be due to various factors unrelated to the surgical technique:

- **Biological failure of osseointegration:** The tissue does not bond, or fibrous tissue forms around the implant, with no obvious medical explanation.
- **General and immune factors:** Impaired bone healing, poorly controlled diabetes, bone diseases, deficiencies or certain medications.
- **Smoking and alcohol:** Smoking severely impairs the small blood vessels of the bone and multiplies the risk of implant loss by 3 to 5.
- **Infectious complications:** Early or late peri-implantitis, linked in particular to residual gum bacteria.
- **Poor oral hygiene:** Insufficient care of the tissues around the implant.
- **Mechanical stress:** Bruxism (teeth grinding), excessive bite forces or premature loading of the implant.

4. Financial arrangements in case of failure

Medicine and surgery are subject to an **obligation of means** and not to an obligation of result.

In the event of implant loss, biological rejection, lack of osseointegration or any complication requiring removal of the implant or further surgery:

- **All fees and costs relating to the further surgery, the removal of the failed implant, the placement of a new implant and any associated additional procedures (such as bone grafting, filling, membranes or follow-up imaging) remain entirely and exclusively payable by the patient.**
- The costs already incurred for the first procedure remain due and are in no case refundable.

5. Patient’s undertakings

The patient formally undertakes to:

- Report any change in their general health or medication.
- Follow carefully the medical prescriptions and post-operative instructions given by Dr Afshin Yousefpour.
- Maintain strict oral hygiene.
- Attend all post-operative check-ups and regular follow-up appointments.

Declaration and signature

I, the undersigned, ..., confirm that I have:

- Read and fully understood all the information in this document.

- Received clear and detailed explanations from **Dr Afshin Yousefpour** about the nature, course, risks and limits of the proposed procedure.
- Had enough time to think and been able to ask all relevant questions, to which satisfactory answers were given.
- Accepted, with full knowledge, the surgical risks and the financial conditions in case of implant failure set out in section 4.

Signed at ....., on ..... in two original copies.

(Add the handwritten words "Read and approved, agreed")

Signature of the patient (or legal representative):