

## **Temporomandibular Joint Disorder Consent**

I understand that **Temporomandibular Joint Disorders ( TMD )** are not cured and that they are managed. I am aware that the goal of my TMD soft guard therapy is to reduce my pain and to allow me to become more comfortable with my disorder.

I understand that Dr. Padolsky offers no **guarantees of success**. He and his staff promise to do their best in assisting me to manage my TMD problem.

My initial TMD program is limited to a **six weeks** evaluation period and includes **four** visits. I agree to **comply** with Dr. Padolsky's instructions and if I can not comply, I will inform Dr. Padolsky, or his assistant, of any problem.

I realize that all TMD treatment after my six week TMD program is at an additional cost to me. I understand that the human mouth is complex and that one patient can have many problems. I am aware that the six week TMD program does not include any other dental care.

I understand that it is my responsibility to arrange, pay for and receive any additional necessary care, such as medical evaluation, chiropractic evaluation, physical therapy, and/or massage therapy.

I am aware that additional treatment may be needed to improve my condition after my six week TMD program and that the soft guard does not correct my bite in any way. The soft guard is only a TMD management appliance.

If I later need or desire to correct my bite, I am aware that I have the option of doing this. I understand that I may later choose to have additional dental therapy including ( but not limited to ) orthodontics and/or dental reconstruction and that the cost of this treatment are not included in my six week TMD program.

I have had all my questions answered regarding this procedure and it's potential risks to me. I understand consent form and the staff have answered all of my questions related to the six week TMD program.. I give permission to allow Dr. Padolsky and the staff at the Atlanta Dental Group PC to treat me.

**Patient ( or Guardian ) Signature:**

**Dental Staff Signature:**