

Re: NTI consent

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From: The Webby (*nospamatthetmjatroepidemic_at_san.rr.com*)

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In article <dbekc058v93kd5geeav2uig36afsvfpd8q@4ax.com>, "Joel M. Eichen, D.D.S." <joeleichen@yahoo.com> wrote:

> *This is from a DentalTown dentist.*

>

> *Any comments?*

I have some comments to share.

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> *He offers this for your use*

okay...

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> *Dr. B. writes,*

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> *I've been re-working my information and consent forms for the NTI.*

> *Any feedback is appreciated. If you like it, feel free to lift the*

> *copy and use it for yourself...*

Standardization of consent forms would be something important to consider. Obviously, not all patients are created equally so there would be additional information related to the individual patient's condition. (There aren't any guarantees in medicine/dentistry that I know about...)

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> *Wear the appliance for one week, and then return for adjustment and*

> *refinement (This follow-up appointment is very important). The*

> *appliance is primarily worn while sleeping, however, daytime wear may*

> *be required in extreme situations or during stressful times.*

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Is it important to have a standard "one week follow up appointment" or should this time frame be flexible (fill in the blank)? If it is "very

important" for one dentist to see his patients at one week, should it not be equally important for all? If not, then a "fill in the blank" follow up might be better. This isn't so much a matter of consent as it is an instruction for the patient.

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> *Never wear an NTI-TSS appliance while eating (doing so may be painful and possibly traumatic to the opposing teeth).*

Why would anyone want to do that anyway? Maybe it would be because of previous "splint therapy" experience with instructions that the appliance was to be worn 24/7 except for duri