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Family & Implant Dentistry

Informed Acceptance of Dentures at Wax Try-In

What is a wax try-in? A wax try-in is a preliminary viewing of your denture(s) with the teeth set in a gum-colored wax. It is used by you and Dr. Zaugg to evaluate and achieve the desired appearance of the final denture before the final denture is made.

Why is this step so important? The wax try in step is the point at which any changes to the appearance of the teeth can be made easily. But once the wax try-in has been approved by you, the final denture will be processed (completed) directly from the wax denture. The completed denture cannot be adjusted for appearance again. It is very important that you make sure the appearance of the denture teeth is completely satisfactory at the wax try-in appointment.

What is our office policy? We encourage you to take time and address any questions at the wax try-in appointment(s) to ensure satisfactory results. We recommend that a family member or friend accompany you to help evaluate the wax try-in appointment. When you have approved the look of the wax denture try-in and the final denture is made, **we cannot change or remake a final denture** due to your dissatisfaction with the appearance of the denture without an additional fee being charged.

I have had the opportunity to evaluate the dentures appearance at the wax try-in stage and I am satisfied with all the following...

1. Color of denture teeth (shade is not too light or too dark)
2. Size of each denture tooth (width and length are not too big or small)
3. Amount that denture teeth show when I smile (the teeth don't show too much or too little)
4. Fullness of lip support (lip is not too full or too sunken)
5. Overlap of the front teeth (upper and lower teeth bite together the way I like)

I approve the denture(s) appearance at the wax try-in stage, and understand that the appearance will be the same as in the completed/final denture. I understand that additional fees will be charged for changes/remakes of final denture(s) if any requests for changes involving appearance are made by me.

Risks and limitations of removable prosthodontics- Dentures (full, partial, immediate)

I understand that dentures are not natural teeth and may not function like natural teeth. Becoming accustomed to wearing, functioning, and speaking with dentures takes time, effort, and commitment on behalf of the patient. Dentures may, at times, feel loose or become loose due to changes in the supporting structures of the jaw(s) and remaining teeth, if any. I accept and understand that denture (partial or full) treatment results are subjective; thus, the outcome of my treatment plan may not completely meet my expectations. I accept and understand that dentures (full or partial) made within six (6) months of tooth/teeth extraction(s) may become ill-fitting as the gum tissues around the extraction site(s) shrink, which may require the denture to be relined or replaced at an additional cost. I accept and understand that if gum tissue shrinkage occurs, the denture (partial or full) could become difficult to wear, and could require the aid of denture adhesive in order to be worn. I understand that my dentures, implants and/or natural teeth (specifically with partial dentures) still require regular brushing, flossing and continued care. Dentures (full overdentures or partial dentures) do not protect my teeth, supporting bone and gum tissue from decay or periodontal disease. I accept and understand that the final opportunity to make a change in my denture (including shape, fit, size, placement or color) is during the "Wax Try-in" visit. I understand that once I agree to have the denture finished at the "Wax Try-in" visit, the design and appearance of the denture are "locked in", and any changes after this time will incur additional costs that could be significant and may require the denture to be remade at my expense (full cost of new denture). Adjustments are often needed with new dentures, and will be included in the original fee for 90 days following delivery of the dentures, after which our regular adjustment fee will be incurred.

Risks and Limitations of this, and any, denture are as follows:

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| • Looseness of denture | • Soreness of gum tissue | • Breakage or wear of denture |
| • Difficulty wearing denture | • Shrinkage of gum and bone | • Use of denture adhesive |
| • Food particles slipping under denture | • Need for reline, readjustment or replacement (additional cost) | • Change in speech or appearance |

Patient Signature

Date

Doctor Signature

Date