

## Composite & Porcelain Veneers Consent Form

### Treatment Information

You are choosing to have **veneer treatment** to improve the shape, colour, and appearance of your teeth. Veneers may be **composite** (layered directly on the tooth) or **porcelain** (custom-made ceramic shells). These treatments are **cosmetic and elective**.

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### Important Information

- Tooth preparation may involve removing a small amount of enamel.
  - Veneers do **not change tooth position**, but can improve the appearance.
  - Results depend on your natural tooth colour, bite, and oral health.
  - Veneers may need repair or replacement over time.
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### Risks and Possible Issues

I understand that:

- ☐ Sensitivity may occur after treatment
  - ☐ Veneers may chip, stain, or wear over time
  - ☐ Gum irritation or temporary discomfort may occur
  - ☐ Colour matching may not be exact
  - ☐ Composite veneers may stain faster than porcelain
  - ☐ Porcelain veneers may require permanent removal of enamel
  - ☐ Veneers may need to be replaced in the future
  - ☐ Irreversible changes occur when enamel is removed
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### Alternatives Discussed

- ☐ Teeth whitening
  - ☐ Orthodontic treatment (braces or aligners)
  - ☐ No treatment
  - ☐ Other cosmetic options
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### Patient Responsibilities

- Maintain good oral hygiene
- Avoid biting hard objects (ice, pens, nails)
- Attend regular check-ups and cleans
- Wear a night guard if recommended

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### Consent

I confirm that:

- The veneer options, procedure, risks, and alternatives have been explained to me.
- I understand this treatment is cosmetic and results cannot be guaranteed.
- I consent to proceed with **composite** / **porcelain** veneer treatment (circle one):

Teeth numbers: \_\_\_\_\_

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Dentist Signature: \_\_\_\_\_ Date: \_\_\_\_\_