

AS4U - Consent for FINAL CEMENTATION



Dentistry & Orthodontics

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Treating Provider:
Tooth/Teeth #:

The nature and type of material used in my crowns, bridges and/or veneers has been explained to me. By signing below I acknowledge and authorize the material discussed to be used in my mouth. I have been given the opportunity to view my crowns, bridges and/or veneers as processed, either on models or placed in my mouth prior to final cementation.

I approve the color, shape, feel and overall appearance of the porcelain. I understand that once the Porcelain/PFM is cemented in my mouth, the factors of color, shape, feel and overall appearance cannot be changed without additional and possibly significant time being taken and fees assessed. I further understand that removing cemented porcelain may create the risk of injury or breakage to the underlying teeth and will destroy the porcelain, requiring a remake. I further understand that if I authorize cementation and later decide I do not like the restorations, any replacement(s) of the cemented restorations will be at full cost.

By signing this Consent for Final Cementation I give A Smile 4U, LLC my consent for final cementation, acknowledge my approval of the appearance and authorize use of the discussed material.