



Aspen Springs Dental
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Informed Consent for Crown, Bridges & Veneers

I _____ understand that sometimes it is not possible to match the color of natural teeth exact with artificial teeth. I further understand that I may be wearing temporary crowns, which may come off easily and that I must be careful to ensure that they are kept on until the permanent crown/bridge/veneer, is delivered.

I realize that the final opportunity to make changes on my new crown, bridge, or veneer (including shape, size, fit, and color) will be at the prep appointment, before fabrication takes place at the lab and before cementation.

It has been explained to me that occasionally crown/bridge/veneer procedures may result in need for future root canal treatment, which can not always be predicted or anticipated.

I understand that cosmetic procedures may affect tooth surfaces and may require modification of daily cleaning procedures.

Patient Name (printed) _____

Patient Signature _____

Date: _____

Doctor's Signature _____

Witness Signature _____