

(949) 833-2263 www.lifeoralhealth.com

PATIENT'S CONSENT FOR PHLEBOTOMY AND PRF

Name								Date//				Tooth					
Procedure																	
Upper Right	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Upper Left
Lower Right	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	Lower Left

EXPLANATION OF PRF: Platelet-rich fibrin (PRF) is a platelet concentrate that is created by drawing whole blood from a vein and processing it in a centrifuge. This procedure forms a compressed and durable fibrin membrane composed of growth factors found in leukocytes and platelets, using a person's own stem cells to enhance their healing.

- Leucocytes are white blood cells that play a vital role in immunity, protect the body from inflammation, and greatly increase vascularity (blood vessel production) in healing.
- Platelets contain vital growth factors essential in stimulating bone and soft tissue healing.
- Fibrin (protein) is involved in clotting and holds the leucocytes and platelets together in a concentrated matrix.

PHLEBOTOMY PROCEDURE: About 20-55 ml of my blood will be drawn from a vein using an aseptic technique called phlebotomy. This procedure is performed by gently inserting a sterile needle into a vein through the skin. Phlebotomy is the standard protocol used in drawing blood for donation or medical tests.

BLOOD PROCESSING: My blood will be processed for 12 minutes in an FDA-approved centrifuge. The platelet-rich fibrin will be added to my surgical site to assist in healing. It may be used in conjunction with bone grafting, extraction, sinus grafting, implants, soft tissue grafting, periodontal surgery, or any oral surgery procedure my doctor feels would be beneficial for my case.

BENEFITS AND RISKS: My doctor has recommended PRF to enhance the healing of my surgical site. The clinical benefits include bleeding control, immune system support, and no biochemical handling or additives. The biological benefits vary in degree with each patient and include reduced swelling, reduced pain, and enhanced healing compared to the same procedure without PRF.

While it is generally a safe procedure, phlebotomy may result in complications, most commonly hematoma (bleeding under the skin) and pain. Other less common complications include nerve damage, iatrogenic anemia, arterial puncture, petechiae, allergies, fear and phobia, infection, syncope and fainting, excessive bleeding, edema and thrombus. These are the same risks associated with a standard blood-draw procedure.

COMPLIANCE WITH SELF-CARE INSTRUCTIONS: I understand that smoking and/or alcohol intake may affect gum and bone healing and may adversely affect the successful outcome of my surgery. I agree to follow instructions related to my own daily care of my mouth and the proper use of prescribed medications. I agree to report for appointments following my surgery so the doctor may monitor and evaluate the progress or complications that may arise during healing.

SUPPLEMENTAL RECORDS AND THEIR USE: I consent to photography, filming, recording, and X-rays

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of my oral structures as related to these procedures and for their educational use in lectures or publications, provided my identity is not revealed without my permission.

PATIENT'S ENDORSEMENT: My endorsement (signature) on this form indicates that I have read and fully understand the terms and words within this document and the explanations referred to or implied. After thorough deliberation, I give my consent for the performance of all procedures related to phlebotomy and the PRF procedure as presented to me during consultation and treatment planning by the doctor or as described in this document.

PLEASE NOTIFY THE DOCTOR OR ANY STAFF IF YOU HAVE ANY QUESTIONS REGARDING THIS CONSENT.

Signature		Date	/
	Patient / Responsible party		
		Relationship	
	Print name	to patient	
		Date	
	Signature of witness		