

Wisdom teeth normally erupt between the ages of 18 to 24 years of age. It is common for wisdom teeth to be impacted, meaning there is no space for them to erupt and it is not common for wisdom teeth to erupt into the right position even if space is available.

The reasons for not having this space are:

- Our soft diets do not cause wear on our other teeth
- It is vital to save our other teeth as they have normally erupted into the correct position. So few other teeth are being extracted
- The lower jaw has not grown enough to accommodate the wisdom teeth.

Wisdom teeth need to come out if any of the following problems are occurring:



Infection

When an impacted wisdom tooth starts to push through the gums, an infection can start around the top of the tooth. Infection and inflammation (swollen red gums) can cause pain, swelling and jaw stiffness



Cysts

Sacks of fluid called cysts can form around the tooth and may displace the tooth. The cysts can destroy bone and damage other teeth and gum



Crowding

A wisdom tooth may push nearby teeth out of their correct position and may help to cause crowding of front teeth.



Damage to nearby molars

An impacted wisdom tooth may keep pushing against the molars next to it. This often leads to a serious damage to both teeth.



A commonly asked question is 'Why do I need four wisdom teeth out?'

The impacted tooth causing problems needs to be extracted but so does its opposing tooth. This is because teeth keep moving until they hit something. So if only one tooth is extracted then the opposing tooth will keep moving (supererupts) until it hits the gingiva of the extracted tooth, causing problems.

As it supercrupts, it also increases its surface area, causing more food and bacteria to accumulate around the tooth. So having the two opposing teeth out at the same time saves the extraction procedure and consequent healing time, occurring twice.

There will be some pain and swelling following a tooth extraction. This may require pain killers. There will also be bleeding of the socket. This is usually minor and easily controlled by applying pressure.

It is also important to know the complications associated with the procedure:

- Infection of the extraction socket (dry socket)
- Biting of the numb lip which may cause damage after the teeth have been removed
- Damage to the Inferior Dental Nerve on each side of the Mandible (lower jaw). This nerve passes very close
 to the root of the lower wisdom tooth (often in contact with it) and gives feeling to the lower teeth, lower lip
 and chin on that side. This nerve is very close to the area of surgery, with a slight risk of some damage to the
 nerve. This may cause numbness of the lower teeth, lower lip and chin. This may be temporary (6–12
 months) or permanent.
- Damage to the Lingual Nerve on each side of the Mandible (lower jaw). This nerve passes very close to the tongue side of the lower wisdom tooth and posterior mandibular teeth and gives feeling and taste to that side of the tongue. This nerve is very close to the area of surgery, with a slight risk of some damage to the nerve. This may cause numbness and loss of taste to that side of the tongue. This may be temporary (6–12 months) or permanent.
- The tooth root tip may break off in small pieces less than 1mm when the tooth is taken out. The dentist may not remove those pieces if there is a chance that the nerves or other structures may be damaged during removal.
- Damage to teeth growing tightly against the wisdom teeth during removal of the wisdom teeth.
- Weakness of the jaw due to removal of the wisdom teeth. The jaw may break during the procedure or during the healing period.
- If the upper teeth are close to the sinuses, removal may cause a hole between the mouth and the sinus. This may need further surgery.

All of my questions have been answered by the dentist and I fully understand the above statements in this consent form.

Date:

Signature of Patient or Legal Guardian: