**Dental X-Rays Information Sheet**

Our office believes in the standard of care policy, which means we take the minimal radiographs necessary to provide you with the best diagnosis and treatment possible.

1. X-rays are the only way to reliably view the bone, roots, in between the teeth and under existing dental work.
2. These x-rays provide a starting point for what conditions exist today and what changes may have occurred since your last set of x-rays.
3. Detection of harmful conditions such as decay, heavy tartar build-up, bone loss, cysts, abscesses and even cancer are often impossible without radiographs.

**National Recommendations for an Established Patient of Record with LOW Risk of Decay**

**(A brief patient friendly overview taken directly from the ADA.org website)**

* Child with “baby teeth” or mixed dentition- Posterior bitewing exam at 12-24 month intervals if proximal surfaces cannot be seen visually
* Adolescent with permanent teeth- Posterior bitewing exam at 18-36 month intervals
* Adult with all teeth or just a few missing teeth- Posterior bitewing exam at 24-36 month intervals

There are MANY circumstances where we need to get x-rays to diagnose a tooth before we treat it and MANY instances where taking x-rays is needed to monitor a situation:

1. Clinical evidence of periodontal disease
2. Large or deep restorations
3. Deep carious lesions
4. Malpositioned or clinically impacted teeth
5. Swelling
6. Evidence of dental/facial trauma, broken teeth etc.
7. Mobility of teeth
8. Sinus tract (“fistula”)
9. Clinically suspected sinus pathology
10. Growth abnormalities
11. Oral involvement in known or suspected systemic disease
12. Positive neurologic findings in the head and neck
13. Evidence of foreign objects
14. Pain and/or dysfunction of the temporomandibular joint
15. Facial asymmetry
16. Abutment teeth for fixed or removable partial prosthesis
17. Unexplained bleeding
18. Unexplained sensitivity of teeth
19. Unusual eruption, spacing or migration of teeth
20. Unusual tooth morphology, calcification or color
21. Unexplained absence of teeth
22. Clinical tooth erosion
23. Peri-implantitis

**Can my dental office refuse to see me if I won’t have x-rays taken?**

Although this may seem drastic to some, from a legal and ethical standpoint, this may be the best policy. Even if you sign a waiver and refusal form, no patient can legally give consent for a dentist or hygienist to be negligent. They both have licenses to protect and could be liable for improper diagnosis and treatment. You can always refuse any treatment or procedure; however, the dentist and hygienist may also decline to treat you as a patient. Offering appropriate care for our patients is a basic function of a dental practice and x-rays are a necessary requirement for accomplishing this. We hope we never have to apologize for trying to be a great care give to you.