Quasha
DENTAL

IRRIGATION CONSENT FORM

I understand that as part of my dental hygiene care, Quasha Dental recommends antibacterial irrigation. This treatment is performed to support my oral health.

WHAT IS IRRIGATION?

Irrigation is an antibacterial medication treatment used to flush bacteria from around and below the gumline. This helps support healthier gums and reduce inflammation.

BENEFITS OF IRRIGATION MAY INCLUDE:

- Helps reduce harmful bacteria below the gumline
- Supports healthier gums
- Helps reduce inflammation
- Complements my home care and regular cleanings

FINANCIAL INFORMATION

I understand that there is a separate fee for irrigation. This service is **not** covered by any dental insurance companies and is the patient's responsibility.

CONSENT

I have read and understand the information above. I consent to the use of antibacterial irrigation as recommended by my dental care provider. I understand that I may decline this service; however, it is recommended to support my gum health.

Patient Name (Print): _____ Date: _____

Patient Signature: _____

Relationship to Patient (if signed by guardian): _____

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