

Patient Whitening Record Sheet

Copyright: Linda Greenwall

Name

Date Bleaching Started	Age	
Patient's Main Complaint		
Discolouration Type	Preoperative Shade	Shade Guide Used
Patient's desired colour		

Informed consent: The patient is informed that there are no guarantees as to the amount of lightening that can be achieved with whitening treatment. Further dental treatment may be required to whiten the teeth. These options may include microabrasion, bonding, porcelain laminate veneers, crowns or combinations of the above. The patient is instructed to discontinue the whitening treatment should any problems occur.

Patient's Signature:

Date:

Whitening method					
Non Vital Tooth: Tooth Number		Root canal treatment present			
Patency of Apical seal		Radiograph Checked			
Bleaching method: Walking Bleach		Inside/ Outside technique			
Bleaching Material Used		Concentration			
Power bleach	Upper teeth			Lower teeth	
Bleaching material		Concentration			
Radiographs Checked					
Home Bleach	Upper teeth			Lower teeth	
Presence of Anterior composites		Patient informed they may need to be replaced			
Bleaching material used		Concentration			
Whitening Audit					
	Appointment Date	Arch	Bleach Used	Amt Dispensed	Problems
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Post Operative Assessment					
Shade Preoperative		Shade Post Operative			
Recommended Re-bleaching		Problems encountered			
Maintenance		Further Aesthetic treatment			