Consent for Bone Regenerative Surgery

I have been fully informed of the nature of bone regenerative surgery, the procedure to be utilized, the risks and benefits of bone regenerative surgery, the alternative treatments available, and the necessity for follow-up and self-care. I have had an opportunity to ask any questions I may have in connection with the treatment and to discuss my concerns with Dr Fard. After thorough deliberation, I hereby consent to the performance of bone regenerative surgery as presented to me during consultation and in the treatment plan presentation as described in this consent form. I also consent to the performance of such additional or alternative procedures as may be deemed necessary in the best judgment of Dr Fard.

**I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THIS DOCUMENT.**