

Risks Associated With Cosmetic Dental Procedures

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Managing patient expectations and providing clear, accurate information about care and treatment are essential risk management strategies for dentists. These strategies are particularly important when working with patients who are seeking elective cosmetic dental procedures.

Dentists who provide cosmetic services need to be confident that their patients have a realistic understanding about the results of treatment. Failure to manage expectations and communicate clearly and truthfully can increase the risk of patient complaints, requests for refunds, and even litigation.

Patient Misperceptions

Various factors may contribute to patient misperceptions about cosmetic procedures. First, the desire to maximize one's appearance is a highly emotional issue, and some patients expect that a cosmetic treatment or procedure will drastically improve their appearance rather than simply address a particular cosmetic challenge.

Second, insurance often does not cover elective cosmetic procedures, so patients must make significant financial investments to obtain these procedures and treatments. As a result, some patients find it difficult to accept the possibility that the actual results might not align with the results they envisioned.

Third, some patients are not merely seeking to improve their appearances; they are really trying to overhaul their identities. When such patients discover that — regardless of the clinical results — they must still deal with the same personal issues, their disappointment may be both illogical and unrelenting.

Fourth, although uncommon, some patients might have a complex condition called [body dysmorphic disorder](#) (BDD). BDD is a mental health disorder characterized by a persistent preoccupation or fixation with nonexistent or minor flaws in physical appearance. Patients with

BDD who have cosmetic treatments often are dissatisfied with the results, and this dissatisfaction can create different types of risk for the treating dentist, such as liability exposure, dental board complaints, and reputational risks.

Finally, the dentist and dental staff need to be sensitive to the possibility that patients may recall promises and optimistic predictions rather than discussions about risks and limitations. Therefore, the importance of informed consent in the cosmetic dental environment cannot be overstated.

Promises Are Risky

Dentists who promote themselves as cosmetic specialists must be especially careful that their advertising and marketing strategies don't promise more than they can deliver. When in the market for "self-improvement," some prospective patients hear only what they want to hear. For this reason, advertising strategies often are designed to promise emotional rather than physical results.

Examples of slogans that perpetuate emotional promises include:

- "A whole new smile — a whole new outlook on life!"
- "Get the appearance you deserve!"
- "Straight teeth — new confidence!"

None of these slogans offers a specific physical result; rather, they promise idealized outcomes. This type of advertising may draw in potential clients, but it also may attract some people whose vision of change is impossible for even the most talented cosmetic dentist to help them achieve.

Advertising and Marketing Liability

Dentists who provide cosmetic services should carefully assess all prospective print and electronic advertising and marketing materials designed to sell their services. When reviewing these materials, both dentists and staff members should ask the following questions:

- Will this advertisement attract patients who have realistic expectations?
- Will this advertisement require that we achieve an impossibly high standard of care?

- Does the language use superlatives, make promises that are unrealistic, or urge patients to judge the results by emotional standards rather than clinical standards? Does the language promise or imply absolute satisfaction?
- Do advertisements make critical statements about competitive approaches to the services being offered? Do these comments inadvertently hold the practitioner to a higher standard by comparison?

While advertising motivates a potential client to take action — for example, to buy a particular product or service — marketing strategies generally are designed to trigger initial interest and help individuals identify wants or needs. Marketing materials also may provide reassurance to clients that they have made a wise decision, thereby preventing the postdecision guilt known as “buyers’ remorse.”

Dentists who provide cosmetic services should be careful to distinguish between marketing materials and educational materials. Educational materials should offer patients objective, clear information about the risks and benefits of proposed treatments.

Educational materials are an important component of informed consent. They help patients negotiate the sometimes difficult process of formulating their questions, and

they give dentists the opportunity to clarify and respond to patients’ concerns. The risk of liability may increase if educational materials are written in terms that maximize the projected outcome of a cosmetic dental treatment and gloss over its risks.

Case Example

A patient was “sold” on a veneer treatment plan that involved most of her teeth. The dentist assured the patient that he could beat the price quote that another dentist gave her. The dentist did the work, but did not deal with the poor state of the patient’s gums.

The veneer work looked beautiful — but the patient lost five teeth within the next 2 years, largely due to untreated periodontal disease. She sued, alleging that she should have been told that she needed restorative work before the cosmetic procedure was initiated.

The jury delivered a verdict in favor of the plaintiff, and posttrial commentary from jury members indicated that they believed the dentist fully intended to “double dip” the patient by selling her bridges or implants for veneered teeth he expected would fail.

Further, employees of dental practices that offer cosmetic services — in their eagerness to contribute to the success of the practice — might inadvertently mislead patients by referring to the dentists' skills or past outcomes with glowing terms that could lead patients to expect the same perfect results, regardless of their individual circumstances. Thus, practice administration should clarify for all members of the team why particular marketing approaches are acceptable and why other tactics are unacceptable.

Conclusion

Dentists who market themselves as providers of cosmetic services should be cognizant of the border between a promise of dedicated effort on the patient's behalf and a promise that the patient will achieve an unrealistic outcome.

Advertising and marketing materials should be reviewed for accuracy and for any unintended commitments or promises that might obligate the practitioner to comply with a higher, and perhaps unachievable, standard of care. Further, patient educational materials should be devoid of marketing hyperbole. Their purpose is to help the patient understand the risks and benefits of a procedure, the treatment plan, and its aftermath, including the patient's obligation to engage in certain home care procedures and follow-up appointments.

Patients will benefit from candid discussions with their providers about what cosmetic procedures can realistically achieve and what they likely cannot deliver.

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