ORAL CANCER SCREENING CONSENT FORM

Oral Cancer kills one person every hour, 24 hours a day in the United States. It is the sixth most common form of cancer.

1. The mortality rate for oral cancer remains unchanged.

The mortality rates associated with oral cancer have not changed in over 30 years due in part to the limitations of white light inspection of the oral cavity. Traditional examination for oral cancer by a clinician detects visible changes on the tissue surface. Unfortunately, the cellular changes that lead to oral cancer actually start below the surface at the basal membrane. These changes may not be visible to the naked eye until the disease progresses to the surface.

2. 50% of patients diagnosed with oral cancer are expected to die within 5 years. If caught early, 90% of cases are curable.

Oral cancer is often curable when detection, diagnosis, and treatment are performed early. This means detecting mucosal abnormalities at or before Stage 1 cancer. Early detection of potentially malignant lesions and accurate identification by biopsy are significant factors in decreasing patient morbidity and mortality associated with oral cancer.

3. In the past three decades there has been a 60% increase in oral cancer in adults under the age of 40.

Risk factors for oral cancer include tobacco use, frequent alcohol consumption, a compromised immune system, a past history of cancer, and the presence of the Human Papillion Virus (HPV). Alarmingly, 25% of newly diagnosed cases of oral cancer are over the age of 18 and should be screened annually for oral cancer.

4. Early screening, diagnosis, and treatment planning for oral cancer will save lives.

The ideal process of screening for oral cancer would make it possible for clinicians to accurately identify cellular changes below the surface at the basal membrane before mucosal abnormalities become visible under white light examination.

VELscope ™ Oral Cancer Examination

1. We now offer an <u>additional </u>early detection oral cancer screen examination. It is SIMPLE, EASY, and NONINVASIVE.
2. The examination is done with the VELscope™, (Visually Enhanced Lesion Scope) 3. This simple, hand-held device emits blue light into the mouth that excites various molecules within our cells,causing them to absorb the light energy and re-emit it as visible fluorescence.
4. Changes in healthy tissue fluorescence are indicative of developing tumor cells. The VELscope™ allows us to shine a light onto a suspicious sore, look through an attached eyepiece, and watch directly for changes in color.
5. The diagnosis is confirmed by biopsy and standard pathology tests.
6. Please ask if you have questions.

Yes. I authorize the clinician to perform oral cancer detection with the use of the VELscope™ . I accept financial responsibility for this examination.

Print Name:_____

Signature:_____ Date:_____

No. I would prefer not to have the VELscope™ used at this time. I do however understand the benefits of using this during my examination.

Print Name:_____

Signature:_____ Date:_____