

Date of Appointment: _____ Time: _____

Instructions to Parents of Pediatric Patients scheduled for Sedation

Dear Parent,

For your child's safety and wellbeing, please ensure that you adequately read and follow these instructions.

Please notify us of any change in your child's health: DO NOT bring in your child for treatment with a fever, ear infection or cold. If your child becomes ill, please call us to reschedule. 24 hours notice will allow us to use the appointment time for another child who is awaiting sedation.

The following dietary schedule MUST be followed:

NO EATING OR DRINKING AFTER MIDNIGHT

Medications: Give your child **ONLY** medications that he/she takes routinely (example: seizure meds, antibiotics or medications prescribed by your child's physician). **DO NOT** give any other medications before or after treatment without checking with our office.

Failed appointment fee: Breaking an appointment hinders our ability to care for your child as well as others, because we lose a time slot that could have been used to help another patient. Our employees also waste valuable time getting ready for your visit. A \$75 failed appointment fee will be charged if you do not provide us with 48 hour notice.

Arrival at the office & Expectations during treatment:

- A parent or legal guardian must accompany the child to the sedation appointment.
- Please do not bring any other children to the appointment so that you can devote all of your attention to your sedated child. When possible bring a second adult to help.
- Please dress your child in loose fitting clothing to ease placement of monitors
- Please remove toenail polish prior to appointment. Toenail polish interferes with monitoring.
- After your child is given the medication, you will sit with him/her in a quiet area while the medication takes effect. Please make sure your child remains seated at this time.
- Parents are not permitted in the sedation room.
- For your child's safety, passive restraint (papoose board) may be used during procedure. This cushioned board has cloth and Velcro wraps that will keep your child from unexpectedly tossing or turning during the procedure. The papoose will not be used without your prior approval and consent. Please discuss any questions with the dentist.
- The medication is only a sedative, not a general anesthetic. During treatment your child will be awake and may cry. Try not to worry, as your child will be well taken care of.

After treatment: You and your child will remain in the office until your child is awake, alert, can sit up unaided, and move with minimal assistance. Local anesthetic will be used during the procedure, please **CAREULLY** monitor your child so that he/she does not bite lips/cheeks. **DO NOT** plan or permit activities for your child after the procedure. Rest is important.

Please contact our office if additional information is required or if you have any questions or concerns.

As the parent/legal guardian of _____, I have carefully read the above instructions, and have had the opportunity to ask questions about the proposed treatment, and I understand the potential risks and benefits

Signature: _____ Date: _____