



Sedation For Your Child

We have recommended oral sedation for your child's treatment; the purpose is to attempt to make your child more relaxed and less aware of the procedures being performed. YOUR CHILD WILL NOT BE PUT TO SLEEP. Most children are very calm and comfortable during the procedures. Other Children remain quite upset even though adequate amounts of sedation (medication), nitrous (laughing gas), and local anesthesia (lidocaine) has been given. PARENTS WILL NOT BE PERMITTED IN THE TREATMENT ROOM WITH THE CHILD WHILE THE WORK IS BEING COMPLETED! You are welcome to stay with them while the medication is taking effect, then we will have you proceed to the waiting room when the doctor is ready to begin treatment. _____ (Initial)

IT IS IMPORTANT THAT YOU BRING YOUR CHILD TO OUR OFFICE WITH AN EMPTY STOMACH. NO FOOD OR DRINK AFTER MIDNIGHT THE NIGHT BEFORE TREATMENT. Please allow yourself 2-3 hours in our office the day treatment is to be done. It is best for your child to arrive with one adult and no other children if possible. _____ (Initial)

It is very important that we have a complete, accurate, and up-to-date health history of your child. This includes any and all information about their medical visits as well as medical information about other family members. Any medications that your child is currently taking or has been prescribed for them must also be included.

Since we allow an extended amount of time for these procedures, IT IS EXTREMELY IMPORTANT THAT YOU ARE ON TIME FOR THIS APPOINTMENT. IF A RESCHEDULE IS WARRANTED, IT MAY BE A COUPLE OF MONTHS FOR THE NEXT AVAILABLE SEDATION APPOINTMENT FOR YOUR CHILD. WE WOULD NOT WANT ANY OF OUR PATIENTS TO WAIT THAT ADDITIONAL TIME FOR TREATMENT THAT IS NECESSARY. _____ (Initial)

THE TOTAL PATIENT RESPONSIBILITY INCLUDING THE \$375 SEDATION FEE MUST BE PAID PRIOR TO SCHEDULED YOUR CHILD'S APPOINTMENT. _____ (Initial) This fee is for the medications that which will be administered, the equipment used for monitoring vital signs, and the time the doctor will allow for your child exclusively. This is unfortunately not a considered fee for most insurance companies. IF, BY CHANCE THE OFFICE IS NOT GIVEN A 24 HOUR NOTICE, YOUR CHILD DOES NOT ARRIVE FOR THE RESERVED APPOINTMENT TIME, OR YOUR CHILD HAS EATEN AFTER MIDNIGHT, THERE IS A NON-REFUNDABLE CHARGE THAT IS APPLIED FOR THE DOCTOR'S TIME OF \$190 THAT IS TAKEN FROM THE SEDATION FEE THAT WAS PAID PRIOR TO SCHEDULING. IF THE NON-REFUNDABLE CHARGE IS APPLIED, BEFORE WE CAN RESCHEDULE THIS APPOINTMENT, WE WILL REQUIRE THE ADDITIONAL \$190 TO BE PAID FOR THE ABOVE-MENTIONED SERVICES. _____ (Initial) _____ (Date)

If you have any questions or concerns, please feel free to contact us at 937-885-2222. Thanks in advance for your cooperation and understanding on the sedation policies for your child with our office.

Patient's Name: _____

Parent/Guardian Signature: _____

Jody L. Wright, D.D.S.



CONSENT FOR TREATMENT WITH ORAL SEDATION

The purpose and nature of the dental treatment have been fully explained to me. I fully understand there is a possibility of medical complications developing during or after the procedure and that these may include adverse reaction to a drug, or atypical physiological response that may cause necessary hospitalization or temporary nerve damage, brain damage or death. I have been informed of and fully understand all risks that are involved in the performance of the treatment and sedation to be rendered.

I am giving my full and informed consent for the treatment to be rendered as described to me. I have no further questions about any of the procedures or treatment. I have not been given or received any guarantees as to treatment or sedation my child, _____ is to receive.

I am aware that there will be sedation administered, and of the above outlined risks, as well as any other risks outlined by the doctor. I understand that it may be necessary for an assistant to hold my child's hand to prevent injury during treatment. I also understand that if my child is not responding well to the oral sedation, treatment will stop and Dr. Jody Wright will discuss an alternative treatment method. I do give my free and voluntary informed consent.

Date: _____ Signature: _____

Relationship: _____

Witness: _____

Jody L. Wright, D.D.S.



TAKING THE FEAR OUT OF DENTISTRY

Oral Sedative (Sleepy Juice)

Fearful children who have only a few cavities can use a tranquilizing medication to help calm down enough to all treatment to be performed. If this is necessary, please do not allow your child to eat or drink anything after midnight before the appointment.

What: A 3-6 tsp drink of liquid Versed "Sleepy Juice" is given in our office. It takes about 15 minutes for the "Sleepy Juice" to work. 80% of the children will become relaxed and allow us to preform treatment routinely, 20% however may become agitated or combative with juice.

Why: With sleepy juice, we can preform dentistry on children who are too apprehensive to relax who are generally cooperative. Frightened, uncooperative children may fight this medication. Depending on your child's personality, sleepy juice may be a great option.

After Care: Sleep Juice wears off in about 4 to 5 hours. We recommend quiet activities for your child.

Best Candidates: Children who have medium treatment needs with cooperative personalities. At, times, parents request oral sedative when Dr. Jody believes deep sedation would be best. If the child will not cooperate and no treatment can be preformed, the sedation fee will still be charged.

Jody L. Wright, D.D.S.



POST SEDATION TREATMENT CARE

Your child may be very sleepy on the way home, so be sure to strap him/her in with a seatbelt for the trip home.

When you arrive home, your child may want to sleep for two or three hours, or they may just be irritable and over-tired until the effects of the sedative wear off (usually in four to six hours). Keep your child from doing any physical activities, such as bike riding or even navigating stairs. If they want to nap, keep their head and chest slightly elevated.

If they sleep they may be nauseated upon waking. If they are hungry start with clear broth or soup, apple juice, crackers, Jell-O, or applesauce. Avoid ALL milk products.

It's normal for your child's body to feel warm and appear flushed until the effects of the sedative wear off. They may also scratch their nose or face during this time, due to the itching sensation produced.

You child will probably go to bed at their normal hour and by the next morning will be back to their normal self.

The gum tissue may be tender after treatment. Children's Motrin or Advil should take care of any discomfort; however, if they had teeth extracted during treatment, Children's Tylenol should be given, as ibuprofen products may cause more bleeding.

If you have any cause for concern; please do not hesitate to call (937)885-2222.

Jody L. Wright, D.D.S.