

PREPARING FOR YOUR CHILD'S SEDATION VISIT

Your child has a sedation appointment scheduled in our office on_____. The arrival time for this scheduled appointment is_____ AM/PM. It is important that you arrive on time.

About Midazolam

We have discussed and agreed to the use of conscious sedation for your child's safety and comfort during their dental procedure.

- Midazolam is in the same family as Versed.
- Reduces anxiety, causes sleepiness, relaxes the muscles, and impairs short-term memory.
- Approved for use as a sedative, anxiety, or anesthesia medication.
- Dosage amount administered based on your child's weight.
- Your child will be **<u>awake</u>** during treatment.
- An experience of memory loss can occur for 6 hours after medicine is given.
- 93% of our patients reported no memory of the experience.

It is important to understand, Midazolam is **not** administered for suppression of behavior; however, it is proven to be effective at causing a temporary state of anterograde amnesia. We have found children tolerate procedures best and have a better chance of not remembering the procedure when their parents understand what to expect and try not to prepare the children too much. We suggest keeping it kid friendly to help prevent them from remembering the details.

Prior to Your Child's Sedation Appointment

- You will receive a confirmation call from our office 24-72 hours before the appointment.
- Between 48-72 hours prior to your scheduled appointment, please notify our office of any medical conditions or difference in your child's health.
- Should your child become ill just prior to their sedation appointment, contact our office and seek advice on whether it will be necessary to postpone sedation.
- Your <u>child must have an empty stomach, no food or liquids for 6 hours prior to the</u> <u>appointment</u>. Fasting decreases the risk of vomiting and aspirating stomach contents into the lungs. **This is a potentially life-threatening situation.**

- Dress your child in loose-fitting comfortable clothing. Please remove any nail polish/decals from finger and toe nails.
- Bring an extra pair of changing clothes, just in case of an accident.
- Encourage your child to use the restroom prior to dosage. If appropriate, please change their diaper before dosage.
- <u>We discourage bringing other children</u> to this appointment. It is important that you focus your full attention on your child undergoing the sedation.
- We can only allow one parent into the visit, and they must step out once we begin the dental work so we can focus solely on your child and completing their treatment as quickly as possible.

During the Sedation Appointment

- ✓ Please be patient. We schedule appointments in a timeframe that best accommodates our patients needs and office flow.
- ✓ The medication is administered one of two ways. We encourage your child to take the medication orally, on his/her own or with your assistance. Should this become problematic or difficult, the doctor shall administer it intra-nasally (through the nose). Intra-nasal delivery is safe and effective method for administrating medication
- ✓ Midazolam takes 15-25 minutes for it to become effective.
- ✓ We will ask you to watch your child closely as he/she may become sleepy, dizzy, unable to walk alone, and/or irritable.
- ✓ A dental assistant will monitor your child's heart rate and oxygen every five minutes.
- ✓ You must remain at the office throughout the sedation appointment, in the waiting area.
- ✓ Midazolam is <u>NOT</u> administered to control or regulate your child's behavior. A sedated patient will typically have amplified emotions due to medication induced lack of inhibitions. A sedated patient will typically react to sounds and treatment being performed by crying or yelling throughout the visit. This is not because your child is in pain. They are reacting to tastes, sounds, and sensations that they are unfamiliar with. <u>They are not in pain.</u>
- ✓ Once we are ready to begin, the parent/guardian must step out of the room. If any changes happen during the procedure, we will try our best to come out and keep you updated.
- ✓ Once the procedure begins, it is not unusual for treatment to change. You will always be provided with an explanation of the proposed treatment changes. Changes in treatment will never proceed without your informed consent.
- ✓ Upon completion of the procedure, the dental assistant will monitor and evaluate your child's status. You can expect your child to be drowsy, crying or fussy.
- ✓ Dr. Shaughnessy will give you a call the same night the procedure happened, or follow up the next morning to check in.

The following may be used during treatment

✓ Papoose Blanket, Local Anesthetic, Mouth Prop, and Head or Hand holding

Following the Sedation Appointment

- ✓ Once home, your child must remain under adult supervision until fully recovered from the effects of the sedation.
- ✓ Feed your child a soft diet as soon as you get home. For example, eggs, yogurt, apple sauce, pancakes etc.
- \checkmark Encourage your child to drink lots of water throughout the day.
- \checkmark It is normal to be drowsy and fussy for up to 12 hours.
- ✓ You can expect numbress to last 2-4 hours. Monitor closely to ensure that your child does not bite, scratch, or injure their cheeks, lips, or tongue during this time.
- ✓ It is not uncommon for your child to have small red marks, bruising and rashes on their face or body, these are all related to abrasions related to head holding, use of nasal hood, and wrapping body in protective stabilizer/papoose.
- ✓ A slight fever (temp to 100.5) is not uncommon after sedation especially if dehydrated. You may give your child, children's Tylenol or Ibuprofen.
- ✓ If a fever persists more than 12 hours, call our office or Dr. Shaughnessy's cell.

Do not hesitate to contact the office if you have questions or concerns.

Office number: 617-472-5437 Dr. Shaughnessy cell for after hours: 617-834-4573

Informed Consent

____ I have had the use of Midazolam conscious sedation explained to me, including its side effects and behavioral effects.

____ I understand all pre- and post-op instructions and I've had all of my questions answered.

I consent to the use of Midazolam in the treatment if my child's dental health.

To ensure the success of the treatment and for my child's safety, I understand and agree to abide by the restriction of NO FOOD OR LIQUIDS FOR 6 HOURS PRIOR TO THE APPOINTMENT.

____ I understand that typically the sedation is NOT covered service with most insurances, and that the fee expected to be paid on the day of the sedation is \$500.

____ My signature below affirms that I am the parent or court defined legal guardian for the child named above.

Date:_____

Printed name:	
Relationship to child:	

Signature:_____