

## **DENISE E. FISHER, D.D.S. AND ASSOCIATES SEDATION INFORMATION AND INSTRUCTIONS**

Because Dr. Fisher/Dr. Kim has recommended a procedure utilizing sedation you likely have a great deal of questions and concerns. For this reason, we have compiled the following list of the most commonly asked questions and their answers. If any time, the information presented below is not clear (or if you have further concerns) please feel free to call us and ask. Furthermore, all financial arrangements should be mutually agreed upon prior to the day of the procedure; we believe our focus on the day of the procedure should be on your child's health and well being only.

### **What exactly is "sedation"?**

Ideally, the sedated child is drowsy but awakens and responds easily. He or she is relaxed, calm, and cooperative. They may briefly cry or protest from the noises or sensations during treatment, and then fall back to sleep. Often, we use medications which have an amnesic effect, leaving the child with little or no clear memory of the experience.

### **Why does my child need to be sedated?**

For children who are too young to understand and cooperate during a lengthy procedure, or for older children who are very fearful or anxious of the procedure, or for those children who may have special needs, sedation often works well. We are generally able to evaluate how well the child might do without sedation based upon their responses to more simple challenges such as dental X-Rays or cleaning of their teeth; we may recommend a sedation if the child is very apprehensive or fearful.

### **How do you sedate him/her?**

In order to assist the absorption of the medication and to minimize nausea and vomiting, your child should not eat or drink anything (not even water) after midnight the night before the procedure. If he/she has had anything, we will have to cancel the procedure and reschedule. We cannot take a chance that your child might vomit and choke while they are sleepy. We most often use a combination of oral, intranasal, and inhaled medications (nitrous oxide) to sedate him/her. We will provide you with the names of the medications, and we ask that you discuss them with your child's pediatrician. To decide on the best dose for your child, we always ask for an accurate weight. Then, we calculate the exact dose based upon your child's

weight. On the day of your appointment, we may allow you to hold your child and administer the medicine yourself with a dropper, syringe, or using whatever method works best in your experience. However, if your child appears reluctant or uncooperative, we will ask that you allow us to give the medication, because any medicine that is spit out or spilled is “lost”; we cannot give more, and sedative might not take effect if too small of a quantity is taken.

**Are there things I can do to help prepare my child and make him/her more comfortable and less fearful?**

First and foremost, answer all of their questions truthfully; if you do not know the answer to a question, sooner give them no information versus the wrong information. Tell them you don't know the answer to their question, but you will ask together on the day of the procedure. On the evening before the procedure, make sure your child gets a good night's rest. They'll be less likely to be overtired and irritable. Avoid a lot of salty foods at dinner or before bed; your child will wake up wanting a drink, and you will be unable to give them anything after midnight. If they develop any cold symptoms, fever vomiting, etc. during the days leading up to your sedation appointment, please call us. We may need to reschedule your procedure, or have you contact your pediatrician. If your child takes medication on a daily basis for any medical condition, call us to determine if they need to be adjusted/held on the day of the sedation. Likewise, children with some medical conditions such as heart or breathing problems may need medical clearance by a pediatrician or other specialist. Children who are not potty trained should be brought to the dental office in a diaper; those who are trained should take a trip to the bathroom immediately before taking the medication. Finally, dress your child comfortably; loose clothes, no tight collars, no tights on girls or footed pajamas, no earrings, no nail polish on fingers or toes (we need to place the heart monitor on a toenail), and no pony-tails/barrettes/hair clips on the back of the head (they'll become very uncomfortable when lying down on them for an extended time). For girls with long hair, a pony-tail placed high on the top of the head works very well. Finally, consider bringing a favorite storybook, video or relaxing, cuddly toy from home for your child to enjoy while waiting.

**After I give my child the medicine, how long will it take for him/her to become drowsy?**

Depending on which medications we use, it may take anywhere from 15 minutes up to 45 minutes to see a response. During this time, we will bring

you toys to play quietly with in the waiting room area. Because the medicine will make your child woozy, dizzy, and even wobbly/unsteady, **HE/SHE SHOULD NOT BE ALLOWED TO WALK AROUND THE WAITING AREA UNASSISTED. IT IS BEST IF THE CHILD IS KEPT SITTING ON YOUR LAP QUIETLY PLAYING WITH TOYS OR WATCHING A VIDEO.** During this time, your child needs your undivided attention to avoid injury—**PLEASE DO NOT BRING BROTHERS/SISTERS OR ANY OTHER CHILDREN WITH YOU.** Many children go through a very restless, irritable and even combative phase while the medicine begins to work, and may be seeing double or experiencing dizziness (almost a drunk feeling of sorts). Gently holding him/her (or loosely wrapping a blanket around wobbly arms and legs), speaking softly to him/her, and one-on-one cuddling work well.

### **Once he/she is sleepy, what will happen?**

We will be observing your child's behavior, and when we feel he/she is ready, we will come out and carry him/her back to the procedure area. **You will need to remain in the waiting room.** Though we understand, this may be hard for you to do, please know that it truly is in the best interest of you child. He/she is more likely to relax, not fight the feeling of the medication, and be cooperative and listen to us when you are not present. However, please feel free to ask our receptionist for updates whenever you like. Either the dentist or her assistant will also attempt to periodically come out and give you updates, and we will always let you know if we find anything different from what we've already discussed. Please know that we look at this as a task of treating you and your child, but that your child's needs while sedated must come first; if we can help you in any way, we'll do our best.

### **How long does everything take?**

After we bring your child into our sedation room, we spend about 15 to 20 minutes just getting him/her settled in. We attach a monitor to his/her toe which gives us constant information regarding both heart and breathing. We then secure him/her in a "sleeping bag". This "sleeping bag" is called a papoose board, and is used to secure the child's hands, arms and body to prevent inadvertent injuries during drowsiness. After securing the papoose and our monitors, we will take any necessary radiographs (X-Rays). While these are developing, we will begin delivering nitrous through a fruit-scented "nose" to further enhance the sleepy/dreamy feeling, allowing total relaxation. Local anesthetic ("sleepy juice") is then administered by injection following topical flavored "jelly" in the area where restorations are

being placed. Once we begin the restorations, the length of time we need is based upon the amount and type of work which needs to be done. We will try to give you an estimate of our expectations, and update you periodically or if our plans change.

**Should I stay or leave and come back?**

This is truly a matter of personal preference; some parents can't/won't consider leaving, and others feel they cannot sit and wait. If you would like to leave for coffee or a snack there is a cafeteria on the second floor of the hospital across the street, we have access to the hospital to get in touch with you if we need to, if you are going to leave the hospital please leave us a cell phone number or a pager number where you can be reached at all times.

**What can I expect when you bring my child back out to me?**

You can anticipate that your child will be very sleepy and wobbly yet for a while. Do not expect him/her to walk without help. He/she will also have a numb lip, cheek and/or tongue. **DO NOT** allow him/her to bite, pinch, or chew on the numb areas! Likewise, do not give him/her any warm/hot liquids or solid food which must be chewed until the numbness wears off (generally about 2 hours)! We recommend that you bring another adult with you to watch your child closely while you drive home; this person should be prepared to observe his/her breathing and make sure he/she doesn't bite a sleepy lip. Please do not plan to make any stops or do any errands; it would not be safe for your child. Once home, go ahead and give him/her sips of cool clear liquids such as juice and plan for some quiet time together, observing his/her movements and watching his/her breathing periodically while he/she sleeps. Do not plan to lie down and sleep while your child sleeps; he/she needs adult supervision and observation for several hours. Let him/her sleep on his/her side, not on his/her back, to prevent choking if vomiting should occur. Encourage a nap, but continue to observe him/her closely even if he/she seems back to normal after awakening; children often go through a second groggy or restless phase.

**Will my child have any pain or bleeding on the evening after the procedure?**

Depending upon what is done; your child may experience some mild discomfort which should be easily relieved with Children's Tylenol or Children's Motrin. If there is severe or unrelieved pain, fever, or persistent bright red bleeding from an area where a tooth was removed, please call us immediately at (773)772-7373. Be aware that some bleeding from an

extraction is normal, and that when the blood mixes with saliva, it often will appear to be greater than it actually is. Oral hygiene is very important to prevent infection; using a soft piece of gauze or a washcloth, or even a Q-tip to clean the mouth and brush the teeth in the evening is a good idea. The following day, resume normal brushing and flossing as directed by Dr. Fisher.

**What if something just doesn't seem right once we're home?**

CALL US IMMEDIATELY! If your child seems difficult to awaken, begins vomiting excessively, or in any other way seems to be having unusual or unexpected problems, call us. For any extreme emergency, call 911 or go to your nearest emergency room.

**What are my other options?**

The information we've presented herein is not intended to scare you or dissuade you from a sedation procedure. Rather, our intent is to make you an informed part of the decision to seek safe and comfortable care for your child. You will be asked to sign consent for treatment which states we've discussed alternatives with you. These would include the following:

**No Treatment:** Treatment delay or refusal may jeopardize your child's dental status, leading to decay, nerve damage, tooth breakdown, infection, swelling, pain, loss of teeth, decreased ability to eat and drink, an altered bite, orthodontic problems, increased cost of treatment, or other problems. In addition, their overall medical health may be at risk from prolonged dental infection.

**Treatment Without Sedation:** This may be upsetting to your child and to you, and make it difficult or impossible to perform quality dental procedures safely.

**Treatment Under General Anesthesia:** This type of deeper sedation has more health risks and chances for complications. The cost is quite high due to the need for an anesthesiologist and more expensive medications. Because this is not considered to be a medical procedure but a dental one, it is not usually covered by health insurance; the cost can be several thousand dollars.

**Seeking Treatment Elsewhere:** We encourage and welcome you to obtain second opinions. You may consult your local dental society, your

phone book, or a local dental school. Our goal is treat your child and ensure your comfort with all decisions at all times.

We hope this information will be helpful, and we wish you and your family the best of dental health in years to come!