



INSTRUCTIONS FOR PATIENTS RECEIVING ORAL SEDATION

GOALS OF CONSCIOUS SEDATION

The goals of sedation in the pediatric patient for diagnostic and therapeutic procedures are as follows:

- 1) to guard the patient's safety and welfare
- 2) to minimize physical discomfort and pain
- 3) to control anxiety, minimize psychological trauma, and maximize the potential for amnesia
- 4) to control behavior and/or movement so as to allow the safe completion of the procedure
- 5) to return the patient to a state in which safe discharge from medical supervision, as determined by recognized criteria, is possible.

THE SEDATIVES

We may use different sedative agents to sedate your child depending on the individual needs of your child. These may include any one or a combination of the following medications:

- ❑ Midazolam (Versed)
- ❑ Lorazepam (Ativan)
- ❑ Meperidine (Demerol)
- ❑ Hydroxyzine (Vistaril)

POSSIBLE SIDE EFFECTS OF SEDATION

Not all children react the same way to the medication. This is affected by their individual physiology, temperament and anxiety level. Some minor side effects include sleepiness, vomiting, dry mouth, grumpiness, hyperactivity and anger. These are reversible when the medication wears off in a few hours. More severe side effects may include allergic reaction or respiratory and/or central nervous system depression. Our doctor will tailor the dose of the medication according to your child's weight and subsequently by the response of your child at the first procedural appointment.

BEFORE YOUR CHILD'S APPOINTMENT

- ❑ A parent/guardian must plan to be present in the clinic during the entire appointment. Another adult must also be available to drive your child and parent/guardian home upon patient discharge
- ❑ DO NOT give your child anything to eat or drink (including water) after midnight the day prior.
****this is extremely important and your child cannot be treated if these instructions are not followed**
- ❑ DO NOT give your child any medication prior to the appointment
- ❑ If your child develops a cold, fever, or flu within 5 days prior to the appointment, please contact us

FOLLOWING YOUR CHILD'S APPOINTMENT

> diet:

- ❑ DO NOT feed your child until he/she is completely awake.
- ❑ Begin feeding with clear, pulp-free liquids such as water, apple juice, jello, popsicles or "sports" drinks.
-Do not let your child spit or suck through a straw today
- ❑ Start your child on semi-solid foods (such as soup, noodles, porridge, oatmeal) for easy chewing and digestion. Only feed your child if he/she is hungry and has tolerated clear liquids without vomiting.
-Do not let your child chew their lip or tongue. These tissues may be 'asleep' or numb
- ❑ Avoid feeding your child large portions of food or fatty foods such as French fries.
- ❑ Normal diet can be resumed as soon as he/she is ready for it.

> pain:

- ❑ You will be notified if local anesthetic has been used during the procedure. It usually takes 2-3 hours to completely wear off. Make sure you monitor your child closely to avoid any soft tissue trauma.
- ❑ If he/she complains of pain, regular strength children's Tylenol or Advil/Motrin is usually sufficient.

ACTIVITY

- ❑ Your child may be drowsy and uncoordinated in their movements, so please take care to either carry them or hold their hand when they walk
- ❑ Do not let your child play unassisted for several hours after the sedation appointment. You must watch them
- ❑ Your child may want to sleep, this is normal but he/she should be in a central location in the house to be monitored by you. Also, elevate their head with a pillow.

GENERAL

- ❑ If your child has had a tooth removed, a small amount of bleeding may be expected. The blood will mix with spit and seem like a lot of bleeding
- ❑ If your child begins to bleed excessively, call us immediately
- ❑ Your child may vomit, but if vomiting persists, call us
- ❑ If your child begins to act strange or has trouble breathing, call us immediately
- ❑ If you have any questions, do not hesitate to call us