

Consent to administer conscious sedation for dental treatment and acknowledgement of receipt of information

State law requires obtaining informed consent for your child's treatment. Please read this consent carefully and ask about anything that you do not understand.

As the parent, I am legally responsible for my child's decisions and give my consent for the use of conscious sedative drugs that are deemed necessary and advisable so as to enable Dr. Sulte to render the necessary treatment as explained to me.

Some children cannot receive dental treatment in the usual manner because of their young age, fear, inability to cooperate, a handicapping condition, or the complexity of the procedure. Options for these individuals include the following:

- Delaying the treatment until the child is able to cooperate to the level necessary to complete the work.
- Restraining the child to accomplish whatever urgent care is required.
- Providing conscious sedation for the child to a level at which dental care may be provided in a comfortable manner.
- Providing treatment under general anesthesia for the child in the outpatient or inpatient surgical areas.

These alternatives all include various advantages, disadvantages, and risks which are detailed in the root canal treatment informed consent. Delaying treatment may allow the dental disease process to continue unchecked and may progress to an emergent situation. This may include, but is not limited to abscess formation, infection, pain, fever, risk to the developing permanent teeth, or contribute to a long term dental problem.

Factors considered when administering sedative drugs include the patient's medical history, previous drug reactions, age, weight, handicapping condition, behavior of the child, and the complexity of the procedure to be accomplished. The child's reaction to the sedative drug may vary from a little effect to profound sedation. When sedative drugs are used, your child is not being put to sleep for treatment and will maintain their protective reflexes. Unfavorable reactions to sedative drugs include, but are not limited to nausea, vomiting, dizziness, breathing problems, allergic reactions, coma and death.

Dr. Sulte and her staff have discussed with me to my satisfaction, the possible complications. I acknowledge the receipt of and understand the pre-operative and post-operative instructions. The treatment and conscious sedation procedures have been explained to me, to my satisfaction, along with the alternative methods of treatment. The advantages, disadvantages, risks, consequences, probable effectiveness and expected outcome if treatment is not accomplished have been explained to me, to my satisfaction.

Proper and acceptable measure will be taken to optimize your child's safety and treatment: however you acknowledge that no guarantee has been made to you as to the results of the sedation and dental procedures. Additionally a local anesthetic will be administered for pain control.

I am advised that. Although normal results are expected, the possibility and nature of complications cannot be accurately anticipated. Therefore there can be no guarantee expressed or implied either as to the result of the treatment or as to cure.

I hereby state that I have been given the opportunity to ask any questions I might have and that all questions about the procedure or procedures have been answered in a satisfactory manner.

I certify that I have read and fully understand the above explanation of the procedures. I have had all the questions concerning the procedure, material risks, and complications answered to my satisfaction.

By checking the box that follows, you acknowledge that you read, speak, and communicate English and that you have received adequate information about the proposed treatment, you understand this information, and that all your questions have been answered fully.