The

2024 Utah Dental Convention

presents

NITROUS OXIDE
AND
ORAL SEDATION
ON THE
DENTAL PATIENT

Larry J. Sangrik, D.D.S.

-- Instructor --

Salt Palace Convention Center

Salt Lake City, Utah

Friday, February 2, 2024

CE Credits

3 hrs.

Larry J. Sangrik, D.D.S.
401 South Street, Suite 3B1
Chardon, Ohio 44024

Phones
(440) 286-7138
FAX: (440) 286-7139

Website
www.interactivedentalseminars.com

Email Addresses
info@interactivedentalseminars.com
Ljsangrikdds@aol.com

Nitrous Oxide & Oral Sedation on the Dental Patient

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Program Overview...
Nitrous Oxide & Oral Sedation

- Understanding the Spectrum of Anesthesia
- Why Sedate Dental Patients
- Review the N_2O Constant-Flow Technique
- Develop Protocols for N_2O/Oral Sedation
- Benzodiazepine Pharmacology Made Simple
- Proper Monitoring Techniques
- Complications & Solutions
- Recordkeeping

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Program Overview...
Nitrous Oxide & Oral Sedation

- Understanding the Spectrum of Anesthesia

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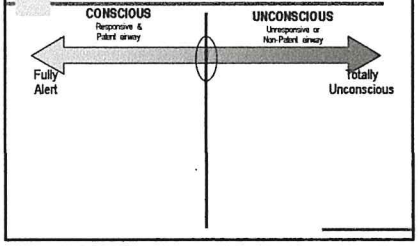
Nitrous Oxide & Oral Sedation



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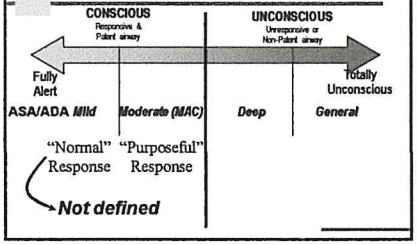
Nitrous Oxide & Oral Sedation



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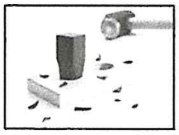
Nitrous Oxide & Oral Sedation

Dental boards only regulate ***procedures***...

...not the ***results***.



Boards develop ***permits*** and "force" them into various levels of anesthesia

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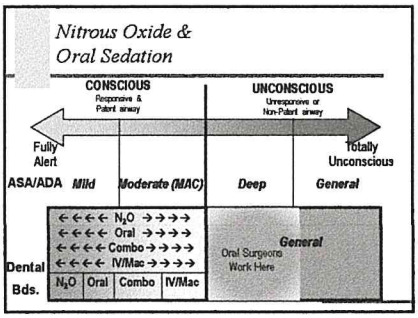
Nitrous Oxide & Oral Sedation



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Nitrous Oxide & Oral Sedation

- Understanding the Spectrum of Anesthesia
- Why Sedate Dental Patients

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Why Sedate Patient?

To Control...

1) Pain
2) Fear

These are *NOT* the same thing!

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Why Sedate Patient?

To Control...

~~1) Pain~~ In General Dentistry

2) Fear Is the Main Reason *FEAR*

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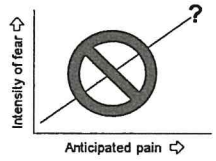
Fear is *not* proportion to pain



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4 Types of Dental Fear

(Milgrom & Getz, Univ. of Washington, Dental Fear Clinic)

Specific Fear — 1) Physical or procedural 2) Abstract

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General Anxiety Disorder — Most common problem Neuro-chemical disorder

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4 Types of Dental Fear

(Milgrom & Getz, Univ. of Washington, Dental Fear Clinic)

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Loss of Control — Desire to control the environment

General Anxiety Disorder — Most common problem Neuro-chemical disorder

Catastrophe — Rational vs. irrational

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When to choose N_2O/O_2

Specific Fear

Loss of Control

General Anxiety Disorder

Catastrophe

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When to choose N_2O/O_2

Specific Fear ✓✓✓✓ Gen'l worked well except fear of unknown

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When to choose N_2O/O_2

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Loss of Control ⊘ Poor choice ☆

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When to choose N_2O/O_2

Specific Fear	✓✓✓✓	Gen'l worked well except fear of unknown
Loss of Control	⊘	Poor choice
General Anxiety Disorder	✓✓✓✓✓	Excellent choice

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When to choose N_2O/O_2

Specific Fear	✓✓✓✓	Gen'l worked well except fear of unknown
Loss of Control	⊘	Poor choice
General Anxiety Disorder	✓✓✓✓✓	Excellent choice
Catastrophe	?	Difficult to predict

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Program Overview...

Nitrous Oxide & Oral Sedation

- Understanding the Spectrum of Anesthesia
- Why Sedate Dental Patients
- Review the N_2O Constant-Flow Technique

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Understanding the Flowmeter:

Constant Liter-flow technique

Goals:

1) Adjust "*brain*" *(left knob)* to patient's *sedation level*. Then...
2) Re-adjust "lungs" *(right knob)* to patient's *tidal volume*

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Understanding the Flowmeter:

Constant Liter-flow technique

1) Inflate reservoir with O_2
2) Estimate tidal volume, start O_2 & place nasal hood
3) Introduce desired N_2O percentage *(e.g. 20% to start)*
4) Reduce total gases to patient's tidal volume
5) Assess patient's response
6) Repeat steps 2-4, as needed

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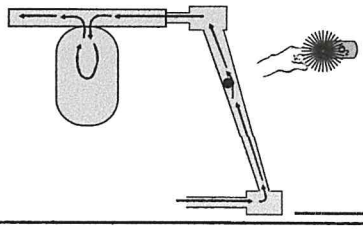
Step 1:

Inflate reservoir with oxygen



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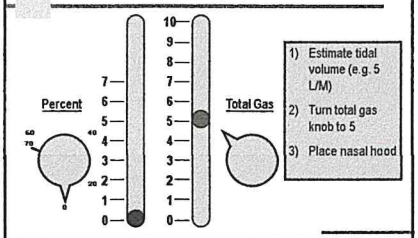
Step 2:

Estimate tidal volume, start O_2 & place nasal hood



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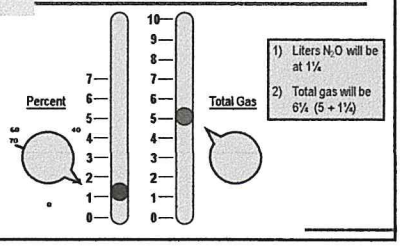
Step 3:

Start N_2O (e.g. 20%)



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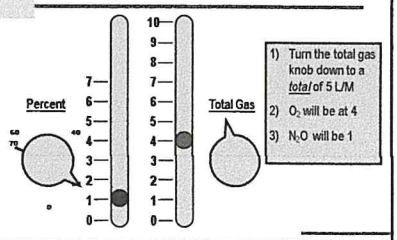
Step 4:

Reduce total gases back to 5 L/M



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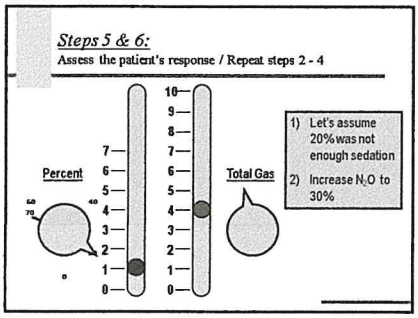

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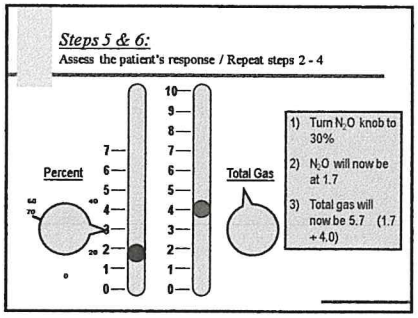

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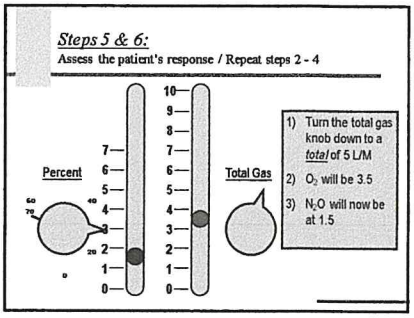

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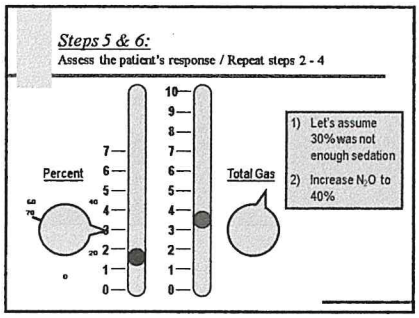

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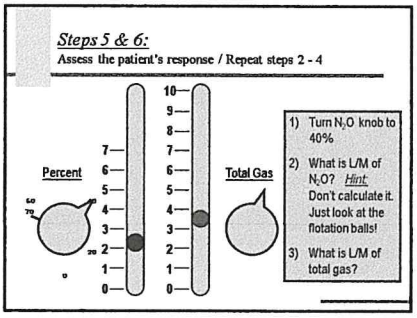

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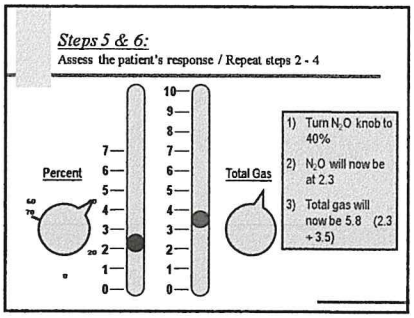

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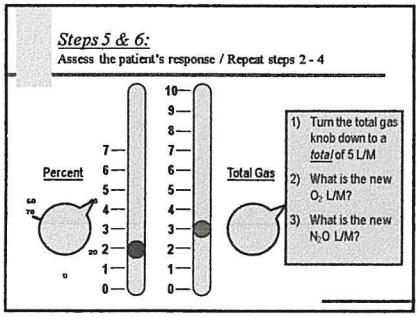

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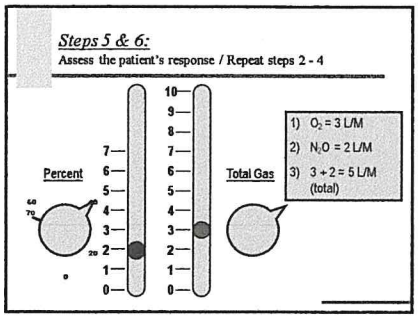

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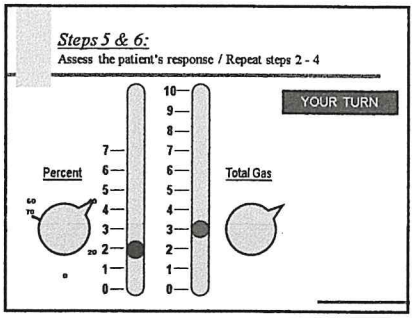

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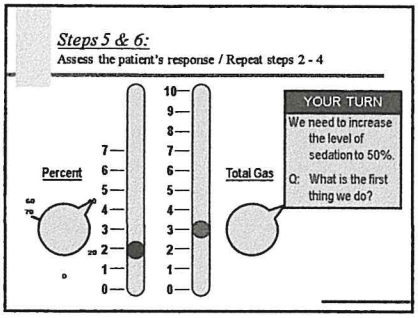

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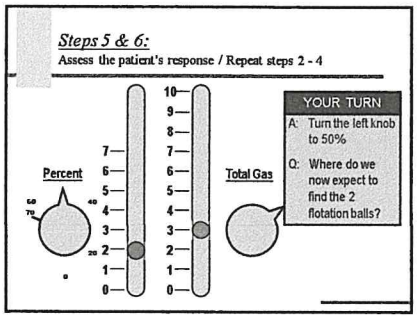

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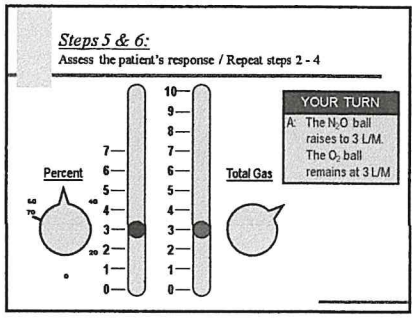

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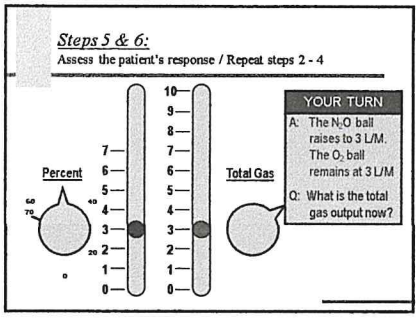

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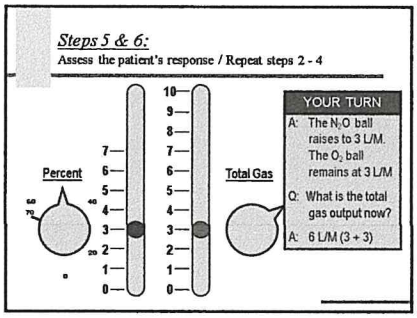

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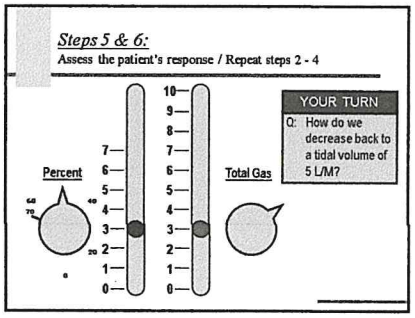

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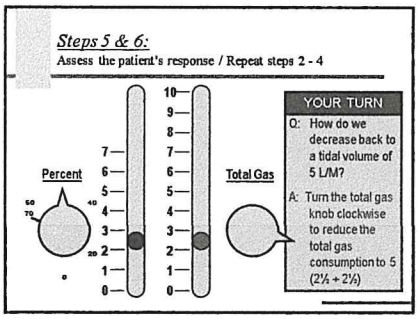

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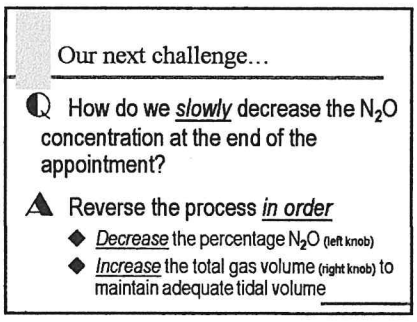

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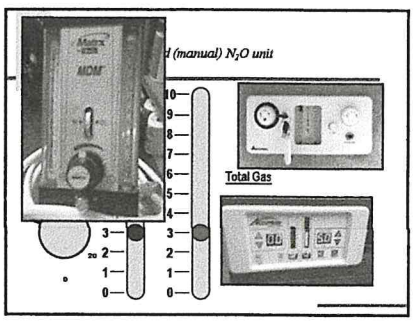

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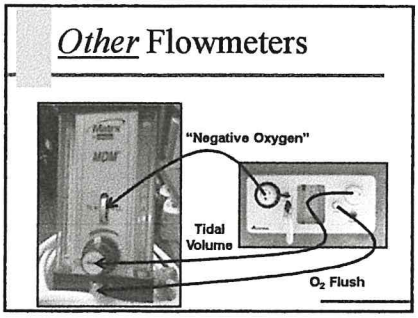

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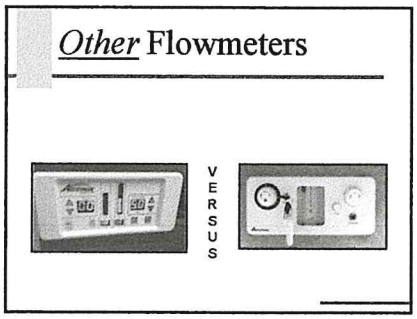

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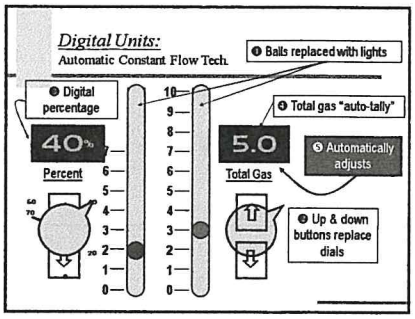

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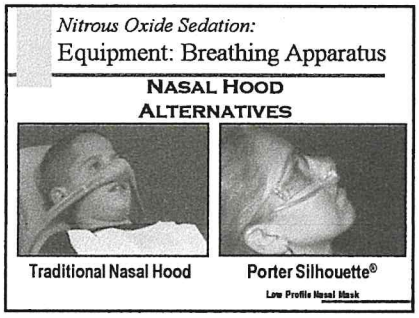

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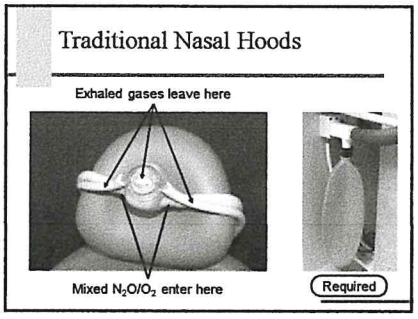

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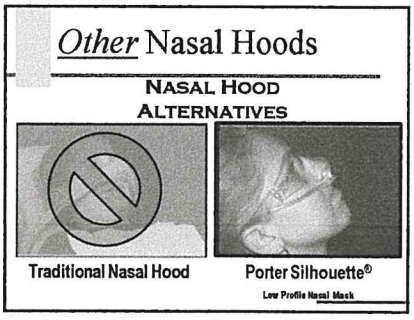

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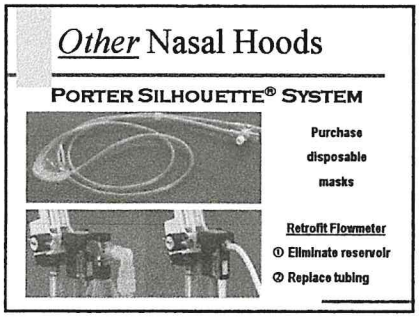

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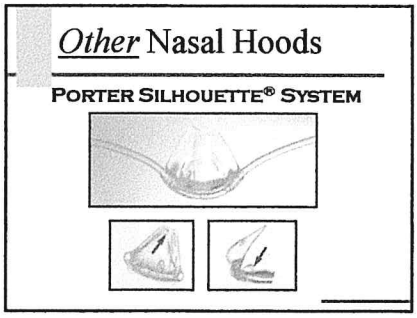

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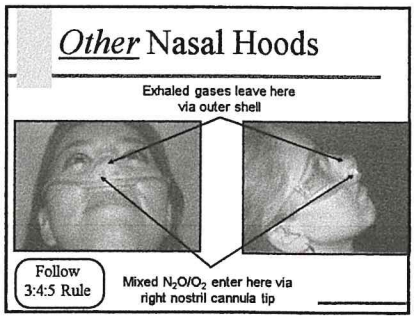

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Other Nasal Hoods

PORTER SILHOUETTE® SYSTEM

1) Superior anterior access

ADVANTAGES

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Other Nasal Hoods

PORTER SILHOUETTE® SYSTEM

1) Superior anterior access
2) Superior scavenging

ADVANTAGES

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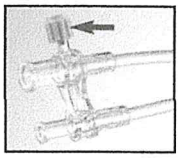
Other Nasal Hoods

PORTER SILHOUETTE® SYSTEM

1) Superior anterior access
2) Superior scavenging
3) Capnography compatible



ADVANTAGES

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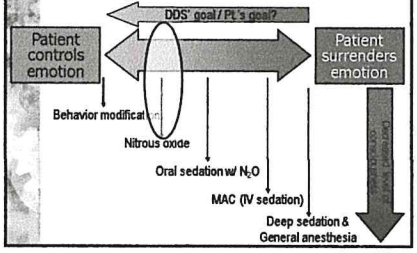
The spectrum of dental fear:
5 techniques



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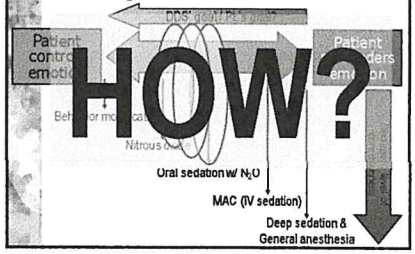
The spectrum of dental fear:
5 techniques



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How???

- Add a short-acting benzodiazepine
- Triazolam *(Halcion®)*

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OVERVIEW:

ORAL SEDATION WITH N_2O

1) Develop modifications to the standard N_2O protocol

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Considerations

What's different from N_2O alone?

1) Patient Selection
2) Patient Education
3) Evening prior to appointment
4) Upon arrival at the office
5) Onset of nitrous oxide
6) Dental treatment
7) Post-op and dismissal

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Step 1:
PATIENT SELECTION

1. Psychological Considerations

- What are the patient's 1° and 2° dental fears?
- What is the patient's DISC® profile?
- How intense is their level of fear?
- Does the patient have a pre-established expectation of sedation? Can it be made consistent with this technique?

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SAME

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Step 1:
PATIENT SELECTION

2. Physiological Considerations

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Step 1:
PATIENT SELECTION

2. Physiological Considerations

- ASA classification I or II

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Step 1:
PATIENT SELECTION

American Society of Anesthesiology

Classification System

I. Normal health
II. 1 or 2 chronic, well-controlled problems *(e.g. diabetes, HBP)*
III. Multiple problems or uncontrolled problem *(e.g. angina)*
IV. Critically ill *(e.g. myocardial infarction)*
V. Impending death

WARNING!

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Step 1:
PATIENT SELECTION

2. Physiological Considerations

- ASA classification I or II
- Known contraindication to BNZ
  - ➢Pregnancy
  - ➢Allergic reactions
  - ➢Glaucoma *(narrow angle only)*
  - ➢Epilepsy / convulsions
  - ➢Marijuana use

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Step 1:
PATIENT SELECTION

2. Physiological Considerations

- ASA classification I or II
- Known contraindication to BNZ
- Past history of failure with N_2O
  - ➢Not an absolute contraindication
  - ➢Addition of BNZ may result in success

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Step 1:
PATIENT SELECTION

2. Physiological Considerations

- ASA classification I or II
- Known contraindication to BNZ
- Past history of failure with N_2O
- Asthma, COPD, sleep apnea or other respiratory condition
  - ➢ BNZ will ↓ ventilation
  - ➢ COPD: O_2 will ↓ respiratory drive

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Step 2:
PATIENT EDUCATION

- With N_2O only, education was minimal
- With BNZ & N_2O, education is
  - More extensive
  - More important

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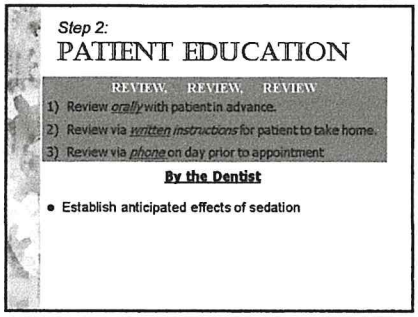

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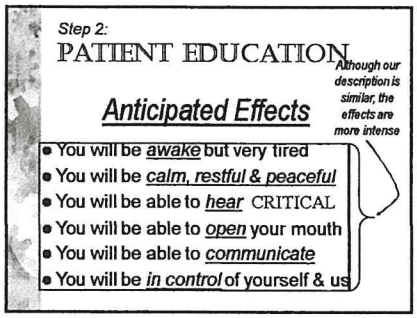

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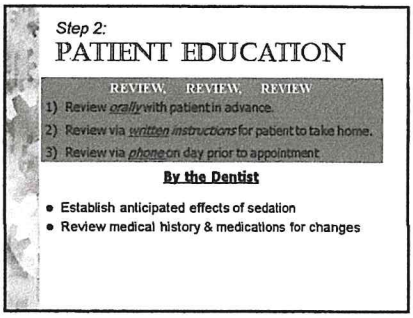

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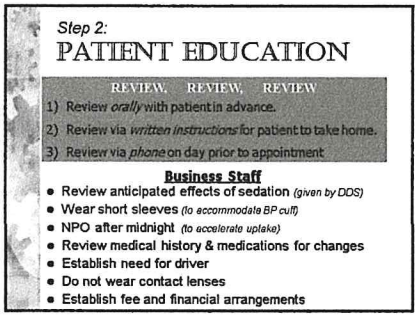

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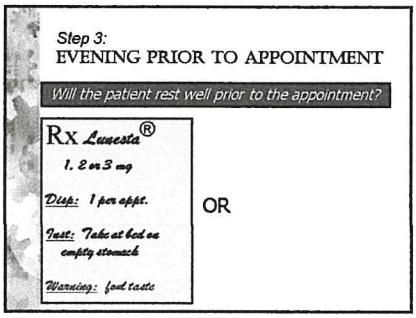

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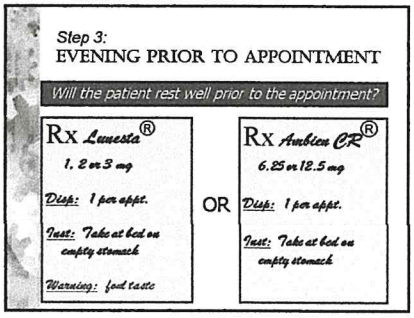

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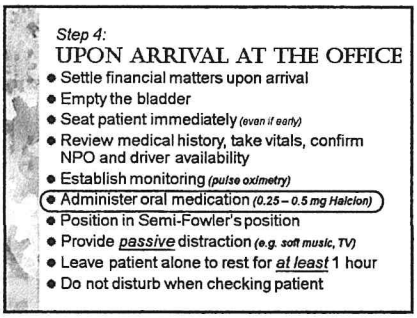

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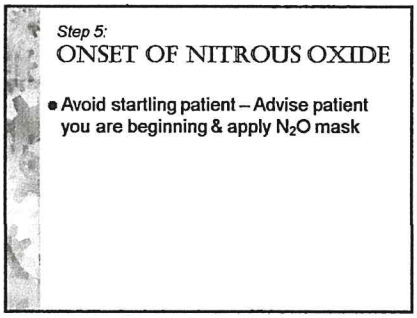

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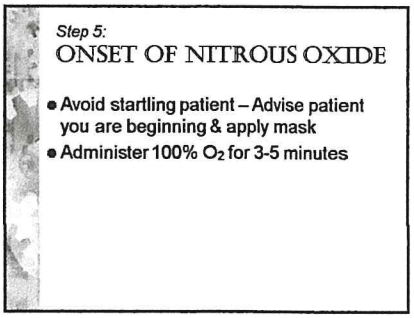


81

Step 5:
ONSET OF NITROUS OXIDE

- Avoid startling patient – Advise patient you are beginning & apply mask
- Administer 100% O_2 for 3-5 minutes
- Transition to 10% N_2O

82

Step 5:
ONSET OF NITROUS OXIDE

- Avoid startling patient – Advise patient you are beginning & apply mask
- Administer 100% O_2 for 3-5 minutes
- Transition to 10% N_2O
- *Carefully* increase N_2O in *5-10%* increments until desire effect is achieved

83

Step 5:
ONSET OF NITROUS OXIDE

- Avoid startling patient – Advise patient you are beginning & apply mask
- Administer 100% O_2 for 3-5 minutes
- Transition to 10% N_2O
- *Carefully* increase N_2O in *5-10%* increments until desire effect is achieved
- *Never* exceed 50% N_2O

84

Step 6:
DENTAL TREATMENT

- Topical anesthetic
- Gentle local anesthetic administration
- Wait 3-5 minutes for onset
- Confirm effectiveness of anesthesia
- Proceed with treatment
- Periodically confirm patient's comfort
- Consider decreasing N_2O as treatment progresses

85

Step 6:
DENTAL TREATMENT

- Topical anesthetic
- Gentle local anesthetic ad…ion
- Wait 3-5 minutes fo…
- Confirm effecti…f anesthesia
- Proceed…atment
- Pe…confirm patient's comfort
- …ider decreasing N_2O as treatment progresses

Minimize talking during treatment

86

Step 7:
POST-OP & DISMISSAL

Do not proceed to subsequent step until stable.

- Slowly discontinue N_2O over 5 minutes
- 100% pure O_2 for 5-10 minutes
- Room air for 10 minutes
- Post-op vital signs / Confirm patient's orientation
- Post-op instructions with patient *and guardian*

87

Step 7:
POST-OP & DISMISSAL

Post-op instructions (oral & written)

- Have an escort for 4-6 hours
- Have something light to eat
- Plan on sleeping 4-6 hours
- Do not drive *(or operate machinery)* for 24 hrs.
- Avoid making major decisions today
- Provide office & emergency phone nos.

88

Step 7:
POST-OP & DISMISSAL

Do not proceed to subsequent step until stable.

- Slowly discontinue N_2O over 10 minutes
- 100% pure O_2 for 5-10 minutes
- Room air for 10 minutes
- Post-op vital signs
- Post-op instructions with patient *and guardian*

89

Step 7:
POST-OP & DISMISSAL

Do not proceed to subsequent step until stable.

- Slowly discontinue N_2O over 10 minutes
- 100% pure O_2 for 5-10 minutes
- Room air for 10 minutes
- Post-op vital signs
- Post-op instructions with patient *and guardian*
- Assess and confirm full orientation

90

Step 7:
POST-OP & DISMISSAL

Do not proceed to subsequent step until stable.

- Slowly discontinue N_2O over 10 minutes
- 100% pure O_2 for 5-10 minutes
- Room air for 10 minutes
- Post-op vital signs
- Post-op instructions with patient *and guardian*
- Assess and confirm full orientation
- Escort to automobile

91

Step 7:
POST-OP & DISMISSAL

Always check patient by phone on the evening of the appointment

92

Program Overview...
Nitrous Oxide & Oral Sedation

- Understanding the Spectrum of Anesthesia
- Why Sedate Dental Patients
- Review the N_2O Constant-Flow Technique
- Develop Protocols for N_2O/Oral Sedation
- Benzodiazepine Pharmacology Made Simple

93

Pharmacology

Understanding Halcion®
Triazolam

94

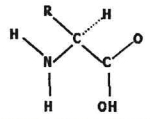
Halcion

...is a benzodiazapine

95

Benzodiazepines...

Mode of action
- ✓ Enhances GABA
  - ✓ Gamma-aminobutyric acid
  - ✓ Non-protein amino acid
  - ✓ Neurotransmitter in brain



Over 500 in nature
20 make human proteins

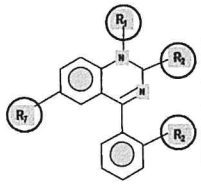
96

Benzodiazepines...

Mode of action	Primary effects
✓ Enhances GABA ✓ Gamma-aminobutyric acid ✓ Non-protein amino acid ✓ Neurotransmitter in brain	✓ Sedative ✓ Hypnotic *(sleep-inducting)* ✓ Anxiolytic ✓ Anticonvulsant ✓ Muscle relaxant ✓ Amnesic

97

BNZ Basic Molecule



Changes at these sites determines the exact behavior of the medication

98

Benzodiazepines...
...so many choices

- 5 classes
- 38 major varieties
- Marketed under 108 brand names

99

BNZ Choices

Generic	Brand	Time to Peak (hrs)	Elimination Half-life (hr)	Equivalent Oral Dosage

100

BNZ Choices

Generic	Brand	Time to Peak (hrs)	Elimination Half-life (hr)	Equivalent Oral Dosage
Midazolam	Versed	½ - 1	3 1.8 - 6	7.5mg

101

BNZ Choices

Generic	Brand	Time to Peak (hrs)	Elimination Half-life (hr)	Equivalent Oral Dosage
Midazolam	Versed	½ - 1	3 1.8 - 6	7.5mg
Triazolam	Halcion	½ - 2	2	0.25mg 0.5 (diacetal)

102

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Diazepan	Valium	1 - 1½	20 -100 Met: 36 - 200	10 mg

103

BNZ Choices

Generic	Brand	Time to Peak (hrs)	Elimination Half-life (hr)	Equivalent Oral Dosage
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Triazolam	Halcion	½ - 2	2	0.25mg 0.5 (diacetal)
Diazepan	Valium	1 - 1½ ?	20 -100 Met: 36 - 200	10 mg
Lorazepam	Ativan	2 - 4	10 - 20	1 mg

104

BNZ Choices

Generic	Brand	Time to Peak (hrs)	Elimination Half-life (hr)	Equivalent Oral Dosage
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105

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106

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107

Halcion...

...indications for use

- ✓ Acute insomnia (esp. jet lag)
- ✓ Adjunct to medical procedures

108

Halcion...
...in dentistry

- Hypnotic *(induces sleep)*
- Anxiolytic *(reduces anxiety)*
- Sedative *(reduces response to excitement)*
- Antograde amnesia *(unable to remember)*

109

Halcion...
...in dentistry

- Anticonvulsant *(excess local anesthetic)*
- Muscle relaxant *(restful appointment)*

110

Halcion...
...metabolism

- ✓Active
  - ✓Oral: 44%
  - ✓Sublingual: 53%
- ✓Broken down in liver
- ✓Excreted in urine

20% Boost!

111

Halcion...
...interactions

Medications/foods that prohibit the breakdown of Halcion cause unusually prolonged effects of the medication.

- ✓ Ketoconazole & Itraconazole *(antifungals, incl candidia)*
- ✓ Isoiazid *(TB)*
- ✓ Nefazodone *(rarely use antidepressant)*
- ✓ HIV protease inhibitiors
- ✓ Diltiazem: *(Angina, Ca channel blocker)*
- ✓ Erythomycin & Troleandomycin
- ✓ Oral contraceptives
- ✓ Grapefruit juice

112

Halcion...
...contraindications & considerations

- ✓Pregnancy
- ✓Nursing *(passes into milk)*
- ✓Glaucoma *(acute narrow angle)*
- ✓Elderly *(prolonged breakdown)*
- ✓Alcohol *(severely enhanced effects)*
- ✓Pediatric safety not established

113

Halcion
...oversedation

- Respiratory depression
- Respiratory depression
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114

Program Overview...
Nitrous Oxide & Oral Sedation

- ➢ Understanding the Spectrum of Anesthesia
- ➢ Why Sedate Dental Patients
- ➢ Review the N_2O Constant-Flow Technique
- ➢ Develop Protocols for N_2O/Oral Sedation
- ➢ Benzodiazepine Pharmacology Made Simple
- ➢ Proper Monitoring Techniques

115

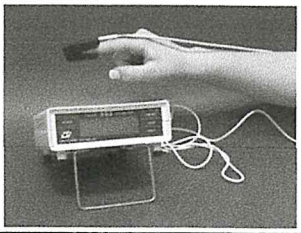
Let's invent a machine...
...to measure respiration

- ✓✓✓✓ 1) Reliable
- ✓✓✓✓✓ 2) Non-invasive
- ✓✓✓✓✓ 3) Not intimidating to patient
- ✓✓✓✓✓ 4) Easy to operate
- ✓✓✓✓✓ 5) Continuous operation
- ✓✓✓ 6) Inexpensive

Does such a machine exist? Consider the Pulse Oximeter

116

Monitoring respiration...
...to with pulse oximetry



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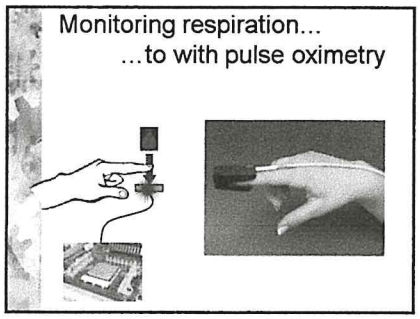

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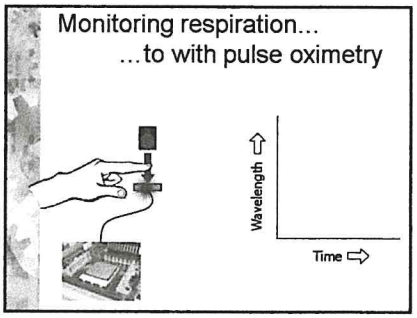

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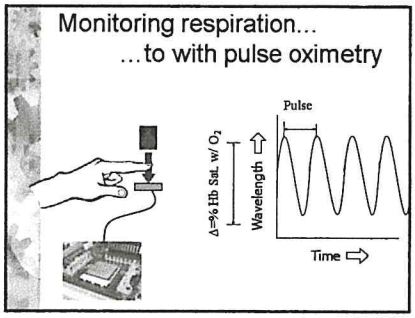

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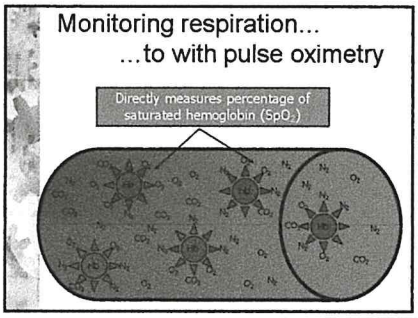

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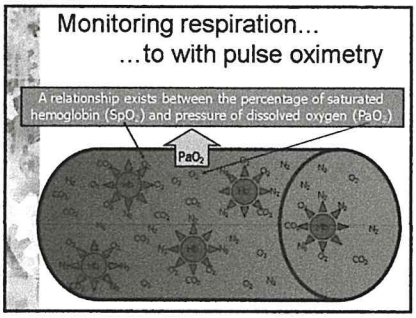

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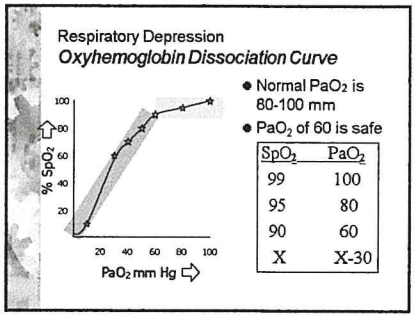

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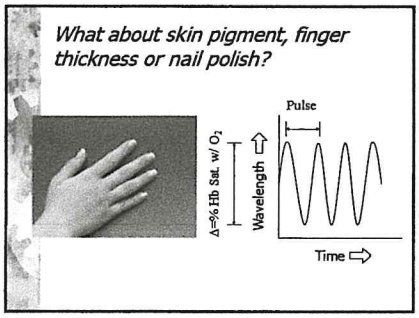

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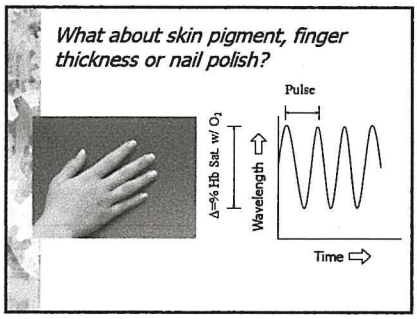

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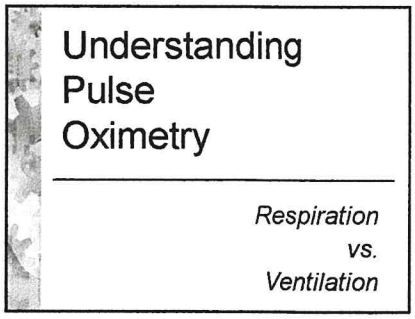

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3 Components of Respiration

- ***Ventilation:*** the ability to physically move gases through the airway tree and replace the gases in the alveoli
- ***Gas Transport:*** the ability to deliver useful oxygen to the cells and return carbon dioxide to the lungs
- ***Gas Exchange:*** the ability to move gas through a membrane at either the alveoli or systemic cell

127

The Good News:

- During oral sedation with N_2O, *even during emergency situations*, gas transport and exchange usually remain unchanged. Therefore, *ventilation* is the major concern.

128

Under normal conditions

- DDS must watch for decreased ventilation *(movement of air)* caused by BNZ
- A decrease in respiration *(oxygenation of the tissues measured on the oximeter)* implies a decrease in ventilation

129

Remember...

1) During the oral sedation with N_2O, *even during emergency situations*, gas exchange and transport remain unchanged.
2) Therefore, *ventilation* is the major concern.

These statements are only true if we don't artificially distort exchange or transport!

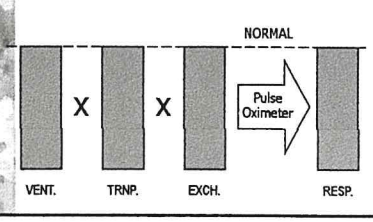
130

Q: What can distort transport and exchange?

A: Oxygen

131

O_2's effect on oximetry
Normal *(room air)*



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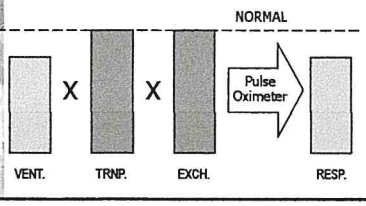
O_2's effect on oximetry
Decreased ventilation *(room air)*



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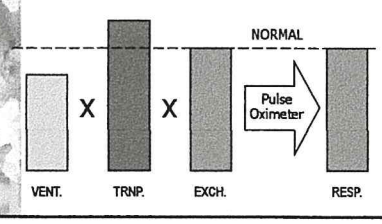
O_2's effect on oximetry
Decreased ventilation *(add O_2)*



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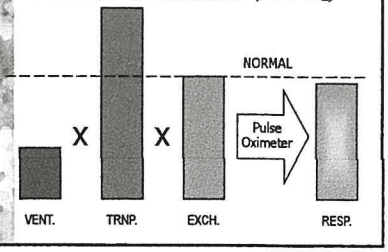
O_2's effect on oximetry
Decreased ventilation *(add O_2)*



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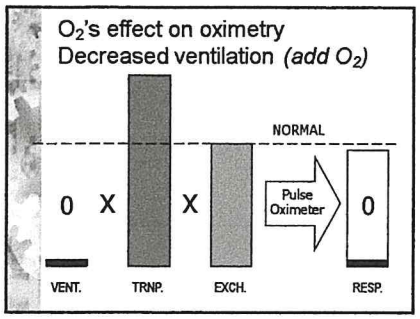

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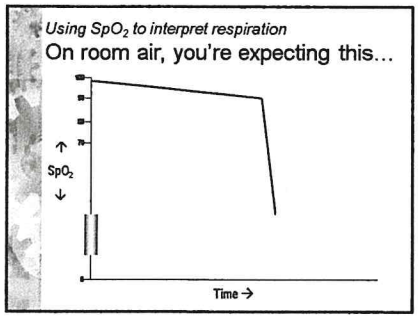

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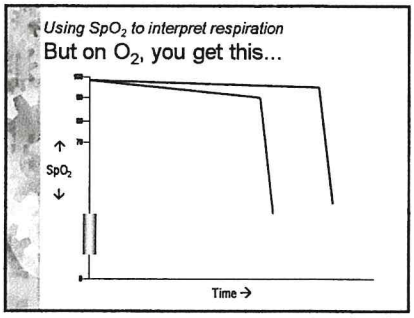

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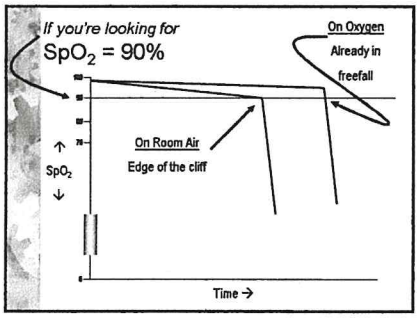

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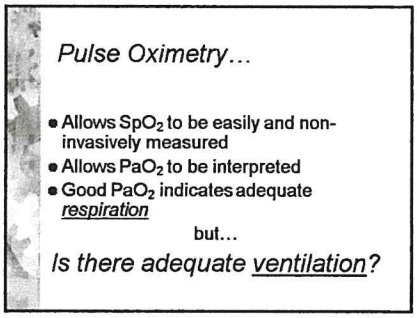

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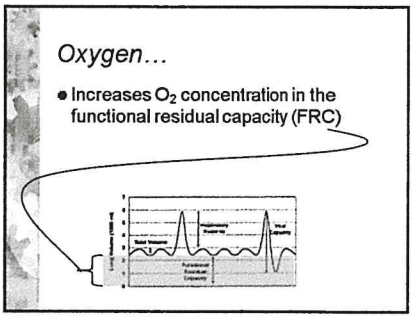

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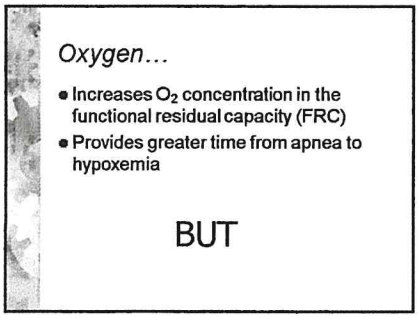

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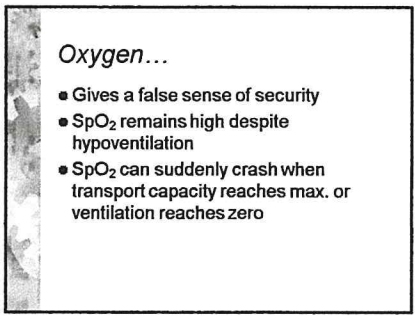

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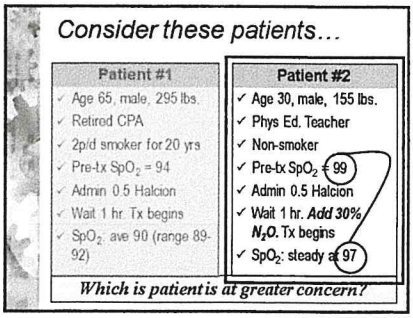

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When O_2 is administered, a stable SpO_2 does not guarantee successful ventilation.

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Nitrous Oxide & Oral Sedation

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- Benzodiazepine Pharmacology Made Simple
- Proper Monitoring Techniques
- Complications & Solutions

146

Problems & Complications

Complications	Problems
Respiratory depression	Chronic exposure
Excess perspiration	Recreational use
Expectoration	Sexual phenomena
Behavioral issues	
Shivering	
Nausea & vomiting	

147

Problems & Complications

Complications	Problems
Respiratory depression ☆	Chronic exposure
Excess perspiration	Recreational use
Expectoration	Sexual phenomena
Behavioral issues	
Shivering	
Nausea & vomiting	

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Respiratory Depression
Benzodiazapines

Apnea	Obstruction
Loss of the *desire* to breath	Loss of the *ability* to breath
Drug induced	Anatomically induced
Less common at oral dosages	Most likely event

149

☆ **Respiratory Depression:**
Treatment

This is the big one!

- Arouse patient: *"Take a deep breath."*
- DC N_2O / Flush with oxygen
- ABCs of BLS

Maintain the airway

150

☆ **Respiratory Depression:**
Treatment

This is the big one!

- Arouse patient: *"Take a deep breath."*
- DC N_2O / Flush with oxygen
- ABCs of BLS
- Consider Romazicon® *(flumezenil)*, 0.4 mg
- Activate EMS

151

☆ **Respiratory Depression:**
Treatment

This is the big one!

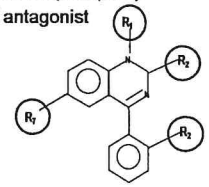
- Arouse patient: *"Take a deep breath."*
- DC N_2O / Flush with oxygen
- ABCs of BLS
- Consider Romazicon® *(flumezenil)*, 0.4 mg
- Activate EMS

If patient is retained, monitor patient for extended time

152

Romazicon®:
What is this stuff?

- It is a benzodiazepine (BNZ)
- It is a BNZ antagonist



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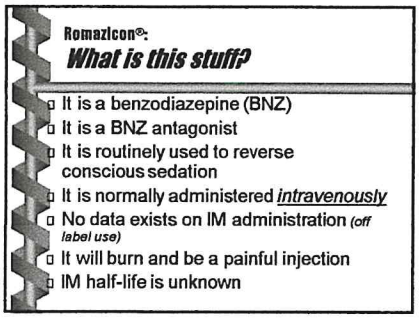

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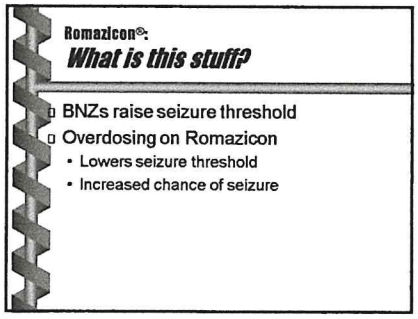

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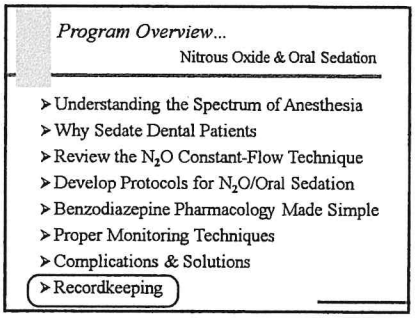

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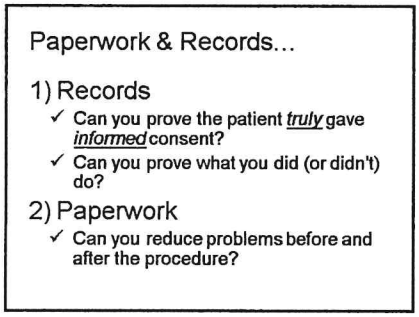

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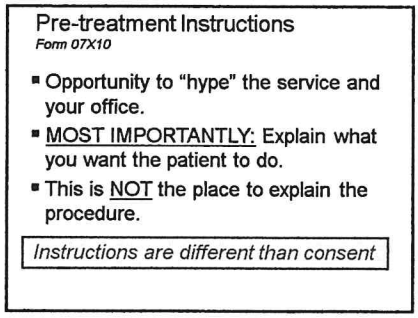

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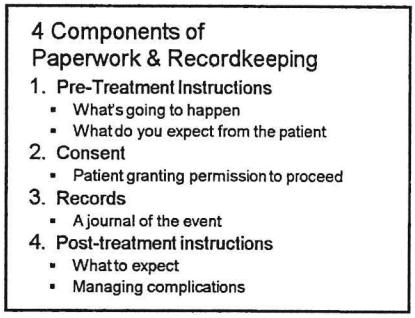

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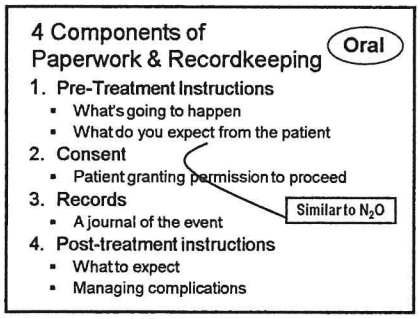

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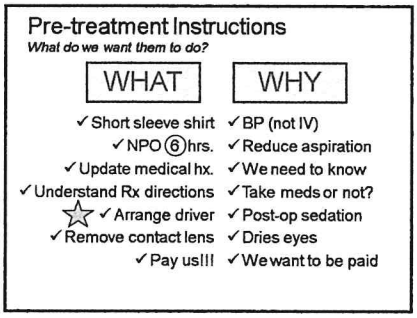

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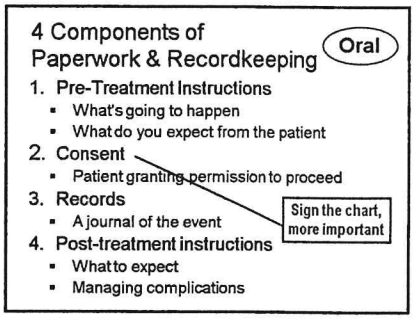

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Informed Consent
Form 11X11

What needs to be covered

- ✓ Purpose: Explain what will happen
- ✓ Permission: What if the treatment plan changes?
- ✓ Responsibility: Does the patient understand what we expect of them?
- ✓ Complications: Things can happen
- ✓ Questions: Did the patient have a reasonable opportunity to ask questions?
- ✓ Acknowledgements: Did the patient authorize the sedation?

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Informed Consent
Form 11X11

How to accomplish informed consent

- ✓ Give paperwork at instructions appointment
- ✓ Have them read it at home
- ✓ Bring it back with their questions written in the space provided / Answer them
- ✓ Have them sign it on the day of the procedure
- ✓ Expect them to forget the form
- ✓ Replace it

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4 Components of Paperwork & Recordkeeping

Oral

1. Pre-Treatment Instructions
   - What's going to happen
   - What do you expect from the patient
2. Consent
   - Patient granting permission to proceed
3. Records
   - A journal of the event
4. Post-treatment instructions
   - What to expect
   - Managing complications

More detailed

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Recordkeeping
N_2O vs. N_2O/Oral

- N_2O only
  - Beginning & end
- N_2O/Oral
  - Beginning, end *and events during treatment*

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Record of the Procedure
N_2O with oral sedation

The only real difference is the record is

TIME BASED

Form 11X11

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4 Components of Paperwork & Recordkeeping

Oral

1. Pre-Treatment Instructions
   - What's going to happen
   - What do you expect from the patient
2. Consent
   - Patient granting permission to proceed
3. Records
   - A journal of the event
4. Post-treatment instructions
   - What to expect
   - Managing complications

V. Important
In writing
w/ guardian

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Post-op Instructions
Form 06X10

- ✓ Oral medication still active
- ✓ Patient may not remember what is said
- ✓ Review orally with the patient *and a responsible adult*

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Post-op Instructions
Form 06X10

- ✓ Give us a contact number (esp if not staying at home)
- ✓ Eat something light
- ✓ Do not drive
- ✓ Avoid major decisions
- ✓ Call us if *anything* seems unusual
- ✓ Provide doctor's after-hours contact info

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Program Overview...

Nitrous Oxide & Oral Sedation

That's all folks!

CONTACT INFORMATION

Larry J. Sangrik, D.D.S.
401 South Street, Suite 3B1
Chardon, OH 44024
Phone: (440) 286-7138
FAX: (440) 286-7139
www.Interactivedentaseminars.com
Email
info@interactivedentalseminars.com

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