

CONSENT FOR TREATMENT

We provide the best possible care for every child. Providing high quality care can sometimes be very difficult or even impossible because of a lack of cooperation. Behaviors that can interfere with quality dental care are: hyperactivity; resistive movements; refusing to open the mouth or keep it open long enough to perform the necessary dental treatment; and even aggressive or physical resistance to treatment such as kicking, yelling and grabbing the dentist's hand or dental instruments.

We will use warmth, friendliness, persuasion, humor, charm, gentleness, kindness, and understanding to help make your child's dental experience enjoyable.

If this care is not enough, however, there are several other behavior management techniques that are used by dentists to eliminate disruptive behavior and prevent patients from causing injury to themselves. The more frequently used behavior management techniques are as follows:

PLEASE FEEL FREE TO ASK QUESTIONS REGARDING THE FOLLOWING TECHNIQUES

1. **MODELING:** Demonstrating the dental environment prior to treatment.
2. **TELL-SHOW-DO:** The dentist or assistant explains what is to be done using simple terminology and then shows the child what is to be done by demonstrating with instruments on a model or the child's or dentist's finger. Then the procedure is performed in the child's mouth as described.
3. **POSITIVE REINFORCEMENTS:** This technique rewards the child who displays any behavior which is desirable. Rewards include compliments, praise, a pat on the back, or a prize.
4. **VOICE CONTROL:** The attention of a disruptive child is gained by changing the tone or increasing the volume of the dentist's voice. Content of the conversation is less important than the abrupt or sudden nature of the command.
5. **MOUTH PROPS:** A rubber or plastic device is placed in the child's mouth between the teeth to prevent closing.
6. **PHYSICAL RESTRAINT BY THE DENTIST:** The dentist restrains the child from movement by holding the child's hands, stabilizing the head, and/or controlling the movements.
7. **PHYSICAL RESTRAINT BY THE ASSISTANT:** The assistant restrains the child from movement by holding the child's hands, stabilizing the head, and/or controlling leg movements.
8. **PAPOOSE BOARDS AND PEDI-WRAPPS:** Passive restraining devices for limiting movements which can cause injury and enable the dentist to provide necessary treatment.
9. **SEDATION:** Sometimes medications are used to relax a child who does not respond to other behavior management techniques or who is unable to comprehend or cooperate for the dental procedures. These drugs may be administered orally, by injection or as a gas (nitrous oxide and oxygen). Your child will not be sedated without your being further informed and obtaining your specific consent for such procedures.

I hereby state that I have read and understand this information, and that all questions have been answered in a satisfactory manner. I understand that I have the right to be provided with answers to questions which may arise during the course of my child's treatment. I further understand that this consent will remain in effect until such time that I choose to terminate it by written request.

PATIENT'S NAME: _____

SIGNATURE OF PARENT or GUARDIAN: _____ DATE: _____

SIGNATURE OF WITNESS: _____ DATE: _____