

West Metro Pediatric Dentistry
Nitrous Oxide and Behavior Management Techniques Information & Informed Consent
Information from the American Academy of Pediatric Dentistry (AAPD)

Why Nitrous Oxide?

Most children are calm, comfortable, and confident in a pediatric dental office. Our office is designed for young people, and our doctors have additional training in caring for infants, children, and adolescents. Our team members all have chosen to work in a pediatric dental office because we like children and want to cater to their special needs. These elements combine to make your child feel relaxed and special. Sometimes, however, a child may feel anxious before or during treatment. Your child may need more support than a gentle, caring manner to feel comfortable. Nitrous oxide/oxygen is a safe, effective sedative agent used to calm a child's fear of the dental visit and enhance effective communication. Additionally, it works well for children whose gag reflex interferes with dental treatment.

What is nitrous oxide/oxygen?

Nitrous oxide/oxygen is a blend of two gases—oxygen and nitrous oxide. A fitted mask is placed over your child's nose, and as the patient breathes normally, uptake occurs through the lungs. At the end of treatment, it is eliminated after a short period of breathing oxygen and has no lingering effects.

How will my child feel when breathing nitrous oxide/oxygen?

Your child will smell a faint sweet aroma and experience a sense of well-being and relaxation. Since it may produce a feeling of giddiness or euphoria, it is often called "laughing gas." Children sometimes report dreaming and their arms and legs may feel "tingly." It raises the pain threshold and may even make the time appear to pass quickly. If your child is worried by the sights, sounds, or sensations of dental treatment, he or she may respond more positively with the use of nitrous oxide/oxygen.

How safe is nitrous oxide/oxygen?

Very safe. Nitrous oxide/oxygen is perhaps the safest sedative in dentistry. It is well tolerated. It has a rapid onset, is reversible, can be adjusted in various concentrations and is non-allergenic. Your child remains fully conscious—keeps all natural reflexes—when breathing nitrous oxide/oxygen. He/she will be capable of responding to questions or requests.

Are there special instructions for nitrous oxide/oxygen?

First, give your child little or no food in the two hours preceding the dental visit (occasionally, nausea or vomiting occurs when a child has a full stomach*). Second, let us know about any respiratory conditions that make breathing difficult for your child, as it may limit the effectiveness of nitrous oxide/oxygen. Third, let us know if your child is taking any medications the day of the appointment.

**According to the AAPD, nausea and vomiting are the most common adverse effects, occurring in 0.5 percent of patients. A higher incidence is noted with longer administration of nitrous oxide/oxygen, fluctuations in nitrous oxide levels, and increased concentrations of nitrous oxide. Fasting is not required for patients undergoing nitrous oxide analgesia/analxiolysis. The practitioner, however, may recommend that only a light meal be consumed in the two hours prior to the administration of nitrous oxide.*

Will Nitrous oxide/oxygen work for all children?

Pediatric dentists know that all children are not alike. Every service is tailored to your child as an individual. Nitrous oxide/oxygen may not be effective for some children, especially those who have severe anxiety, nasal congestion, or discomfort wearing a nasal mask. We will review your child's medical history, level of anxiety, and dental treatment needs and inform you if nitrous oxide/oxygen is recommended for your child.

According to the AAPD, contraindications for use of nitrous oxide/oxygen inhalation may include: 1. Some chronic obstructive pulmonary diseases. 2. Severe emotional disturbances or drug-related dependencies. 3. First trimester of pregnancy. 4. Treatment with bleomycin sulfate. 5. Methylenetetrahydrofolate reductase deficiency. 6. Cobalamin deficiency.

Are there restrictions with nitrous oxide/oxygen and pregnancy?

If you are pregnant or think you may be pregnant, you may not stay in the room during treatment with the use of nitrous oxide/oxygen.

Because we cannot accurately determine, nor would we want to speculate about the possibility of pregnancy, we require that you accept responsibility for asking if your teenage daughter may be pregnant before any dentistry is provided. You, the parent, must inform us if your daughter is pregnant. Further, if we suspect your daughter is pregnant, we will be required to ask her but will do so privately. We may be required under state law to protect her privacy and will not be held liable for our adherence to state law.

What other anxiety reducing techniques may be used to help my child through his/her dental appointment?

The following is a list of some of the other anxiety reducing techniques that may be used in addition to or instead of nitrous oxide/oxygen to help your child through his/her dental appointment. Please know that none of these techniques or tools are used in any way as punishment. They are standards of care in the pediatric dental community, and are used only if necessary to provide the best dental care. They are used to calm the child, gain the cooperation of the child to eliminate disruptive behavior, to prevent him/her from causing injury to him/herself due to uncontrollable movements, and to make the procedure more comfortable for the child.

- **Tell-Show-Do:** The dentist or assistant explains to the child what is to be done using simple terminology and repetition 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. Praise is used to reinforce cooperative behavior.
- **Positive reinforcement:** This technique rewards the child who displays any behavior which is desirable. Rewards include compliments, praise, pat on the back, a hug, or a prize.
- **Voice alteration:** Is a controlled alteration of voice volume, tone, or pace to influence and direct the patient's behavior.
- **Immobilization by the dentist:** The dentist controls the child from movement by gently holding the child's hands or upper body, stabilizing the child's head between the dentist's arm and body. This is done for the child's safety.
- **Immobilization by the assistant:** The assistant controls the child from movement by gently holding the child's hands, stabilizing the head, and/or controlling leg movements. This is done for the child's safety.
- **Mouth props:** A mouth prop or "tooth pillow" as we call it is used to help support your child in keeping his/her mouth open during an operative procedure (filling, etc) This allows him/her to relax and not worry about consciously keeping his/her mouth open for the procedure.
- **Rubber dam/Isolite System:** A rubber dam is a "raincoat" placed on the area of work to be worked on to isolate the teeth and prevents any debris from being swallowed or going to the back of the throat. The Isolite system is similar to a rubber dam, but includes a suction feature to help keep the area of treatment dry.

ALL IN GOOD INTENTION: It is our intent that all professional care delivered in our dental office shall be of the best possible quality we can provide for each child. We believe that any dentist can get your child's work done – our mission is to do so in a manner which leaves your child with good positive feelings about going to the dentist. The entire focus is on your child, relating to them, fostering good dental health habits and instilling a healthy, positive attitude toward dentistry for life.

AUTHORIZATION FOR USE OF NITROUS OXIDE/OXYGEN AND OTHER ANXIETY REDUCING TECHNIQUES

I acknowledge reading and understanding all of the above content. I have been encouraged to ask questions about the use of nitrous oxide/oxygen and other anxiety reducing techniques and they have been answered in a satisfactory manner. I authorize West Metro Pediatric Dentistry to use the above anxiety reducing techniques (nitrous oxide/oxygen specially noted below) to help my child through his/her appointment. I acknowledge that I have not been coerced/ forced to sign this consent and that I have been given the alternative to withdraw from it.

Please check one of the following:

_____ Yes, my child may have nitrous oxide/oxygen today. _____ No, my child may not have nitrous oxide/oxygen today.

Child's Name: _____ Date of Birth: _____

Is this child currently taking any short or long term medications: YES / NO

If yes, please list: _____

Does this child currently have any short or longer term medical conditions? YES / NO

If yes, please list: _____

Does this child currently have any drug allergies or other allergies? YES / NO

If yes, please list: _____

Legal Guardian Printed Name: _____ Relationship to child: _____

Legal Guardian Signature: _____ Date: _____

Dental Assistant Notes:

Patient Weight: _____ Nitrous Oxide Start Time: _____ Nitrous Oxide Finish Time: _____
Oxygen Start Time: _____ Oxygen Finish Time: _____