

One of our most important parental policies is to “Inform Before We Perform”. This means that we will explain your child’s treatment to you in detail before such treatment is started.

A visit to the dental office presents the young child with lots of new and unfamiliar experiences. All efforts will be made to gain the confidence and cooperation of our young patients by warmth, humor, gentle understanding and friendly persuasion.

There are several behavior management techniques that are used in our office to help children get the quality dental care they need. These behavior management techniques are approved by the American Academy of Pediatric Dentistry (AAPD) and can be found in the AAPD Guidelines online.

Let us tell you about the ones we use on a regular basis in our office:

- **Tell-Show Do** is the use of simple explanations and demonstrations, geared to the child’s level of maturity.
- **Positive Reinforcement** is rewarding the helpful child with compliments, praise a hug or prize.
- **Voice Control** is getting the attention of a noisy child by using firm commands and varying tones of voice.
- **Physical Restraint by the Dental Team:** it is sometimes necessary for the dental assistant to gently restrain the child’s movement by holding the hands, arms or legs. Sometimes the child’s head is gently stabilized by being held between the dentist’s arm and the body, or with the help of the dental assistant. A rubber or plastic mouth prop (“tooth pillow”) is placed in the child’s mouth to prevent closing when the child refuses to open or has trouble keeping the mouth open. Sometimes we might ask you as a parent/ guardian to help us stabilize the child safely in the chair. Physical restraint in an uncooperative child is very rarely used in our office, and usually when the patient requires urgent treatment, and for very short periods of time. It will never be used without your consent to do so.
- **Physical Restraint by Papoose Board or Pedi-Wrap.** Rarely used. The use of this type of restraint is standard of care in medicine. It holds arms, body and legs secure with Velcro and cloth wraps during treatment. It is used as a last resort when emergent, short treatment cannot be accomplished by any other way and only upon signed consent of the parent/guardian.
- **Laughing Gas (Nitrous Oxide)** is another safe way to provide dental treatment to mildly frightened, but cooperative children that can follow instructions. Laughing gas calms the children, but does not put them to sleep or numb their teeth. It has few and very mild side effects and lasts only as long as the gas is being given through a nose mask. On rare occasions, the gas can cause an upset stomach and vomiting.

Beyond these techniques, a child with disruptive behavior may need dental treatment with sedation or treatment in a hospital setting, which is covered in a separate consent form.

I have read and understand this information on behavior management. I understand that dental treatment for children includes efforts to guide their behavior by helping them understand treatments in terms appropriate to their age. If any treatment other than the above is needed, it will be discussed with me before beginning such treatment. I understand that I may refuse any or all of the above treatments and procedures. I can do this by drawing a line through the objectionable part and writing my initials next to the portion to which I refuse to consent.

This consent will remain in full force unless withdrawn in writing by the person who has signed on behalf of this minor patient.

I have thoroughly read through and agree to this policy.

Child's Name

Guardian Signature

Date

LOCATED AT:

127 Winslow Street
Watertown, NY 13601

PHONE 315-681-6818 FAX 315-405-4583
smiles@greatbeginningsdentistry.com