



ORAL CONSCIOUS SEDATION: INSTRUCTIONS FOR PATIENT

YOUR COMFORT AND CARE IS OUR PRIMARY FOCUS. TO ENSURE THAT THIS PROCEDURE IS SAFE, COMFORTABLE AND SUCCESSFUL, THE FOLLOWING INSTRUCTIONS MUST BE STRICTLY ADHERED TO.

BEFORE YOUR APPOINTMENT

1. You should not have any solid foods or liquids after midnight or for at least 8 hours before your appointment. If you have a medical reason to eat (diabetic, etc.) AND you have discussed this with your dentist during the consultation, please follow the dentist's recommendation. Triazolam/Ativan is absorbed better on an empty stomach.
2. No tobacco use for 8 hours before your appointment, as it is a stimulant.
3. Take the Triazolam/Ativan pill with a glass of water. Sparkling water makes them absorb better.
4. Do not drink any alcohol within 24 hours before to 24 hours after taking Triazolam/Ativan.
5. Do not use any recreational/illegal drugs for 7 days before your sedation appointment and until 7 days after (never if you are taking narcotic pain medication). Example—using cocaine and then having local anesthetics can kill you.
6. Do not take Triazolam/Ativan if you are allergic to alprazolam (Xanax®), chlordiazepoxide (Librium®, Librax®), clonazepam (Klonopin®), clorazepate (Tranxene®), diazepam (Valium®), estazolam (ProSom®), flurazepam (Dalmane®), lorazepam (Ativan®), oxazepam (Serax®), prazepam (Centrax®), temazepam (Restoril®).
7. Do not take Triazolam/Ativan if you are, or think you might be, pregnant.
8. Do not take any other medications not approved by your dentist at the time of your sedation consultation.
9. Do not take Triazolam/Ativan if you have acute narrow-angle glaucoma.
10. Do not eat grapefruit or drink grapefruit juice while taking Triazolam/Ativan. Grapefruit increases the amount of the drug absorbed and the amount of time it stays in the body, thus having the potential to over sedate you. Therefore, totally avoid grapefruit and grapefruit juice starting 3 days before taking these medications and wait until the day after your appointment to consume them again. Even one small glass or a half grapefruit will have this effect and take 3 days to clear your body.
11. Triazolam/Ativan can dry your eyes out. Don't wear contact lenses to your appointment.
12. Do not drive a motor vehicle for 24 hours after taking Triazolam/Ativan. It is illegal to drive a motor vehicle under the influence of any mind-altering substance, including legal medications. That also includes narcotics, such as codeine, Vicodin® (hydrocodone), Demerol® (meperidine) and Percodan®/Percocet®/Roxicet® (oxycodone). Ibuprofen, Tylenol® and antibiotics are not mind-altering.
13. Use the washroom as soon as you get to the office. It saves interrupting your dental procedure for a "groggy" trip to the restroom. If you do need to use the washroom during your procedure, a staff member of the same sex will accompany you to the washroom and wait outside the door.
14. Please wear lightweight, comfortable clothing. Please wear a short-sleeved shirt to allow for the monitoring your blood pressure during your appointment. Please bring comfortable shoes and socks or bedroom slippers.
15. We will be keeping you warm and comfortable with a blanket, but please feel free to bring your own blanket and pillow for your car ride home.
16. Please leave all valuables, including your purse, wallet, watch and jewelry at home or with your companion.
17. Arrange for a ride to and from your dental appointment. Your ride does not need to stay the entire appointment. They can come back at a certain time, and leave a telephone number in case we finish early or run late. We will ask your driver to sign that we are releasing you into their care and they will drive, not you.
18. It is absolutely essential that your companion drive you to your appointment. We will not be able to proceed with your appointment if you drive yourself. This will result in a cancellation fee of \$50 per scheduled • hour of your appointment.

AFTER YOUR APPOINTMENT

We will discuss your procedure and follow-up instructions and care with your driver/companion, because you may not remember what we told you.

To ensure your safety and comfort, the following instructions must be strictly adhered to.

Restricted activities

- You must not drive for 24 hours after taking sedation medication.
- You must not operate any hazardous devices or do any heavy lifting for 24 hours.
- You should not go to work or make any important decisions for 24 hours after the appointment.
- You must not engage in any activities that require coordination for 24 hours after the appointment.
- You should not carry, sleep next to or be left alone with young children for a period of no less than 24 hours after the last dosage of medication.
- If you are a nursing mother, discard your milk for 1 day after taking Triazolam/Ativan.

Supervision

- A responsible person should be with you until you have fully recovered from the effects of the sedation, usually a minimum of 12 hours.
- You should not go up and down stairs unattended and should stay on the ground floor until recovered.

Nutrition and Hydration

- Having nutrition after sedation is important. You should begin eating appropriate food as soon as possible. Please ask a member of the dental team what food would be appropriate, as this may vary based on the dental treatment. You can have something with nutritious value like Ensure, Carnation Instant Breakfast, Boost, Glucerna for diabetics, etc. as soon as you arrive home.
- You need to drink plenty of fluids as soon as possible and stay hydrated, at least 6 glasses of water the rest of the day after the appointment.

Medication

- You should not take any sedatives or stimulants for 24 hours after the appointment (including alcohol, caffeine or nicotine).
- You should refrain from taking regular medications for 12 hours after the appointment.
- You should take medication as prescribed by the dentist for pain management and infection prevention.

Most patients using this medication do not have serious side effects. Some patients have reported getting out of bed and sleepwalking, driving, eating or talking on the phone while not fully awake. Often they do not remember these activities. This problem can be dangerous to you or to others. The risk for these activities is increased with the use of alcohol or other medications that causes drowsiness.

Patients should seek medical attention if any of these unlikely but serious side effects occur: confusion, unusual feelings of well-being (euphoria), uncontrolled movements (tremor), restlessness, memory loss, sweating, mental/mood changes (e.g., hallucinations, agitation, anxiety, unusual/disturbing thoughts, depression, rare thoughts of suicide), increased or vivid dreams, vision changes, fainting, signs of infection (e.g., fever, persistent sore throat), unusual paleness, unusual tiredness, fast/pounding/irregular heartbeat, yellowing of the eyes/skin, dark urine. A very serious allergic reaction to this drug is unlikely, but seek immediate medical attention if it occurs. Symptoms of a serious allergic reaction may include: rash, itching/swelling (especially of the face/tongue/throat), severe dizziness, trouble breathing. If you feel that your symptoms warrant a physician and you are unable to reach us, go to the closest emergency room immediately.

Side Effects

Following most surgical procedures there may or may not be pain, depending on the patient's threshold of pain. You will be provided with a prescription for appropriate medication for discomfort. In most cases, a non-narcotic pain regimen will be given consisting of acetaminophen (Tylenol) and ibuprofen (Motrin). If a narcotic has been prescribed, follow the directions carefully. If you have any questions about these medications interacting with other medications you are presently taking, please call our office, your physician and/or your pharmacist.

IF FOR ANY REASON YOU ARE CONCERNED ABOUT YOUR CONDITION, NOTIFY DR. GILL OR A MEMBER OF OUR OFFICE STAFF IMMEDIATELY BY CALLING THE NUMBERS BELOW IN THE ORDER LISTED.

Office: (403) 907-0364

Foothills Regional Hospital: (403) 944-1110

• PATIENT/ PARENT/GUARDIAN SIGNATURE: _____ DATE _____