

GENERAL ANESTHESIA: PREOPERATIVE, INTRAOPERATIVE, AND POST OPERATIVE PROCESS, RISK DISCLOSURE AND INFORMED CONSENT

Dear Parent or Guardian,

This letter is intended to provide a detailed explanation of the general anesthesia process for your child's dental procedure and to ensure that you understand the sequence of events, expected physiologic responses, potential risks, and post-operative expectations.

On the day of treatment, you will be invited to accompany your child into the dental treatment area for induction of anesthesia. You will assist your child onto the dental chair. Once your child is positioned, you will be instructed to gently but firmly hold and restrain your child's hands and arms. This is necessary to prevent interference with the anesthesia mask and to maintain patient and provider safety during induction.

An anesthesia mask delivering inhalational anesthetic medication will be placed over your child's face. Once positioned, the mask must remain securely in place until your child is fully anesthetized. Removal or displacement of the mask during induction may compromise safety. If your child cries, they may inhale the anesthetic more rapidly and fall asleep more quickly. If your child remains calm, you may observe involuntary movements including arm or leg movement, head movement, muscle stiffening, stretching, or irregular breathing patterns. These are recognized and expected physiologic responses during the stages of anesthetic induction. Although these movements may appear distressing, they are medically anticipated and do not indicate pain or awareness.

As anesthesia deepens, you may observe rapid breathing and/or snoring sounds. At this point, your child is entering a surgical plane of general anesthesia.

You will then be escorted from the treatment room. For reasons of sterility, patient safety, and to allow all trained personnel to focus exclusively on your child's care, parents or guardians are not permitted to remain in the operatory beyond induction.

Following your departure, the anesthesiologist will apply standard monitoring equipment, which may include electrocardiogram (EKG) leads, pulse oximetry, blood pressure monitoring, capnography, and placement of an intravenous (IV) line as clinically indicated. Your child's eyes will be gently taped closed to prevent corneal dryness or injury during anesthesia.

Upon completion of the dental procedure, your child will be transferred to the recovery area and remain on oxygen and continuous monitoring until stable. You will be reunited with your child during the recovery phase. Emergence from general anesthesia may take approximately 15 minutes to one hour, depending on individual response.

Children may awaken in various emotional states, including calmness, confusion, crying, agitation, or disorientation. These behaviors are common and typically self-limited effects of anesthesia and are not unusual.

If local anesthetic was administered for dental treatment, your child may experience numbness of the lips, cheeks, and tongue for approximately two to four hours. Because protective sensation is diminished, your child may unintentionally bite or chew the lips, cheeks, or tongue, resulting in swelling, ulceration, or soft tissue injury. You are responsible for closely supervising your child during this period and preventing self-inflicted trauma.

During the period of numbness, only soft, cool foods and room-temperature liquids should be provided. Hot foods or beverages must be avoided to reduce the risk of accidental thermal injury, as your child may not be able to perceive temperature adequately.

Your child may attempt to rub the nose, eyes, or mouth upon awakening. Gentle restraint may be necessary to prevent eye irritation, nasal bleeding, or soft tissue injury.

You may observe temporary red marks on the chest from EKG adhesive pads, mild bruising at the IV site, or facial redness from retraction and instrumentation during the dental procedure. These findings are common and typically resolve within one to two days without intervention.

While general anesthesia is widely regarded as safe when administered by trained professionals, it carries inherent risks. Potential risks include, but are not limited to, allergic reactions, uncontrollable nausea and vomiting, airway complications, respiratory depression, cardiovascular instability, aspiration, adverse medication reactions, need for advanced airway management, or unanticipated hospitalization. No guarantees or assurances can be made regarding outcomes.

At any point during the procedure, if the anesthesiologist determines that your child's vital signs are unstable, that continuing treatment presents undue risk, or that any unforeseen medical concern arises, the procedure will be terminated immediately in the interest of patient safety.

In the rare event of a medical emergency that cannot be safely managed within this facility, emergency medical services (911) will be activated and your child will be transported to a hospital for further evaluation and advanced care. By proceeding with treatment, you acknowledge and authorize the anesthesiologist and treating providers to exercise independent medical judgment and to implement any interventions deemed necessary to protect your child's health and safety, including emergency transfer.

The majority of pediatric patients undergo general anesthesia without complication and recover uneventfully. Every precaution is taken to maintain the highest standards of safety; however, inherent medical risks cannot be completely eliminated.

If you have any questions regarding the anesthesia process, associated risks, or post-operative expectations, you are encouraged to discuss them with the treating providers prior to the procedure date.

I acknowledge a clear understanding of the process, the associated risks and benefits, and confirm that all my questions have been answered in detail, both verbally and in writing.

Kindly ensure that this signed paperwork is brought with you on the day of the scheduled appointment.

Name of Legal Parent/Guardian:

Address of Legal Parent/Guardian:

Phone number of Legal Parent/Guardian:

Signature of Legal Parent/Guardian:

Respectfully,

[DR ASAAD KHAN], DDS

[ARIZONA ANESTHESIA FOR DENTISTRY]

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