

**PRE-OPERATIVE INSTRUCTIONS FOR \_\_\_\_\_**

Your appointment is scheduled on \_\_\_\_\_ at \_\_\_\_\_  
*Plan to be here in the office approximately \_\_\_\_\_ hours*

**Special Instructions:**

- Take any regular medications as you normally would (i.e., heart medication, blood pressure pills,) unless instructed otherwise by the doctor.
- Start antibiotic 2 days prior to appointment and continue for 7 days.
- Start steroid (Medrol dose pack) 2 days prior to appt.
- Start Peridex mouth rinse 2 days prior to surgery.

I HAVE READ AND UNDERSTAND THE ABOVE.

Signed: \_\_\_\_\_ date: \_\_\_\_\_

**CONSENT FOR ORAL SEDATION**

Oral sedation is designed to better enable you to undergo a dental procedure. You will be comfortably calm and relaxed. **You must agree to:**

- Provide a responsible escort home & refrain from driving for the remainder of the day.
- Refrain from using any hand operated power tools; or any power driven lawn care, snow removal, or farm equipment for 24 hours.
- Wear a loose shirt or short-sleeved top.
- Defer any responsible or complicated task or any decisions requiring fine judgment for the remainder of the day.
- Refrain from drinking any alcoholic beverages for 2 days.
- **No food or liquids (NPO) of ANY kind is permitted after midnight.**
- Post-operatively- You will be tired for the rest of the day and you are required to rest.
- Reactions- Allergic reactions are extremely rare with the medications being used. However, you are requested to call the office if you feel something is abnormal such as difficulty breathing or swallowing or a general rash or severe itching.

I HAVE READ AND UNDERSTAND THE ABOVE.

Signed: \_\_\_\_\_ date: \_\_\_\_\_

*If you have any questions please call us. We'll be happy to assist you.*