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INSTRUCTIONS FOR DENTAL TREATMENT UNDER GENERAL ANESTHESIA

PLEASE READ ALL INFORMATION CAREFULLY

We have scheduled your child/client for dental treatment under general anesthesia. He/she may not have anything to eat or drink after midnight the evening before surgery. To do otherwise could result in serious injury or death. If the child/client eats or drinks the day of surgery (including peg tube feedings) we will need to reschedule the appointment. Please tell everyone who is directly involved with the child/client's care of this requirement.

1. All paperwork and consents must be returned to our office seven (7) days prior to the scheduled appointment. All paperwork expires sixty (60) days from the date signed. If the original consent form is restricted for any reason, a parent or legal representative must be available on the day of the appointment or the appointment will be cancelled.
2. Please arrive on time for the appointment if you are more than thirty (30) minutes late your child/client may not be seen that day. **Please be advised that the appointment time given is your child's/client's arrival time.** We strive to see each patient on or close to the arrival time but the needs of our patients may require us to change start times. We apologize in advance for any inconvenience this may cause you and we appreciate your understanding in this matter.
3. For the comfort and sensitivity of all our patients, please do not bring food or drink into the waiting area.
4. Please bring a change of clothes in the event of unexpected nausea or bladder accidents. Please remove all nail polish, eye and face make-up.
5. Plan for a minimum of 2-3 hours for the completion of dental work and post-operative recovery. You must remain in the waiting area for the duration of the appointment in the event our staff needs to discuss treatment with you. **YOUR CHILD/CLIENT MAY NOT BE LEFT ALONE IN THE SURGERY CENTER AT ANY TIME, FOR ANY REASON.**
6. Upon completion of treatment, the child/client will be kept in a recovery room to help them wake up from the anesthesia and to prepare for the trip home. The recovery room nurse will notify you when the child/client is ready to leave the clinic area. In order to minimize disruption in the treatment and recovery areas, **PLEASE** remain in the waiting area until the nurse or attending dentist notifies you.
7. You will be contacted to confirm your child's/client's surgery 24 hours prior to the scheduled appointment. If you must cancel your appointment for any reason, please give 48 hours notice prior to canceling. While we understand that emergencies arise, please be advised that if you cancel your child's/client's appointment without proper notice, or if you fail to present for care on the day you are scheduled, you child/client will be moved to the end of our waiting list. We appreciate your understanding and cooperation on this matter.
8. You are responsible for arranging transportation to and from the dental appointment. Private automobile, taxi or an authorized medical transport vehicle are the only methods of transportation that are allowed. We are not able to discharge a patient to travel by SEPTA, bus or train.