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INSTRUCTIONS FOR DENTAL TREATMENT UNDER GENERAL ANESTHESIA

Please have the enclosed forms completed and returned to our office at least fourteen (14) days prior to the scheduled appointment (if scheduled via recall). Missing or incomplete information will result in the need to cancel the appointment. If appointment has not be previously scheduled, we will do so once we receive the completed paperwork, and the chart is cleared by the nurses.

*****PAPERWORK IS ONLY GOOD FOR NINETY (90) DAYS.*****

PLEASE READ ALL INFORMATION CAREFULLY

Patients scheduled for dental treatment under general anesthesia may not have anything to eat or drink after midnight the evening before surgery to avoid serious injury or death. If the patient eats or drinks the day of surgery (including peg tube feedings) we will need to cancel the appointment and the patient will go on the waitlist for the next available slot. Please tell everyone who is directly involved with the patient's care of this requirement.

1. **IMPORTANT INFORMATION**....All paperwork and consents are due at Special Smiles at least 14 days prior to appointment (if scheduled via recall). Sending paperwork prior to the deadline gives the nurses time to review and clear the patients chart. Waiting until the deadline will cause the appointment to be cancelled if the paperwork is incorrect or incomplete. All paperwork expires ninety (90) days from the date signed. If the original consent form is altered in any way, they will not be accepted. All consents must be completed in their entirety by the parent or legal representative to include signature and date of signing. **If there is no date, the consents will not be acceptable.** If they are signed with "restrictions" for any reason, a parent or legal representative must be available on the day of the appointment, or the appointment will be cancelled.
2. Medical clearances can be faxed to 267.639.6270 or emailed to our medical department at front.desk@specialsmilesLtd.com.
3. Please arrive on time for the appointment. If you are more then thirty (30) minutes late the patient may not be seen that day. **Please be advised that the appointment time given is an arrival time.** We strive to see each patient on or close to their 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.
4. For the comfort and sensitivity of all our patients, please do **not** bring food or drink into the office.
5. Please bring a change of clothes in the event of unexpected nausea or bladder accidents.
6. **Plan for a minimum of 4-6 hours to include pre-op wait time, completion of dental work and post-operative recovery. You must remain on the premises for the duration of the appointment in the event our staff needs to discuss treatment with you. THE PATIENT MAY NOT BE LEFT ALONE IN THE OFFICE/WAITING ROOM AT ANY TIME, FOR ANY REASON.**
7. Upon completion of treatment, the patient 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 patient is ready to leave the clinic area. In order to minimize disruption in the treatment and recovery areas, you must remain on premises for the duration of the appointment.
8. You will receive several notifications/reminders/confirmations of appointment via text or email. You will also be contacted by our nurse to confirm the surgery appointment the day before the procedure to go over the instructions. If you must cancel the appointment for any reason, please give at least 48 hours' notice. While we understand that emergencies arise, please be advised that if you cancel the patient's appointment without proper notice, or if they fail to present for care on the scheduled day, the patient will be moved to the end of our waiting list. We appreciate your understanding and cooperation in this matter.