



## PRE-OPERATIVE INSTRUCTIONS FOR DENTAL ANESTHESIA/SURGERY

**\*\* VERY IMPORTANT INFORMATION—PLEASE READ CAREFULLY. \*\***

**\*\*COMPLETE & RETURN ATTACHED “MEDICAL HISTORY UPDATE FORM” (2 OF 10)\*\***

1. If you have any concerns or questions about the surgery, please contact Dr. Roberts at 972/404-1911 or by email at dave@robertsdds.com.
2. He will be reviewing your medical history with you immediately prior to the surgery. Please be sure you are familiar with the name(s) and dosage(s) of any medications you are taking. **If your history is complicated, he will need to consult with your physician before the procedure is performed. Any unaddressed items on your medical history may cause your surgery to be delayed or canceled. A copy of this MD consultation form can be found on page 3 of 10 or on Dr. Roberts’s website at www.robertsdds.com.**
3. Patients who are minors (under 18 years of age) must have a legal guardian present to both fill out the “Medical History Update Form” and to sign the “Disclosure and Consent Forms.”
4. It is important to avoid smoking for at least one week before the surgery and one week following the surgery.
5. Keep in mind that it is best to allow for some flexibility around your appointment time on the day of your surgery. It is best not to “squeeze in” an appointment for surgery on an already busy day.

### **If you are having IV (intravenous) moderate sedation:**

1. **Do not eat or drink anything (including water) for at least six hours prior to your appointment.**
  - **Avoid fatty foods for at least eight hours prior to surgery.**
  - **Unless specified by your dentist, all medicines taken on a routine basis should be continued without interruption. Please swallow with a minimal amount of water.**
2. **A responsible adult, over 18 years of age, should accompany you to the office and should remain in the office during the entire procedure. Following the sedation, this responsible adult should be physically capable of assisting and accompanying you home and should remain with you for the next 24 hours.**
3. If receiving intravenous sedation, you should wear clothing, which is not restricting to the neck or arms. You should wear loose-fitting tops on which the sleeves can be rolled up to the shoulder. Also, please be sure to wear shoes that are securely fastened; no flip-flops or loose-fitting sandals, please.
4. Following the sedation, you should refrain from driving an automobile or engaging in any activity that requires alertness for the next 24 hours.
5. There are important differences between general anesthesia (being completely asleep) and IV moderate sedation. If you have any questions about the IV moderate sedation process, please feel free to contact Dr. Roberts at 972/404-1911, or by email at dave@robertsdds.com, prior to the procedure.

**NOTE: Additional pre-operative information can be found at [www.robertsdds.com](http://www.robertsdds.com). Please preview the “Disclosure and Consent Form” and view all post-op videos on the website prior to your surgery. Copies of forms may also be requested from your dentist.**