ENDODONTIC
EXCELLENCE
WHERE CARING IS OUR SPECIALTY

Dr. Alan Wonhee Lee, DDS, MS
Dr. Steven Kim, DMD

11800 Sunrise Valley Drive, Suite
#250 Reston, Virginia 20191
703-429-9926
info@endoreston.com
www.endoreston.com

INFORMED CONSENT FOR NITROUS OXIDE/OXYGEN CONSCIOUS SEDATION

I. Recommended Treatment

I hereby give consent to our endodontist to perform Nitrous Oxide/Oxygen Conscious Sedation procedure(s) on me or my dependent as follows: Nasal inhalation of nitrous oxide/oxygen with the flow rate of 5-6 L/min, up to 40%nitrous oxide ("Recommended Treatment") Nitrous Oxide Sedation is commonly called laughing gas and provides relaxation. I understand that I (or my dependent) will be awake, fully conscious, aware of my surroundings, and able to respond rationally to questions and directions during the Recommended Treatment. The Recommended Treatment is used for anxiety and pain control, as well as control of gagging. Local anesthesia will also be required for most procedures. The nature and purpose of the Recommended Treatment have been explained to me and no guarantee has been made or implied as to result or efficacy. I have been given satisfactory answers to all of my questions, and I wish to proceed with the Recommended Treatment.

II. Treatment Alternatives

Alternative methods of treatment have been explained to me, such as: Oral sedation, Sleep sedation, No sedation but I wish to proceed with the Recommended Treatment described above.

III. Risks and Complications

I understand that there are risks and complications associated with the administration of medications, including anesthesia, and performance of the Recommended Treatment. These potential risks and complications, include, but are not limited to, the following:

1. Nausea and vomiting.
2. Temporary tingling in the fingers, toes, cheeks, lips, tongue and head or neck area.
3. Temporary warm feeling throughout the body with accompanying flushing/blushing.
4. Temporary detachment or "out of body" sensation.
5. Temporary sluggishness in motion and/or speech.
6. Shivering (usually at the end of the procedure).
7. As a result of the injection or use of anesthesia, there may be swelling, jaw muscle tenderness or even resultant numbness of the tongue, lips, teeth, jaws and/or facial tissues, which is typically temporary, but in rare instances, may be permanent.

Patient Name: ___________________ Signature of Patient or Legal Guardian:___________________ Date:____________