

### Understanding Sedation

1. You will not be unconscious. This is not general anesthesia as is done in a hospital operating room. You will not be intubated (breathing tube down your nose or throat) and you will NOT be on a respirator (mechanical breathing machine.)
2. All of your normal protective reflexes such as swallowing, breathing, coughing, and muscular control remain intact.
3. This procedure may cause drowsiness, make you sleepy from time to time, and you might have periods of short sleep. But its purpose is not to “put you to sleep”. You will NOT be totally asleep all the time.
4. We are sedating you. During this process you most likely will not remember your treatment. But it is possible you may remember bits and pieces of the event. There are no “absolutes” here.
5. Every patient responds differently. Some people have profound effects while others experience less.
6. Most people respond in the manner described above. On rare occasions a patient may have “idiosyncratic effects”. This means they may respond to sedation in a peculiar way, different from the expected norm. If this happens, you must realize that we exercise our professional judgment, leaning always to the side of conservatism and safety and reserve the right to decide to terminate the procedure before all planned services are completed if we determine the sedation is going well.

### After Sedation Instructions

1. You can not drive for 24 hours after sedation.
2. Do not operate any hazardous devices for 24 hours.
3. A responsible person should be with you until you have recovered from the effects of the sedation.
4. You should not go up and down stairs unattended. You should stay on the ground floor until recovered.
5. You can eat whenever and whatever you want.
6. You need to drink plenty of fluids as soon as possible.
7. You may be drowsy for a long time or may be alert when you leave. You need to be attended to in the same manner either way. You should not be trusted alone.
8. You should have someone hold your arm when walking.

Following most surgical procedures there may or may not be pain, depending on your threshold for pain. You will be provided with medication for discomfort that is appropriate for you. In most cases a non-narcotic pain regimen will be given consisting of *Acetaminophen* (Tylenol) and *Ibuprofen* (Advil). These two medications **taken together** will be as effective as a narcotic without any of the side effects associated with narcotics. If a narcotic has been prescribed, follow the directions carefully. If you have any questions about these medications interacting with other medications you are presently taking, please call our office first, your physician and/or your pharmacist.

#### **Medications: Take only when checked**

- ☐ Amoxicillin – Fill prescription and take as directed
- ☐ Erythromycin – Fill prescription and take as directed
- ☐ Tylenol (Acetaminophen) – Take two every 4 hours
- ☐ Advil (Ibuprofen) – Take two every 4 hours
- ☐ Loratab – For pain only – take one every 6 hours
- ☐ Vitamin C – One (1000mg) at every meal 3x a day
- ☐ Co Q 10 – 50mg 2x a day

**If any unusual symptoms or condition arise call the office or doctor at once.**