

IOSN SEDATION FORM – MUST ACCOMPANY ORAL SURGERY FORM IF SEDATION REQUIRED

URN:

TREATMENT COMPLEXITY GUIDANCE – NOT EXHAUSTIVE

[IF IN DOUBT OVER TREATMENT COMPLEXITY PLEASE SCORE THE HIGHER VALUE]

ROUTINE –single rooted extraction of 1 or 2 teeth, small soft tissue biopsy

INTERMEDIATE –multi-rooted tooth extraction, surgical extraction without bone removal, apicectomy anterior tooth,

COMPLEX –surgical extraction with bone removal,

HIGH COMPLEXITY - Any treatment considered more complex than above or are multiples of the above

**COMPLEXITY SCORE –
CHECK ONE**

ROUTINE

INTERMEDIATE

COMPLEX

HIGH COMPLEXITY

The reason for referral is that I have been unable , or felt it inappropriate to treat under local anaesthesia alone because:

- | | | |
|----|---|--------------------------|
| 1. | The patient is unable to co-operate adequately for me to treat them | <input type="checkbox"/> |
| 2. | The patient is too frightened to accept treatment | <input type="checkbox"/> |
| 3. | I have not been able to achieve satisfactory local anaesthesia | <input type="checkbox"/> |
| 4. | The patient gags uncontrollably when I attempt treatment | <input type="checkbox"/> |
| 5. | The patient has a severe phobia of needles | <input type="checkbox"/> |

Other reason (please specify)

Details of treatment attempted, inclusive of dates

MEDICAL & BEHAVIOURAL INDICATORS

This information does not replace a full medical history which should be completed and attached to this referral

CHECK GRADE

No medical or behavioural indicator

1

Systemic disorders (not of severity to exclude sedation) that may be exacerbated by treatment:

2

3 or

Fainting attacks/ epilepsy/ hypertension/ anginal/ asthma/ other (please state)

4

Conditions that compromise ability to cooperate:

Arthritis/parkinsonism/ multiple sclerosis/ other (please state)

2

3 or

As a rule of thumb ASA II would generally be 2 or 3 and an ASA III would result in a grade of 4.

4

Gag reflex

2

Behavioural difficulties

3

4

Patient anxiety question – to be completed by the patient

If you went to your dentist for TREATMENT TOMMORROW, how would you feel?

Not anxious

Slightly anxious

Fairly anxious

Very anxious

Extremely anxious

If you were sitting in the WAITING ROOM (waiting for treatment) how would you feel?

Not anxious

Slightly anxious

Fairly anxious

Very anxious

Extremely anxious

If you were about to have a TOOTH DRILLED, how would you feel?

Not anxious

Slightly anxious

Fairly anxious

Very anxious

Extremely anxious

If you were about to have your TEETH SCALED AND POLISHED, how would you feel?

Not anxious

Slightly anxious

Fairly anxious

Very anxious

Extremely anxious

If you were about to have a LOCAL ANAESTHETIC INJECTION in your gum, above an upper back tooth, how would you feel?

Not anxious

Slightly anxious

Fairly anxious

Very anxious

Extremely anxious