



CHILDREN, PEDIATRIC DENTISTRY AND YOU

Parents are welcome to accompany their child into the treatment area during the initial examination. This gives you the opportunity to see our staff in action and allows Dr. Hugues to discuss dental findings and treatment needs directly with you. This also gives you the opportunity to establish a trusting relationship with Dr. Hugues and his staff members, knowing that they treat each child with love and respect. We ask that when you accompany your child to the treatment area for the initial exam, please play a passive role. If more than one person is speaking to the child during an examination they may become confused. Cooperation and trust must be established directly between Dr. Hugues and your child...not through you.

To make communication between Dr. Hugues and each child more effective, Dr. Hugues requests that parents do not accompany their child into the treatment area during operative appointments (including fillings, etc.). Nearly always, the child's experience in the dental chair is enhanced by a parent's absence. We ask that the parent wait in the reception room during treatment in order to facilitate a direct line of communication between the child and Dr. Hugues. We will make every effort to update the parent as the appointment progresses.

The following is a brief explanation of some of the methods we use to guide your child's behavior and provide a positive dental experience. Since each child is unique, no list can be complete and other methods may be explained as needed.

TELL, SHOW, DO

This is the most important tool for teaching your child. The child is told in simple terms what is going to be done. Then they are shown what is going to be done. The procedure is then performed.

IMAGERY

We tell children in simple, friendly terms what is going to be done. For example, a dental exam becomes "looking and counting your teeth". A dental prophylaxis and cleaning becomes "brush and tickle your teeth". We encourage you to use these terms when talking to your child about their dental experiences.

DISTRACTION

Sometimes it is necessary to distract your child from an unpleasant sensation by focusing his/her thoughts on something other than what is being done.

POSITIVE REINFORCEMENT

This is a technique used to reinforce good behavior by praising your child or providing a reward following a desired response in hopes of promoting continued good behavior.

VOICE CONTROL

Voice control is a controlled change of voice volume, tone or pace used to influence and direct the child's behavior. This technique is used to catch the child's attention and establish a line of communication between the doctor and child.

OVER...

RESTORATIVE RELATED PROCEDURES

Almost all procedures to repair teeth involve the use of the **dental hand piece**, which many people think of as the drill. We refer to it as Mr. Whistle and the slow-speed hand piece as Mr. Bumpy. The sensation these instruments produce will be introduced to your child in a non-threatening manner. A **rubber dam** or "rain coat" is used to isolate the teeth being repaired. This helps keep saliva away from the tooth, protects the soft tissues of the mouth and keep unfamiliar tastes out of your child's mouth. A **mouth prop** or "tooth pillow" is used occasionally so the child's jaw muscles don't become overtired during the procedure, which can cause the child to bite the hand piece.

LOCAL ANESTHESIA

Most restorative procedures require the use of local anesthetic. We grew up calling it "Novocain". Please avoid using words such as "shot" "needle", or "injection". We never use these words around children. Topical anesthetic is used to help numb the soft tissue at the injection site. The child is told that we are going to "wiggle" and "pinch" and put their tooth to sleep with sleepy water. The dental assistant places their arm lightly across the child's chest or holds their hands during the injection to protect the child from reaching up and grabbing the syringe and hurting themselves.

BEHAVIOR MANAGEMENT

There are times when a patients' behavior is extreme enough that they risk causing injury to themselves or a member of the dental staff. This includes; kicking, hitting, and repeatedly reaching hands into the working area. In order to keep your child safe and to complete the necessary work it may become necessary for the doctor and assistants to employ different holding techniques. These techniques include, but are not limited to; hand holding, securing of the head with the Dr.'s arms, and possibly the use of the "sleeping bag" or papoose board.

CONSENT

I understand the behavior management techniques as it has been explained to me. I have a thorough understanding of how my child will be managed should my child's behavior become extreme enough to initiate such measures. I give my permission and agree to allow Dr. Hugues to use said techniques.

Signature

Date