IV CONSCIOUS SEDATION INFORMED CONSENT
Dr. Morad Alkhasawneh, B.Sc., D.D.S

This is my consent for Dr. Morad Alkhasawneh and/or any of his co-workers to administer (IV) conscious sedation. This sedation will be a "light conscious sedation" where you maintain your protective reflexes however, you will be less aware of your environment and of any discomfort. I understand that procedures not discussed, but deemed necessary, may be performed. Listed below are possible complications associated with IV conscious sedation. Serious complications are very rare. The alternative options for some patients include general anaesthesia, nitrous oxide/oral sedation with local anaesthesia or local anaesthesia alone.

Medications, drugs, anaesthetics, and prescription may cause drowsiness and lack of awareness and coordination, which can be increased by use of alcohol or other drugs: thus I have been advised not to operate any vehicle, automobile, or other hazardous devices, or work while taking such medications and/or drugs; or until fully recovered from the effects of the same. I understand and agree not to operate any vehicle or hazardous device for at least 24 hours after my release from the appointment or until further recovered from the effects of the anaesthetic medications or drugs which may have been given to me in the office or which have been prescribed for my care. I agree not to drive myself home after the appointment and will have a responsible adult drive me or accompany me home after my discharge from the office. This responsible person must be present in the clinic before my appointment is started, and must remain present until I am discharged to go home. I will arrange to have a responsible adult remain with me and supervise me at home continuously for 24 hours after my appointment.

Common Complications

- Pain and/or bruising at your intravenous site
- Nausea and/or vomiting
- You may be relatively aware of the procedure

Uncommon Complications

- Headache
- Infection at intravenous site or veins nearby
- Increased level of sedation requiring medication or other procedures to manage
- Inadequate anxiety control without achieving a planned deeper level of sedation – This may require rescheduling for general anesthesia or other arrangements.
- Unexpected drug reaction

I have had the opportunity to discuss the above listed procedure and complications with Dr. Morad and have had all my questions answered to my satisfaction. I have had an opportunity to read and fully understand the above consent.

I UNDERSTAND THAT I AM NOT TO EAT OR DRINK ANYTHING, OTHER THAN INDICATED MEDICATIONS WITH THE SMALLEST AMOUNT OF WATER POSSIBLE FOR 8 HOURS PRIOR TO MY SEDATION.

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Patient Name (print) Date Patient or Parent Signature Date

_____ _____

Doctor Signature Date Witness

Date