

Dental Procedures under Inhalation Sedation

Introduction

The Covid-19 pandemic has placed unprecedented pressures on NHS services. Patients waiting for elective services such as dental extractions, are having to wait longer than anticipated. We understand this situation is less than ideal and appreciate your patience. We have written this document to help answer some questions you may have whilst your child is waiting for their dental procedure.

Guidance for Patients

What is Inhalation Sedation?

A child in your care may require dental treatment under inhalation sedation. Inhalation sedation means that your child will breathe a mixture of nitrous oxide and oxygen from a nosepiece placed on the nose. This will have a relaxing effect and help them to feel less anxious, slightly drowsy and more relaxed for the dental treatment.

Inhalation sedation does not make your child unconscious, so they will remain awake but may feel warm and detached and their memory of the treatment afterwards may be slightly reduced.

Inhalation sedation is widely used technique to help reduce anxiety and fear of dental treatment. This makes the child more co-operative, and it is particularly helpful if they are having a longer, uncomfortable or more complicated procedure.

The dentist and members of the dental team are trained to give sedation. They monitor your child closely and treat any problems that may develop. The nitrous oxide is completely breathed out of the body within 30 minutes of the end of the treatment, which means that your child can recover quickly from this type of sedation.

The dentist will give your child some oxygen at the end of the sedation to help prevent them feeling a bit sick or having a headache.

You will be asked to wait in the department until the dentist has checked that your child has fully recovered from the sedation before you can go home.

Preparing for a procedure under Inhalation Sedation

Before the procedure your child can eat normally but please make sure they only have a light meal up to 2 hours before the procedure, and that they do not have any food and only drink water in the 2 hours prior to the procedure.

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Your child can take any routine medicines as normal, and any medicines or inhalers that your child may need should be brought with them to the appointment. Please make sure your child is wearing loose, comfortable clothing and does not bring any valuables with them to the appointment.

Written consent will be required from the parent/carer before any treatment can be given to your child. If you have agreed and signed the consent form at the assessment appointment, and you are then unable to attend on the day of the treatment, your child must be accompanied by a responsible adult (over 18 years of age).

If your child is unwell on the day with cold/flu symptoms or any contagious illness, please contact the department for advice on the number below. The appointment may need to be rearranged.

Recovering from the procedure

When the dental treatment is completed, the nitrous oxide mixture will be stopped and replaced with oxygen. The nosepiece will be taken off, and your child will be sat up in the dentist's chair and will continue to recover fully for a few minutes. The dentist or a member of the dental team will monitor your child during recovery.

Your child will be able to leave the hospital once they have fully recovered, are alert and are not feeling dizzy. This usually takes about 30 minutes after the treatment has ended. Your child will be checked by the dentist before being allowed to go home.

Your child should not participate in organised or active sports for the rest of the day but may be able to return to school, and the dentist will discuss this with you.

Your child can eat and drink normally after the treatment, but care should be taken if areas of the mouth are still numb to avoid lip, cheek or tongue biting. You will be given information relating to any local analgesia and the treatment your child has received. The dentist will explain which pain relief medicines your child can have while recovering and after the local analgesia wears off.

What should I do while waiting for the procedure?

You can help us to look after your child by continuing to maintain good oral hygiene by brushing your child's teeth twice a day for two minutes, in the morning and before bed, with fluoride toothpaste and avoiding rinsing after brushing, and by making sure your child sees their local dentist for regular check-ups

Toothache can be managed with paracetamol and ibuprofen (unless your child has been told not to take these medicines). These medicines are available at your local pharmacy or supermarket, and you should follow the instructions for dosage for your child's age for that medicine; and ice packs can also be used to help relieve pain and reduce swelling.

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What should I do if my child's health is deteriorating?

If your child's pain is no longer being effectively managed by over-the-counter painkillers such as paracetamol or if they have facial swelling, you should contact your local dentist for advice in the first instance or call emergency dental services on 0161 476 9651.

If your child develops:

- Swellings visible around the neck or inside the mouth that have begun to feel firm rather than soft
- Swellings that are beginning to close your child's eye
- Swellings that are rapidly increasing in size

or if your child's condition is worsening and they have become generally unwell, you should bring them to A&E.

Please note that dental pain with no accompanying swelling does not constitute an emergency and patients presenting to A&E may not be seen and may instead be directed to their dentist or emergency dental services.

Contact Us

Paediatric Dental Secretaries

Phone Line opening hours: Monday – Friday 09:00- 17:00

0151 252 5563

Pre-op Team

Phone Line opening hours: Monday – Friday 09:00- 17:00

0151 252 5845

Emergency Dental Services

0161 476 9651