Appendix 9:

Post-sedation instructions (aftercare) for patients/carers/guardians

- A responsible adult must take you home after the sedation, and you must remain in the company of a responsible adult for the remainder of the day. Sedation **will not** proceed if you arrive without an escort.
- It can take up to 24 hours for the sedative drugs to be eliminated from your body and for you to recover from the effects of sedation (drowsiness, loss of memory, lack of awareness and coordination). Therefore, for at least 12 hours following the procedure/operation, you must not:
  - drive a vehicle (insurance will be void)
  - use electrical equipment, cook, or operate machinery
  - climb heights (e.g. ladders, scaffolding)
  - participate in any other activities that require alertness or coordination (e.g. swimming, cycling, etc.)
  - be in charge of children or dependent adults
  - make important decisions, or sign legal documents
  - use alcohol, sleeping tablets, tobacco, or recreational drugs
  - perform any complicated tasks
  - go back to work on the day of your sedation
- After the sedation you may continue your acute and chronic medication as ordered by your doctor/dentist.
- Discuss post-sedation breastfeeding with your doctor/dentist.
- You should not experience nausea or vomiting after sedation. If vomiting occurs more than once, please contact your doctor/dentist.
- Do not eat or drink if you are nauseous. Introduce any fluids or foods slowly after sedation. If you tolerate clear fluids, you may then progress to solids.
- Do not consume any alcoholic drinks for the remainder of the day.
- If you have not passed urine within 6–8 hours of being discharged, please contact the doctor/dentist at the telephone numbers provided.
- The sedation may result in amnesia (loss of memory). This is temporary, sometimes lasting for a few hours.
- We trust that the enclosed information will answer all your questions. However, please phone your sedation practitioner or the practice if you are unsure about any information.

- Please complete the electronic feedback request that you will receive on the day after your appointment, as this will allow your sedationist to monitor your recovery.
- We do not anticipate any complications, but should you become concerned about anything, however trivial, please contact your sedationist or our office.

I, ……, the undersigned, have read and understood these pre- and post-sedation instructions, and agree to contact the doctor/dentist if there is anything more that is not clear to me.

…… ……

Signature Date

We do not anticipate that you will have any adverse events or complications. Should you become concerned about anything, please contact:

Dr…… Telephone: ……