

## Protective Stabilization Policy

For a number of reasons, many children are very apprehensive about dental treatment as it is a new and unfamiliar experience. Sometimes children who are very young or afraid will cry, and this is to be expected. Many will calm down relatively quickly when exposed to our environment and staff.

All children receiving a conscious sedation procedure will require protective stabilization, for safety purposes. At other times, stabilization is used for those children who are combative and/or hysterical and do not respond to passive behavioral management techniques (such as show-tell-and-do), the following behavioral management technique can be used:

*Rainbow Stabilization System* provides protective stabilization in those cases where patients may exhibit sudden unsafe movements, risking harm to themselves or to the dental professional. The friendly-looking, breathable mesh wrap can be used alone or with the *Rainbow Stabilizing Board*. These stabilization devices can be used to help prevent the child from rolling out of the chair and injuring him/herself. Sometimes outer clothing, such as sweaters, jackets, and shoes are removed to help prevent the child from becoming excessively warm. This ensures safety, not only for your child, but also for our staff when a child is kicking, biting or being combative. A simple rubber covered instrument called a mouth prop may be used to help your child hold his/her mouth open.

In spite of our best efforts, a child could develop bruised areas or abrasions from struggling or violent behavior while restrained. He/She could also injure the mouth by biting down on a dental instrument or the mouth prop. These things rarely occur, but are possible adverse effects of this or any dental treatment for combative patients.

We do not generally sedate children for exams. If you find behavioral management objectionable, exams may be completed under conscious sedation or IV sedation. The cost, however, is significant to provide anesthesia related services and you may want us to preauthorize such treatment with your insurance company prior to proceeding. Without one of these protective techniques, treatment may not be possible.

As the parent or legal guardian, I hereby give my unqualified consent for my child

---

To have a physical restraint as described above provided.

---

Parent or Legal Guardian