

Kings Ranch Dental Care

6804 S Kings Ranch Rd. # 102

Gold Canyon, AZ 85118

(480) 982-9009

Conscious Sedation Consent Form

For the dental procedure you are to undergo, sedation and analgesic medications may be used. The benefit of sedative and analgesic medication is to allow the safe, comfortable completion of your dental treatment.

The primary risk of these medications is respiratory depression (decreased breathing effort), which can be serious or even fatal if not treated. This risk is minimized by careful administration of these medications and by the vigilant monitoring of your blood pressure, heart rate and breathing.

Infrequently, allergic reactions to medications can occur. If you are known to be allergic to any medications or have any concerns about receiving sedation/analgesia, please let us know so that we may address your concerns directly.

You may decline the administration of sedatives and analgesics or wish to discuss other alternatives, which include local anesthesia, and general anesthesia. If you elect to receive sedation and analgesia, by signing below, you consent to allow us to administer, as appropriate, the medications(s) required to complete this dental procedure.

Patient Name: _____

Patient Signature: _____

Guardian Signature: _____
(if patient under 18)

Date: _____