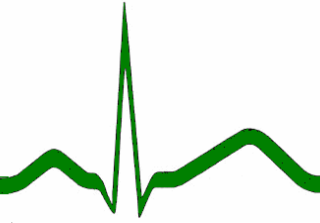


MCCARTY ANESTHESIOLOGY, LLC

Patrick D. McCarty, D.D.S. - Dentist Anesthesiologist



Dear _____,
(Patient)

Your dentist has asked me to help by providing anesthesia for your upcoming procedure. I limit my practice to the delivery of anesthesia which allows the required dental treatment to be achieved conveniently and safely with maximum patient comfort. I am pleased to be able to offer this service and wish to introduce myself and provide you with a brief explanation of the anesthetic techniques that I use.

Dentist Anesthesiologists provide private practice anesthesia services in the dental community and have earned a reputation from both our patients and healthcare colleagues of providing personalized care while maintaining the highest safety standards. I bring my own anesthesia equipment and medications to the dental office, and am able to provide a very safe and effective anesthetic treatment for both pediatric and adult patients who would otherwise need to have their treatment in a hospital or surgery center.

Office based anesthesia is a unique sub-specialty in the field of anesthesiology. It has gained recognition as an important service to offer for the convenience of our patients and colleagues. The State Department of Health and the State Board of Dental Examiners carefully regulate the qualifications of the anesthesia provider in the office setting as well as the emergency and routine equipment that must be available on site. In addition to a license to practice dentistry in the State, I have a “General Anesthesia Permit” issued from the State Board of Dental Examiners.

Financial Arrangements

Dental insurance often does not cover anesthesia services. Medical insurance companies may reimburse you for my services but it is extremely unlikely. They usually do not cover anesthesia provided in a dental office. Therefore, I do not bill insurance companies, medical or dental. You are responsible for paying the fee for the I.V. sedation / general anesthesia. If you would like, we can fill out a formal CPT code sheet and submit it on

your behalf to your insurance carrier in an attempt to have them reimburse for general anesthetic services. This paperwork is routinely submitted by doctor's billing services and it involves assigning a performed procedure a designated (CPT) code before an invoice is sent to the patient's insurance company. There is a small additional charge (about \$25) for this professional service and reimbursement is not guaranteed.

Safety Concerns for I.V. Sedation in the Dental Office

Prior to the day of surgery, I will spend time talking to you and your dentist to make sure that the office setting will be a safe and appropriate place to provide I.V. sedation / general anesthesia for you. If we think that you have a pre-existing illness that would jeopardize your safety under I.V. sedation / general anesthesia in the office, we will recommend the hospital setting as an alternative.

In concordance with the State Board of Dental Examiners, I carry all the routine emergency equipment including extra oxygen tanks, breathing equipment, emergency drugs and a defibrillator. In essence, I have the same equipment that would be available within the operating room of a hospital or surgery center. The main concern with this type of anesthesia is to maintain an open airway and adequate breathing. This is routine for an anesthesiologist. We are always managing the unconscious patient and making sure their breathing and all other physiologic functions are maintained. We continually monitor the patient's level of anesthesia, vital signs and breathing throughout the treatment, never leaving them throughout the procedure.

The risk of an "allergic reaction" to these sedation drugs is very remote. It has been reported in the literature with propofol but it is very rare. If you are allergic to sulfites, eggs or to soy, I would not use a particular hypnotic agent (known as Propofol) since there is an increased potential of an allergic reaction in patients with these food allergies. Similarly, if a gas anesthetic is to be employed, there is a remote possibility of developing a reaction known as malignant hyperthermia. In the event of this exceedingly rare occurrence, I am equipped with the initial treatment (known as Dantrolene).

The risk of postoperative nausea is a possible side effect of anesthesia. I will administer anti-nausea medications through the I.V. during the dental

treatment that have no other side effects and are very effective in preventing this problem. Propofol is beneficial in this regard because of its tendency to provide a rapid, clear-headed wake up with a low incidence of nausea and vomiting.

Anesthetic Technique for the Adult Dental Patient

Depending on the type of dental procedure(s) being performed, you will be receiving either an I.V. sedation only (Monitored Anesthesia Care) or a general anesthetic. In either case, you will have minimal or no awareness of the dental procedure, maximum comfort and the highest degree of safety. These anesthetic techniques provide excellent conditions for your dentist to perform the needed work in one visit that might otherwise require multiple appointments to complete. As mentioned above, I have an anesthetic setup in the dental office, which is very similar to that which would be present in any operating room or any hospital site outside of the O.R. where this same technique would be employed. I equip the treatment room with state of the art monitoring equipment, suction equipment and a full array of A.C.L.S. (Advanced Cardiovascular Life Support) resuscitation equipment for emergencies, which includes all necessary drugs, airway equipment, and a defibrillator.

I will contact you directly before the scheduled dental procedure at the phone number(s) you have provided to your dentist. The purpose of this call is to obtain a brief medical history, provide pre-procedure eating and drinking instructions, to discuss the details of the anesthetic management and to answer any other questions you may have regarding the anesthetic technique.

At the time of your scheduled appointment, I will meet you at the dental office and address any remaining questions. At this point we will prepare for the induction of the anesthesia.

After a brief physical examination, I will start an intra-venous (IV) line. This is the only needle stick or pain that you will feel. Once the IV is in place, I will begin administering medications to sedate you or, if indicated for your procedure, to induce a state of general anesthesia. If you are having general anesthesia, it is customary to secure the airway and make sure that it is protected since your own natural protective reflexes will temporarily be extinguished by the anesthetic. This means that I will place a breathing tube

once you are completely asleep that will pass from your nose into the trachea and stay there for the duration of the procedure. This tube will be taken out before you are completely awake so that you will have no recall of it being there. Once again, this is routine for anesthesiologists who are considered experts in airway management. Occasionally, we will be able to use a breathing tube that is introduced through the mouth into the trachea, but this depends on the procedure and the dentist's preference. My anesthetic technique will not only include sedatives but also pain medication, antibiotics (if needed) and anti-nausea medicine as well.

At the end of the procedure, I will stop administering IV medications and/or anesthesia gases. Side effects vary according to the technique used. One possible side effect of sedation is shivering but this will resolve quickly. Other side effects may include a stuffy nose, a mild dry or sore throat, nausea and headache. Given the medications that I use, I expect an incidence of nausea to be quite low (1% or so) and the other side effects mentioned will be very mild and transient in nature if they occur at all. After dental treatment is concluded, patients tend to emerge rapidly from anesthesia, feeling pain free, a little sleepy, but comfortably rested. Most often patients can leave the office within 30 to 45 minutes after the procedure is completed. It is common to sleep part of the day, eat a light meal and be fresh and completely recuperated by the next morning. I ask that you refrain from driving or making important decisions for the rest of the day.

You will get detailed instructions about what to expect after the procedure both from your dentist, the staff and from myself. Please read the instructions provided for you below to give you an idea of what to do before the treatment and what to expect afterwards.

Instructions to Follow Before the Dental Visit

Eating and Drinking:

The following eating and drinking instructions are extremely important to follow exactly as written to insure your safety under anesthesia. These are standard guidelines given to any patient having anesthesia and are meant to prevent the possibility of vomiting and aspirating vomit while sedated or groggy.

On the day of your appointment, you should not have any food or drink within 8 hours of the procedure. NO LIQUIDS (including water) within 3 hours of the appointment. Therefore, for example, if your appointment is at 8:00 AM the last food or drink you can have would be at 12:00 AM. It is very important that you do not suck on candy or chew gum within 7 hours, or smoke within 16 hours prior to your procedure. If you find it absolutely necessary, you may drink a small amount of water (less than 10 oz.) 3 hours prior to your procedure.

Change in Health Status

If you have a change in health status before the appointment, for example, a cold, sore throat, cough, nausea or vomiting, or fever, please call me or your dentist's office as soon as possible so I can contact you and determine if it is safe to proceed with the anesthetic or if we need to reschedule.

Medications

If you take any prescribed medication, please continue it on the day of the appointment. If it is an oral medication, take it with a small sip of water. If it is an inhaler, continue to use it at the regular time and bring it with you. If you are a diabetic or if you have other medical conditions such as high blood pressure and coronary artery disease we will discuss the exact medications you should take when we talk on the phone prior to your procedure.

Clothing

I recommend loose fitting clothes, a short sleeve shirt, and flat shoes on the day of your treatment. Please do not wear make-up, lotions, jewelry on the day of your treatment. Please try to void immediately before your anesthetic.

Questions

I will contact you before the scheduled procedure to answer any questions. If you have urgent concerns or questions that can not wait, please contact my pager number. I will call you back as soon as I am able.

Instructions to Follow After the I.V. Sedation / General Anesthesia

Eating and Drinking:

Pre – arrangements should be made for a responsible adult to accompany you home upon discharge from the office. You will not be allowed to leave the office by bus or taxi after anesthesia. You should plan to have a responsible adult stay with you until the next day. Do not plan to drive a vehicle or operate potentially dangerous equipment for 24 hours after your treatment. Muscle aches and a sore throat similar to a mild flu may occur. It is also not uncommon to have mild dark bleeding or clots from one or both nostrils after dental surgery. This is nothing to be alarmed about, and will normally disappear in 24 to 36 hours. Your mouth and tongue may be numb following the dental treatment, resulting in a sensation of a foreign body or “lump” in your throat. This is perfectly normal, and will disappear in a few hours. Post operative pain medication is the responsibility of the dentist. The first drink should be plain water, then fruit juice or Gatorade. Avoid soft drinks at first. Drink only small quantities of beverages during the first hour. After the first hour, you may eat small portions of food, as tolerated (preferably soft, bland and not hot). No alcoholic beverages for 24 hours. NO SMOKING for 24 hours. Pain medication on an empty stomach often causes nausea. If persistent nausea and vomiting, difficulty breathing, fever in excess of 101.5 degrees within the first 4 hours, tenderness and redness near the IV site develops, or for any other anesthesia related concern developing within the first 24 hours, please call me at the phone number provided.

I look forward to participating in your dental treatment. Please feel free to contact me by phone or email if you have any other concerns about the anesthesia procedure that I have not addressed. Thank you very much for using McCarty Anesthesiology for your anesthesia needs. I am dedicated to making your dental experience comfortable and anxiety free.

Sincerely,

Patrick D. McCarty, D.D.S.

Why should you consider having dental anesthesia?

If you have to undergo prolonged or extensive treatment

For extensive treatment such as dental implants, sinus "lift" procedures, full-mouth restoration, multiple crowns, multiple root canals, multiple tooth extractions, or extensive periodontal procedures, dental anesthesia offers you complete comfort while providing the dentist with excellent working conditions.

If you want to save time and money

If you don't have time for multiple appointments, dental anesthesia makes it possible to schedule several treatments in one combined session. Fewer appointments means less cost and less time away from work or family.

If you have anxiety

The American Dental Association reported that 10% of Americans avoid seeking dental treatment because of anxiety or apprehension. Another 15% find treatment so uncomfortable, they fail to return for follow-up procedures. As many as 70% of people with dental insurance neglect to see their dentist because of fear. With CAC dental anesthesia, anxiety and apprehension will disappear instantly, and you will have virtually no memory of the dental treatment.

If you gag easily

Dental anesthesia suppresses the gag reflex, permitting excellent operating conditions for the dentist. Awareness of the dental treatment during your anesthetic is essentially zero.

If you have a low pain threshold

Everybody perceives pain differently. In some instances, the local anesthetics usually used by dentists may not provide enough numbness during the treatment to completely eliminate discomfort. With our dental anesthesia techniques, dental treatments are always pain free and hours will seem to pass like seconds.

If you have a disability

If you have a physical disability or chronic back pain, making it hard to sit in a dental chair for long periods of time, or have or problems with gagging or holding still, having your dental procedure under anesthesia is the solution. Patients with heart or lung disease, who require careful monitoring during any dental procedure, would benefit greatly from the care and attention of a dentist anesthesiologist. Patients with mental disabilities often have problems cooperating with the dentist, complicating the treatment, creating anxiety for both the patient and the dentist. Our dental anesthesia techniques resolve this problem, improving both safety and comfort.