

## Parent Information About Behavior Management Techniques for Child Dental Patients

We strive to provide your child with the highest quality dental care in a safe and caring environment.

Every effort will be made to work with your child to gain cooperation through understanding, gentle guidance, humor, and charm. When these fail, other management techniques can be used to eliminate or minimize disruptive behavior. Our dentist(s) and staff have received training in the following techniques accepted by the American Academy of Pediatric Dentistry:

- **Tell-show-do:** the dentist or staff member explains to the child what is to be done, shows an example on a tooth model or the child's finger, then the procedure is done on the child's tooth.
- **Positive reinforcement:** rewards the child who displays cooperative behavior with compliments, praise, a pat on the shoulder, or a small prize.
- **Voice control:** The attention of a disruptive child is redirected by a change in the tone and volume of the dentist's voice.
- **Mouth props:** a padded device is placed in the mouth to prevent closure of the child's teeth on the dentist's fingers or dental equipment.
- Hand and/or head holding by dentist or assistant: an adult keeps the child's body still so the child cannot grab the dentist's hand or sharp dental tools.
- **Nitrous oxide:** medication breathed through a colored/flavored nose mask to relax a nervous child. The child remains awake but is relaxed and calm. Nitrous oxide is also known as *laughing gas*. Children with sensitive stomachs may become nauseated when breathing nitrous oxide.

We invite you to stay with your child during the initial examination. During future appointments, we suggest allowing your child to accompany our staff through the dental experience. This approach enables us to establish a closer rapport with your child when you are not present, which is essential for gaining their confidence and overcoming any apprehension. However, if you prefer, you are welcome to accompany your child to the treatment room. For the safety and privacy of all patients, other children who are not being treated should remain in the reception room with a supervising adult.

The above behavior management techniques have been explained to me, and I have had the opportunity to ask questions. I understand the what, when, how, and why of their use, as well as the risks, benefits, and available alternatives.

Patient Name:	DOB:	_
Patient/Guardian Signature	Date:	
Witness' Signature	Date:	