

QUESTIONS AND ANSWERS ABOUT ORAL CONSCIOUS SEDATION (OCS)

What is Sedation Dentistry?

Sedation dentistry is the answer both patient and practitioner have been looking for to bring what dentistry can provide together with patients in need. Studies show that 30% of the population avoids the dentist due to fear. Sedation dentistry provides a safe and comfortable experience for them to get the care they need and want.

The protocols utilized in sedation dentistry can be customized to the patient's anxiety level and medical history allowing them an incredibly comfortable, relaxing and safe experience. And with your patients totally comfortable, you can do the dentistry you love and be rewarded with gratitude. Gratitude that, to date, has been uncommon for dental patients to express.

Does OCS attract higher-value cases than I have now?

It is very common for sedation practices to begin receiving patient referrals from nonsedation practices as well as patient referrals from existing patients. You'll also attract new patients who have been away from dentistry for a very long time. These cases are frequently quite extensive. These new patients will often have avoided routine dental care for many years. They will require, and often accept, the dentistry they need such as scaling and root planing, root canals, and multiple units of crown and bridge.

What patients are appropriate for OCS?

- **Patients with anxiety.** They wiggle and squirm and say, "What is that for?" and "Are you going to hurt me?" They often require a tremendous amount of time consuming reassurance. With OCS these patients will become your easiest patients to treat because they are no longer afraid, but are relaxed and comfortable. And since OCS produces a retrograde amnesiac effect, the patients seldom remember much about the procedure. Their anxiety often falls to a very low level and they become much like your most relaxed patient.

- **Existing patients who have put off needed treatment, or who abandoned treatment plans.** (See next question).
- **Patients who suffer from acute or chronic jaw soreness.** These patients can comfortably be treated for several hours. The sedation medication has a muscle relaxation property. By using OCS in combination with frequent resting time, even these patients can have extensive treatment completed in one visit comfortably, and they experience little-to-no jaw soreness post-operatively.
- **Patients who have a gag reflex.** Many of these patients may have avoided the dentist for years due to embarrassment, but with OCS they can have their perio, restorative and cosmetic work done, sometimes in the same appointment.
- **Patients who complain that they can't get numb.** According to most of our DOCS members, OCS helps those patients who complain that no dentist can get them numb, or who complain of pain when you use your handpiece. (See the Compendium of Continuing Education in Dentistry March/April 2005 Issue, article entitled, "The Use of Anxiolytic Medications to Supplement Local Anesthesia in the Anxious Patient.") ([link to the article](#).) This effect has been reliably observed literally hundreds of thousands of times by many sedation dentists. For the patient who "can't get numb," OCS is very helpful.
- **Patients with physical limitations such as back or neck problems.** OCS helps to relax patients who may have chronic back or neck problems. These patients can comfortably sit in the chair for lengthy procedures and our sedation dentist members report that these patients experience little or no post-operative back or neck soreness.

How does OCS get existing patients to accept the treatment they've long put off?

Many of our more than 2800 DOCS members found something very interesting - that a huge percentage of patients who come in for prophys put off routine work, often for years and years. The reason is that many patients are secretly anxious. Although they will go for a hygiene appointment, they stop when it comes to more extensive treatment because they are secretly afraid. However, once these existing patients are made aware that their dentist offers sedation, they want to have the treatment performed! OCS is a great way to help your patients get the restorative dentistry that they've been postponing.

What post-operative effects can my patients expect?

Our protocols require the patient be dismissed to a responsible caregiver who will drive them home. (Don't worry, we give you and your team all the training, forms and processes you need to do it right.) Once home, the patient will stay with their companion until all of the effects of the sedation have worn off.

What are some of the common side effects of these sedation medications?

- **Retrograde amnesia.** The patients have little or no recollection of the treatment.

It is not uncommon for our dentist members to get calls from patients who are amazed that they don't remember the appointment. The front desk then says, "Have you looked in the mirror yet?" The patient excitedly realizes that they have a new smile and they have no memory of the treatment being performed at all! They are so happy because memories of dentistry are not something they savor.

- **Less post-operative soreness.** Patients will no longer routinely require postoperative pain medications. They often recover sooner, and are less sore than they would have been without OCS. This is the anecdotal experience of hundreds of thousands of cases.
- **Dry mouth:** During a sedation appointment the sedative will decrease salivary flow and allow the dentist to perform treatment in a dryer environment.
- **Hiccups:** A small percentage of patients (3%) will experience a period of hiccups lasting no longer than ten minutes. They are self-limiting.

I'm already giving 5mg of Valium® – what's so different about this?

Congratulations - you are already aware of the potential benefits of sedation. But are you aware of the drug interactions that may occur with Valium®? Are you screening your patients with a sedation-based health history form to determine potential interactions? Are you finding that 5mg Valium® does not create an ideal sedation experience each time? Do you already know which Valium® reversal agent to use in the event of an emergency? Are you measuring the patient's vital statistics with a monitor? Even if you are already aware of these issues you will want to learn more about providing predictable and superior sedation protocols using third and fourth generation benzodiazepines.

I don't want that kind of patient

It's perfectly understandable that you don't want the kind of patient who is so nervous that it takes 1 hour to finish a 5 minute procedure. However, with proper sedation (a small amount of sedation medication, as taught to thousands of dentists in our courses), you can actually complete treatment that would normally take an hour in much less time.

How safe is OCS?

There has never been a documented report of a serious adverse incident (mortality or serious morbidity) due to the use of oral sedation in adults. DOCS members alone have completed an estimated 1,000,000 successful sedation procedures over the past six years. One reason for our outstanding record is that we monitor patients' vital signs using a pulse oximeter/blood pressure monitor. This monitor is easy to use yet sophisticated enough to measure blood pressure every five minutes and continuously measure pulse rate and blood oxygen before, during and after a sedation procedure.

Is it hard to work on sedated patients?

Sedated patients are the easiest patients to treat. They are a lot like “Dexter” the dummy we all worked on in dental school, except unlike Dexter, they are conscious and able to do as you ask, yet they are totally relaxed and comfortable, allowing you to do your dentistry. It is truly the best of both worlds - relaxing for the patient and relaxing for you.

What is the standard of care regarding “titration”?

“Titration” of an oral sedative is quite valuable when properly done. It enables you to maintain maximum patient comfort even for lengthy procedures while using a minimum amount of sedative. We have many members who are providing periodontal care, endodontic therapy, crown preps and temporaries, all in one visit. What makes this possible is “titration”.

When you understand drug kinetics and use them to determine the application of a “titration” formula, then a predictable result is highly likely. This means that when properly administered, “titration” is quite safe and is amongst the DOCS protocols that we teach at our courses. In addition to “titration,” single-dose protocols are also presented.

What about drug interactions?

Sedation medications are chosen based on an individual’s medical history and any possible drug interactions that may occur. At our courses we teach you and your team how to use sophisticated yet easy-to-use drug interaction software that automatically checks all the medications the patient is taking, even herbals and nutritional supplements, against a predetermined list of suggested sedative drugs. In addition, it is sometimes valuable to contact the patient’s primary care physician prior to doing sedation, and we discuss during our course when this is appropriate to do.

I’m already seeing too many patients in a day

As you do more OCS, you will often see fewer patients, with longer, more productive and relaxing appointments. If you are presently seeing many patients a day and would prefer a schedule of fewer more productive patients, sedation dentistry can help you to make this change. Many of our members who were seeing too many shorter, less productive patients a day started towards a schedule of longer, more productive appointments by setting aside one day every other week to see only sedation patients. Once this day became full they would add a second day, then a third, etcetera. If the schedule for that sedation day did not fill, there was always time to schedule it with shorter appointments so no production time was lost. If it is your desire to see fewer patients and be more productive, then incorporate sedation dentistry into your practice.

I’m not confident that I can handle the dentistry

Our past participants who were not comfortable with complicated cases built a network of specialists such as endodontists, periodontists, prosthodontists, and oral surgeons who

also provide sedation. Many of these participants continued their education with organizations such as LVI, Pankey, Dawson, Kois, and EndoMagic all while helping their patients and doing more relaxing dentistry.

Is it allowed in my state?

Many states are creating new regulations regarding OCS. Fortunately all of the new regulations in the past two years have been reasonable and our courses have met their requirements. Your DOCS Senior Course Advisor can help you sort out your particular state requirements. We also have an experienced regulatory attorney on staff who can assist you should you have any further questions.

Will my malpractice insurance premiums rise?

Usually not and what's more, some insurance companies are actually welcoming sedation dentists. Call us at DOCS (877)325-3627 to find out which insurance companies support sedation dentistry.

Will insurance pay for OCS?

Although insurance companies do not pay for sedation there is a code for non-IV sedation (09248) that can be used to save the patient and your office time and money. Insurance companies will pay for all four quadrants of scaling and root planing (4341) in one appointment if performed while the patient is sedated.