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SPECIALIZING IN DENTISTRY FOR INFANTS, CHILDREN, ADOLESCENTS, AND CHILDREN WITH SPECIAL HEALTH CARE NEEDS

CHILDREN, PEDIATRIC DENTISTRY AND YOU

We want to make the dental office a fun and relaxing environment for patients and caregivers. Parents/guardians are welcome to accompany their child into the treatment area during the initial examination and all recall (checkup) appointments. This gives you the opportunity to see our staff in action and allows the doctor to discuss dental findings and treatment needs directly with you. We ask that, if you choose to accompany your child, you assume the role of a *silent observer* unless directed by the dental team. There are several reasons for this, all of which are designed to allow for a productive dental visit: (1) our dental team will use specific language and techniques during the appointment, and a child may become anxious or confused if multiple people are speaking to them, (2) cooperation and trust should be established *directly between the dental team and your child*, which is often not possible if parents interrupt or talk over the dental team. There may be times when a child's experience is enhanced by a parent's absence. For older children or those who might act differently if a parent is present, we may encourage those children to come back to the treatment area by themselves in order to build autonomy and trust.

Typically, for operative appointments (fillings, extractions, etc), we will encourage parents to stay in the waiting area for children of all ages. In addition to the aforementioned use of specific language and techniques, this is usually done for a few reasons: (1) the absolute need for the doctors and their staff to be able to communicate and safely provide treatment to the patient without distraction, (2) an apprehensive child may act out or look to "be saved" by their parents in order to not follow instructions from the dental team, (3) parents may themselves be anxious and, while well intentioned, can often make their child more anxious along the way. That said, you are welcome to be present if that would make you most comfortable, with the understanding that it is important to be a silent observer and to support Dr. Myers, Dr. Smith, and their assistants during the appointment. If the child remains distracted or uncooperative while their parent is present, the Doctor and parent may discuss options up to rescheduling the appointment for a different day.

Finally, we appreciate your understanding that children <u>ARE NOT</u> allowed to be left unattended in the waiting room, and other children are not allowed to be present in the treatment room during another child's operative appointment. If you plan to accompany your child to the treatment area, please plan to make arrangements so that siblings and other dependents are not left unsupervised.

The following is a brief explanation of some of the methods we use to guide your child's behavior and provide a positive dental experience. Since each child is unique, no list can be complete and other methods may be explained as needed:

TELL, SHOW, DO: This is the most important tool for teaching your child. The child is told in simple terms what is going to be done. They are shown what is going to be done and then the procedure is performed.

IMAGERY: We tell children in simple terms what is going to be done. For example, a dental exam becomes "looking and counting your teeth." A dental prophylaxis and cleaning becomes "brush and tickle your teeth." We encourage you to use and repeat these terms when talking to your child about their dental experience.

DISTRACTION: Sometimes it is necessary to distract your child from unpleasant sensation by focusing his/her thoughts on something other than what is being done.

POSITIVE REINFORCEMENT: This is a technique used to reinforce good behavior by praising your child or providing a reward following a desired response in order to promote continued good behavior.

VOICE CONTROL: This is a controlled change of voice volume, tone or pace to influence and direct the child's behavior. This technique is used to establish a line of communication between the Doctor and child.

RESTORATIVE RELATED PROCEDURES: Almost all procedures to repair teeth involve the use of the *dental handpiece*, which many people think of as the "drill." We may refer to different handpieces as "Mr. Whistle", the "Tooth Tickler", or "Mr. Bumpy." The sensations these instruments produce will be introduced to your child in a non-threatening manner. A *rubber dam* or "rain coat" is used to isolate the teeth being repaired. This helps keep saliva away from the tooth, protects the soft tissues of the mouth and keeps unfamiliar tastes out of your child's mouth. A *mouth prop* or "tooth pillow" is used to prevent the child from biting the handpiece.

LOCAL ANESTHESIA: Most restorative procedures require the use of local anesthetic (many call it 'novocaine'). <u>Please do not use words such as "shot" or "needle"!</u> Put simply, no child (nor adult) ever became more relaxed after hearing those words. The good news is that we have several techniques and strategies to make this part as comforting as possible! In addition, we will use a topical anesthetic or "sleepy jelly" to help numb the soft tissue at the injection area before we "wiggle the tooth to sleep."

We look forward to introducing these ideas and many more to you and your child. Our goal is to make the dental office a place that children look forward to visiting!