

Modified Dental Anxiety Score

CAN YOU TELL US HOW ANXIOUS YOU GET, IF AT ALL,
WITH YOUR DENTAL VISIT?

PLEASE INDICATE BY INSERTING 'X' IN THE APPROPRIATE BOX

1. If you went to your Dentist for TREATMENT TOMORROW, how would you feel?

Not Anxious Slightly Anxious Fairly Anxious Very Anxious Extremely Anxious

2. If you were sitting in the WAITING ROOM (waiting for treatment), how would you feel?

Not Anxious Slightly Anxious Fairly Anxious Very Anxious Extremely Anxious

3. If you were about to have a TOOTH DRILLED, how would you feel?

Not Anxious Slightly Anxious Fairly Anxious Very Anxious Extremely Anxious

4. If you were about to have your TEETH SCALED AND POLISHED, how would you feel?

Not Anxious Slightly Anxious Fairly Anxious Very Anxious Extremely Anxious

5. If you were about to have a LOCAL ANAESTHETIC INJECTION in your gum, above an upper back tooth, how would you feel?

Not Anxious Slightly Anxious Fairly Anxious Very Anxious Extremely Anxious

Instructions for scoring (remove this section before copying for use with patients)

The Modified Dental Anxiety Scale. Each item scored as follows:

Not anxious = 1
Slightly anxious = 2
Fairly anxious = 3
Very anxious = 4
Extremely anxious = 5

Total score is a sum of all five items, range 5 to 25: Cut off is 19 or above which indicates a highly dentally anxious patient, possibly dentally phobic
<http://www.st-andrews.ac.uk/dentalanxiety/>

Topical Anaesthetic



Suitable site is chosen
Cream is applied about
40 - 45 min. pre-
operatively

An occlusive dressing is
placed over the site



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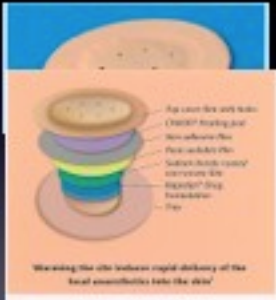
Topical Anaesthetic



Eutectic mixture of tetracaine
& lidocaine

Apply to intact skin immediately
after opening pouch

Remove plaster after 30 mins.



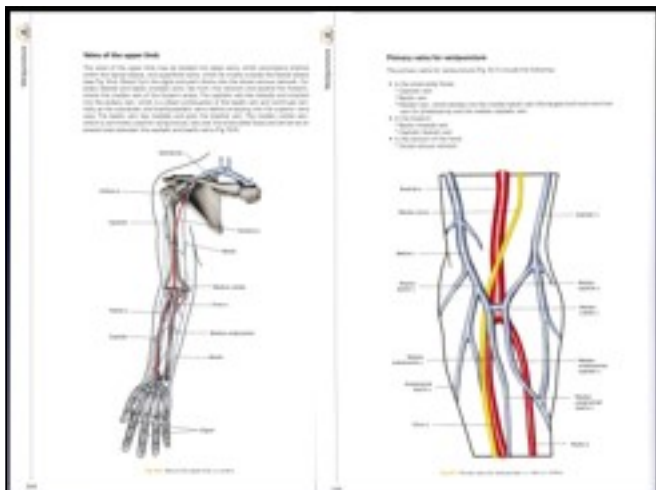
22

Pre-op BP

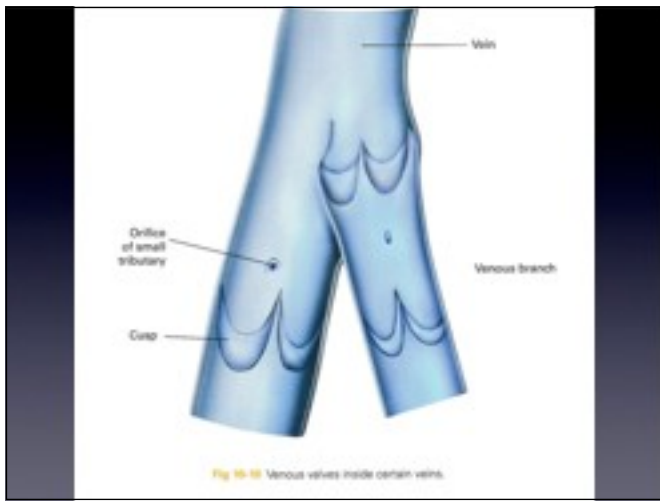
- Check and record the B.P. before commencing the sedation
- > 105mm Diastolic is too high
- Wait 10 - 15 min and recheck
- Inflating the B.P. cuff gives an opportunity to observe the veins in the arm



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Prepare puncture site

Gentle clean with alcohol wipe
 Allow to dry before venepuncture
 Patient is best looking away

IV Cannulation

Inspect and grip cannula

ensure package and contents intact
 check expiratory date
 fold down wings

IV Cannulation

hold with 3 point grip

IV Cannulation



IV Cannulation



IV Cannulation



IV Cannulation



IV Cannulation

Withdrawal of needle for safe insertion



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IV Cannulation

Release tourniquet

Withdraw needle

Avoid blood spillage by applying finger pressure firmly on vein above the catheter

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IV Cannulation

NEVER REINSERT NEEDLE WHILE CATHETER STILL IN VEIN

IT MAY SEVERE THE CATHETER

"Causing an Embolism"

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IV Cannulation

Remove luer-lock plug and close the cannula with it

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IV Cannulation

Use the upper injection port for drug administration or flushing the cannula



Can check patency by flushing with physiological saline or heparinised saline

IV Cannulation

Tape down cannula with hypoallergenic tape



Stabilisation of Limb



Wrist Stabiliser



Elbow Stabiliser

Stabilisation of Limb



Induction of sedation

*Induction is by SLOW titration of the drug

*2 mg of midazolam and wait 2 minutes

*1mg over 30 sec and wait 30 sec.

*End point requires experience to determine



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End Point

- Slow and slurred speech
- Respiration has reduced
- Lack of worry expression -- Po faced
- Tension in the arm and body reduced
- Difficulty in focussing on objects
- Repetitive questions
- **Dis-inhibition**
 - Very talkative
 - Weepy

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Sedation Record

This is a useful method of maintaining a record of the dental sedation

It should be filed with the patients notes

PATIENT INFORMATION		
NAME	DATE	TIME
SEDATION RECORD		
Sedation Agent	Dose	Time
MONITORING RECORD		
HR	BP	SpO2
ADDITIONAL RECORDING		

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