Pediatric Dental Restoration Patient Flow

I. Procedure Day
   a. You will come directly up to surgery center and check in with the front desk at the
time given to you.
   b. After check in, one of the pre-op nurses will call you and your child back to the
children’s pre-operative area to start the surgery process.
   c. Your child will change on the stretcher provided.
      i. **Please bring a change of clothes and underwear just in case the child
         has an accident during the procedure.
   d. The nurse will talk with your child about what they are going to do. They usually
check vital signs on a child (Blood Pressure, Pulse, Oxygen Saturation, and
Temp) then allow the child to watch TV so the child is comfortable. We always
suggest to the parents to bring anything they keep with them for comfort (a toy,
lovey or blanket works well)
   e. During that time the nurse will ask the parents some questions regarding his/her
health history to make sure we have the correct information.
   f. After the nurse is done admitting her, the anesthesiologist will come over and
introduce his/her self. They will explain to the parents how the anesthesia
process works and answer any questions the parents might have.  Your child
MAY be given a premedication of a pink liquid, called Versed, which is a calming
medication, usually about 20-30 minutes prior to the child going into the OR.
   g. Prior to going into the OR, the surgeon will come out, introduce themselves and
explain and/or answer any questions about the procedure to the parents. X-rays
will be taken in the operating room once the child is asleep regardless of whether
the child had them done in the dental office to ensure that any work that is
necessary at that time is completed. The goal is to bring the child back to 100%
oral health. The dentist will explain what was found on the x-rays in the dental
office, if they were able to obtain them, and then what they found on the
intraoperative x-rays and what work was done after the procedure is complete.

The dentists will not come out after the x-rays are taken in the OR to tell you
what they found and what they will do so that your child is not under anesthesia
any longer than is necessary to do what is needed for their mouth to be returned
to 100% oral health.

h. Once they are ready for the child to go into the OR, they usually will transport
them on the stretcher to the OR.
   i. As they are in the OR, the child then is given a mask over their face with
anesthesia gases for them to breathe, and they are usually sedated within 5-10
seconds. We call this “blowing up the balloon” because there is a colored bag on
the machine that moves in and out as the child breathes in the gases.
   j. Your child will be under general anesthesia which means they will have a tube
placed down their throat into their lungs so they can have the ventilator breathe
for them. When the dentist is done working, the child will wake up from
anesthesia and the tube will be taken out of the child’s throat as soon as they are
able to breathe on their own.
   k. After your child is asleep, they will then start an IV.
I. After the procedure is completed, they are recovered in a private recovery room
m. The recovery nurse will monitor your child’s vital signs, and usually bring the
parents back within a few minutes of the child reaching the recovery room.

n. Children sometimes will wake up very restless. This is because they are nervous
and “feeling weird” when coming out of anesthesia, not because they are in pain.
o. Usually the child is given some pain medication during the procedure through
their IV to help with after the procedure, along with the Dentist injecting local
numbing medication to the site (if needed).
p. Once he/she is calm and her vital signs look stable, they can have something to
drink, their IV will be taken out (which will not hurt), and they can go home. The
child will probably be in recovery from 30-45 minutes.

II. Postoperative Instructions
a. Post operative instructions will be reviewed with you prior to your child’s
discharge.
b. These instructions usually include no straw usage, no hard food or gummy or
sticky substances as it can pull the caps off of the teeth.
c. You should progress your child’s diet slowly to ensure they can tolerate what
they are eating- anesthesia sometimes affects patient’s stomachs adversely
d. Make sure you wash your child’s teeth and mouth with a soft cloth frequently to
keep them clean and begin brushing as soon as tolerated.

III. Items to bring the day of surgery
a. Your child’s medical insurance cards
b. Your picture ID
c. If your child is a foster child or adopted, you will need to provide
documentation of this upon arrival at the center. This would include any
court paperwork issued to you.
d. A toy, doll, lovey or blanket that makes your child feel secure in their
surroundings
e. A book or laptop for yourself while your child is in surgery since it is a state
requirement that one parent stay on-site at all times while the child is in the
facility.
f. PLEASE REMEMBER- make all arrangements possible to keep any other
children at home during the time your child needs to have her procedure. It
is often difficult for other children to sit in one place.

**** PLEASE REMEMBER: The entire process from registration to discharge can take 4-6
hrs sometimes so please make sure you do not make other plans for that day. We will
give you a note for your job or a note for school for the child if necessary- just ask the
center 😊 .

If you have any questions, please feel free to contact the surgery center you are scheduled
at and they would be happy to assist you. If you’d like to visit the center before your
scheduled procedure date, they would be happy to schedule that for you too 😊 .

We look forward to providing you and your child with EXCELLENT Service and Care!
Children’s Surgery Center of Malvern: (610) 518-4937
Children’s Surgery Center in Lancaster: (717) 481-4828