

Patient agreement for IV sedation

It is important that you follow the below instructions BEFORE your intravenous sedation appointment.

- **FASTING INSTRUCTIONS: DO NOT CONSUME ANY TYPES OF FOOD INCLUDING CHEWING GUM FOR 4hrs PRIOR TO YOUR TREATMENT. DO NOT DRINK ANY TYPES OF FLUIDS FOR 2hrs PRIOR TO YOUR TREATMENT.**
- ***No food for 6hrs if anaesthetic-led sedation***
- Alcohol and recreational drugs (including cannabis) must not be consumed for at least 48 hrs prior to your appointment as they affect the way the sedation works.
- Please remove all nail varnish or acrylic nails. Loose comfortable clothing is advised.
- Take all required medication as appropriate unless specifically advised to stop/delay.
- Please arrive at least 15 minutes BEFORE your treatment time so the nursing staff can admit you and get you ready for your procedure.

ESCORT DETAILS:

- Your chosen escort must be a physically able, responsible adult (18 or over).
- Your escort must accompany you to your appointment and escort you home after treatment.
- Your escort must be able to arrange transporting you home by car / taxi, NOT public transport.
- Your escort is required to take sole responsibility for looking after you for 24hrs after your treatment – your treatment will be cancelled on the day if you or your escort attend with children under the age of 16yrs.
- Access to a telephone during the day / night is required for you and your escort.
- If your chosen escort requires an interpreter please let a member of staff know PRIOR to your treatment date.
- It is important that you do NOT do the following for 24 hours AFTER having treatment with intravenous sedation:
 - Return to work
 - Drive a car / other vehicle or operate any machinery including domestic appliances
 - Consume alcohol or recreational drugs
 - Smoke cigarettes / use an e-Cigarette
 - Breastfeed
 - Care for other people such as children, elderly relatives or other dependants.
 - Make any important decisions (e.g. signing legal documents)

I.....take full responsibility for all personal items including jewellery / cash in my possession during my stay in the department. I certify that the above instructions have been fully explained and I fully understand them.

Patient's signature.....

Nurse's signature.....

Date.....