



PARENT AGREEMENT

Full-length Version

Thank you for choosing our team at Philp Family Dentistry Waconia for your child's care! Please read the information below to help your child have a positive, confidence-building, successful visit with Dr. Philp and her team. If you expect your child to do well and enjoy their visit, chances are, they will do just that!

Dr. Philp has employed the following policies for years, and they work well!

You are invited back to the treatment area during your child's initial exam. This gives you the opportunity to see our dental team in action and gives the doctor an opportunity to discuss dental findings and treatment needs directly with you. If you do come back with your child, please assume the role of a ***silent observer***. This allows the doctor and child to communicate, which helps to establish cooperation and trust.

Silent Observer Role

For future appointments, we encourage parents to allow their children to come back to the treatment area by themselves. This is meant to establish trust in our team and to build confidence in your child. If for any reason your child asks for you or needs you, please know you would be escorted to the treatment area promptly. Again, we ask that you do this as a ***silent observer***. If there are multiple people giving instructions, your child may become confused about who to listen to, and it is most important for your child to follow the doctor's instructions during treatment.

If the doctor decides that the child/individual would benefit from having you return to the waiting room, please respect Dr. Philp's professional opinion and leave silently and immediately. Our goal is to facilitate a more open line of communication between the child and the doctor. Research has shown that children over the age of 3 tend to behave better when the parent is not present. As your child matures, we hope they will feel comfortable coming back by themselves.

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. These techniques are based on scientific

principles from the American Academy of Pediatric Dentistry. Since each child is unique, no list can be entirely comprehensive and other methods may therefore be explained as needed.

Tell, Show, Do: This is the most important tool for teaching your child. Your child will be told in simple terms what will be done. Next, we will show them what will be done. Then, we do what we said and the procedure is performed.

Imagery: We tell children in simple, playful terms what is going to be done. For example, a dental exam becomes “counting teeth.” We encourage you to read through our dental vocabulary list below and use these terms when talking to your child about their dental experiences. Using fun and simple terms helps the child picture what is going on. It’s much easier for a child to imagine a tooth falling asleep instead of “numbness.”

Terms we often use:

- Tooth Counter
- Tooth Towel
- Tooth Pillow
- Fluoride Vitamins
- Sleepy Juice
- Sugar Bugs
- Blue Shampoo
- Tooth Shower
- Silly Air
- Mr. Thirsty
- Putty
- Magic Wand

Distraction: Sometimes it is necessary to distract your child from an unpleasant sensation by forcing 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 hopes of promoting continued good behavior.

Non-Verbal Communication: Behavior is guided through appropriate contact, posture, and facial expression.

Parental Presence or Absence: This technique uses the presence or absence of a parent in the room to gain cooperation and compliance. Typically, the parent is asked to leave the room to enhance the communication between the dentist and child. Once cooperation improves, a parent may be asked to return to the room as a reward for good behavior.

Voice Control: Voice control is a controlled change of voice volume, tone or pace to influence and direct the child’s behavior. This technique is used to redirect behavior, establish clear expectations and establish a line of communication between our doctor and your child.