



Packham Avenue Dental

Dr. Glenda Orr & Assoc.

116-335 Packham Ave
Saskatoon, SK S7N 4S1
(306) 651-7366

I _____ have been advised of the risks of taking oral sedation and I am aware that I am unable to operate a motor vehicle for the rest of the day.

I agree to these conditions of being prescribed oral sedation for my dental treatment today.

I have not consumed any alcohol, cocaine or any other recreational drugs in the 48 hours prior to taking oral sedation.

I agree to notify the dentist if I have consumed any alcohol, cocaine or other recreational drugs 48 hours prior to taking this sedation.

Patient Signature

Date

Dentist

Date