

SunDrop Dental Care Agreement & Preparation Workbook

For Patients in Substance Use Recovery Programs

Patient Name: _____ Date: _____

☐ *I understand that this workbook must be **COMPLETED** before I go to my first dental appointment.*

SunDrop Dental Clinic provides structured, treatment-focused care. The purpose of this workbook is to:

- Confirm that you are ready to begin dental care at your first visit, and
- Prepare you for how care is delivered so treatment can proceed safely and efficiently.

This workbook has **two required parts**:

- **Part A** confirms readiness to begin care.
- **Part B** explains expectations that help patients succeed once care begins.

Most people complete this workbook in **15-20 minutes**.

Appointments proceed only when **both Part A and Part B are fully completed**. If either section is incomplete, the appointment may be canceled or postponed.

Please answer carefully and honestly. This workbook is not a test — it is a shared understanding of how care works here.

★ **Check in:** *If I arrive without both part A & B of this workbook completed, my appointment may be _____.*

Part A: Intent & Readiness to Begin

Please read each statement carefully and check each box to confirm your understanding:

Understanding the Nature of Care Here

- ☐ I understand that this is an **intensive dental care clinic** and care here focuses on **health, function, and long-term stability**, not upgrades or cosmetic services.
- ☐ I understand that services like tooth whitening **are not** offered in this clinic.
- ☐ I understand that participation in care here depends on **my cooperation, follow-through, and readiness to improve** at each appointment.
- ☐ I understand that if this structure does not work for me, now is the appropriate time to seek care elsewhere.

Intent to Participate in Care

- ☐ I am here because **I want to receive dental care**, not just because someone scheduled this appointment for me.
- ☐ I am attending this appointment with the intent to **begin treatment today if recommended**, not just to gather opinions.
- ☐ I understand that delaying or declining treatment after evaluation may **limit future treatment at this clinic**.

Readiness & Personal Responsibility

- ☐ I understand that avoiding treatment can make dental problems **worsen over time**.
- ☐ I understand that dental problems often develop for **multiple reasons over time**, not just one factor, one mistake, or something one provider might have done.
- ☐ I am willing to focus on **what can be done now**, rather than what should have been done in the past or what a previous provider did or didn't do.

Attendance & Commitment

- ☐ If I arrive more than 15 minutes late, I understand that my appointment **may be shortened or cancelled**.
- ☐ If I miss an appointment, I understand that I **may not be able to reschedule** at this clinic.

Safety, Sedation & Pain Control Policy

Nitrous Oxide (“Laughing Gas”) & Sedation Policy

This clinic does **not** offer nitrous oxide (“laughing gas”) or chemical sedation. This policy is intentional and specific to the population we serve.

Reasons nitrous oxide is not offered here include:

- It can act as a trigger for relapse in individuals with substance use histories
- It reinforces avoidance rather than coping skills
- It adds medical risk without improving long-term outcomes
- It shifts focus away from durable, skill-based coping and toward short-term relief
- It is not a covered Medicaid service and would not be used even if it were

Feeling anxious about dental care is common and understandable. This clinic addresses anxiety through:

- Clear communication
- Predictable, step-by-step care
- Patient readiness and cooperation

Reliance on chemical sedation is **not** part of the care model used here. If sedation or “gas” is a requirement for you to receive dental care, now is the appropriate time to seek care elsewhere.

★ Check in:

Why is “laughing gas” potentially harmful for individuals in recovery? Circle the answer above.

Pain Management Approach

Some discomfort is a normal part of healing. This clinic manages pain using **non-opioid over-the-counter medications** and supportive measures whenever possible, while monitoring safety and recovery considerations.

Pain may be managed at this clinic with (select ONLY those that apply):

- ☐ Ibuprofen
- ☐ Acetaminophen (tylenol)
- ☐ Ice, rest, and activity modification
- ☐ Opioid pain medication
- ☐ “Laughing gas”/sedation

Medicaid Coverage and Limitations

Medicaid helps cover important dental care, but **it does not cover all treatments**. They may pay for a certain procedure for you but not pay for the same procedure for someone else. This is because every situation is different and Medicaid requires specific conditions to be met for coverage.

- ☐ I understand that Medicaid covers exams, x-rays, cleanings, fillings, root canals, and crowns.
- ☐ I understand that Medicaid does **not cover** implants (fake tooth permanently screwed into the jaw), bridges (covering a missing tooth with a floating tooth), whitening, or orthodontics (braces).
- ☐ I understand that Medicaid **might cover** dentures and partial dentures, **depending on how many and which teeth are missing**.
- ☐ I understand that if I've already received a denture through medicaid in the last 5 years, I **will not be able to get a new one until 5 years have passed**. *This does not include dentures that were made in prison, as these are not paid for by Medicaid.*

★ Check in:

One procedure that Medicaid **will** cover is _____.

One procedure that Medicaid will **not cover** is _____.

On what page is the clinic's pain management approach explained? Page number _____

Part B — Expectations for Successful Care

Part B explains how care works **once treatment begins**. These expectations exist to support your recovery and to prevent misunderstandings that can interrupt your care.

Honesty & Communication

Dental care works best when your provider has accurate information. This includes:

- Symptoms you are experiencing
- Medications or substances you are taking or have taken
- Activities you do after treatment
- Changes in pain, swelling, or healing

Being honest allows the dentist to:

- Treat you safely
- Avoid complications
- Adjust care when needed

Providing false or incomplete information can:

- Make treatment unsafe
- Lead to confusion about what is actually happening
- Interfere with progress

Please check the statements that apply to you:

- ☐ I can describe my symptoms **without either exaggerating or minimizing them**.
- ☐ I am willing to explain what I feel **without assuming bad intentions** from others.
- ☐ I understand that frustration or fear can affect communication, and I will try to **stay factual and clear**.
- ☐ I understand that honesty about symptoms, habits, and concerns I may have is **essential for safe care**.

Select **only** what may result from being dishonest or withholding information:

- ☐ Unsafe treatment
- ☐ Delayed healing
- ☐ Miscommunication or loss of trust
- ☐ Better outcomes

Rest & Healing

After many dental procedures — especially extractions — your body needs time to heal.

Rest helps:

- Control bleeding
- Protect blood clots that form to enable healing
- Reduce swelling and complications

Rest after dental treatment often means:

- Avoiding heavy lifting
- Avoiding exercise or fast walking
- Keeping heart rate low

★ **Check in:** What should I *avoid* in order to support healing? Circle the answers above.

Smoking, Nicotine & Healing

Smoking or using nicotine can significantly slow healing and increase complications.

Short-term effects may include:

- Increased pain
- Delayed healing
- Higher risk of infection or dry socket (extreme pain after extraction)

Long-term effects may include:

- Bone loss around teeth
- Gum disease
- Tooth loss

Smoking less or stopping smoking, even temporarily, improves healing outcomes.

Select all that might *negatively* affect your healing:

- ☐ Following rest instructions
- ☐ Smoking or nicotine use
- ☐ Physical activity too soon
- ☐ Taking medications as directed

Expectations & The Golden Goose

Dental care in this clinic is focused on:

- Reducing pain
- Restoring basic function (eating, speaking, daily comfort)
- Preventing future emergencies and complications
- Supporting long-term oral health

Cosmetic improvements may occur as part of necessary treatment, but they are **not the primary goal** of care here.

The “Golden Goose” Concept

There is a story about a farmer who owned a goose that laid golden eggs. Instead of caring for the goose and receiving the steady benefit of one golden egg a day, **the farmer became too focused on getting more eggs all at once and ended up cutting the goose open**, thinking it would be full of golden eggs. In trying to force a faster reward, the farmer lost both the goose and the steady benefits it provided.

Dental care works in a similar way. **The best outcomes come from steady progress** — treating disease, protecting teeth, following instructions, and allowing the body to heal. When expectations shift toward upgrades, extras, or immediate cosmetic results, progress can stall or even reverse.

This clinic prioritizes durable, step-by-step care that protects long-term oral health.

Please check the statement that best matches this clinic’s approach:

- ☐ The goal of care here is steady improvement in health and function over time.
- ☐ The goal of care here is primarily cosmetic improvement as quickly as possible.
- ☐ I am not sure what the main goal of care is at this clinic.

Clinic Boundaries & Respect

Clear boundaries at this clinic help protect:

- Patient safety
- Staff well-being
- Access to care for others

Examples of expectations include:

- Arriving prepared and on time
- Communicating respectfully and honestly
- Following the treatment plan recommended by the dentist
- Following aftercare instructions including rest, medications, and activity limits

Repeated dishonesty, disrespectful behavior, or ongoing lack of follow-through may result in care being paused or ended.

- ☐ I understand that I must respect clinic boundaries to continue receiving care here.
 - ☐ I understand that boundary violations may limit or end my ability to receive care here.
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Primary Causes of Tooth Decay and Tooth Loss

Understanding what causes dental problems can help you protect your oral health going forward.

Common causes of cavities (tooth decay):

- Frequent sugar intake (soda, candy, snacks)
- Inadequate brushing or flossing
- Dry mouth (often related to medications or substance use)
- Skipping dental visits for long periods

Common causes of tooth loss:

- Untreated decay reaching the nerve
- Gum disease
- Broken or severely worn teeth
- Waiting too long to seek care

Dental care cannot undo the past, but it can improve health moving forward when treatment plans and instructions are followed.

★ **Check in:** Circle one cause of tooth decay listed above.

Final Agreement and Signature

By signing below, I confirm that:

- ☐ I have completed **Part A** and **Part B** of this workbook in full.
- ☐ I understand how care is delivered in this clinic, including its policies on safety, pain management, attendance, and coverage.
- ☐ I understand that this clinic does **not** offer sedation (“gas”), tooth whitening, implants, or orthodontics.
- ☐ I understand that Medicaid coverage is limited and may affect what treatments are available.
- ☐ I am prepared to begin dental care at my first appointment if treatment is recommended.
- ☐ I understand that continued care in this clinic depends on honesty, cooperation, follow-through, and respect for clinic boundaries.

I understand that if I am not prepared to proceed with care, or if expectations outlined in this workbook are not met, treatment may be **paused, redirected, or discontinued**.

This agreement does not replace informed consent for specific procedures, which will be discussed separately.

Signature: _____

Date: _____