

My dental passport (plain version)

Additional pages to add to your existing health/ communication passport

How I like to be seated when at the dentist

For example, I am happy to sit on the dental chair, I don't like the chair to move while I am sat on it, I would like to avoid the dental chair, I like sitting cross-legged/more upright/knees bent over a small pillow/low cushion

What have I done at the dentist before

For example, how I have reacted to fillings and other dental treatments in the past, how I find anaesthetics (injections, gas and air)

Things that have helped me cope at the dentist before

E.g., Leaving the building straight away.

Things that I struggle with at the dentist

E.g., When the dentist uses the big suction, when the dentist uses things that squirt lots of water, the scraping of the teeth.

My stims and sensory needs:

This includes sounds, textures, lights, touch, smells and tastes. For detailed examples, please see page 3.

Things I like (These are ok for me)

Things I don't like (Please avoid these)

Other

For example, if not included in your passport:

How I like to communicate, what communication aids I might need, I prefer to use [speech/ sign/ pictures], how to tell if I am in pain, what will change about my behaviour if I am in pain

Scan the QR code for more information.



Suggestions for accommodations at the dental practice/hospital

If your child may struggle with waiting, you could include this on your passport:

- 'Please let me stay in the car while I waiting for my appointment'

If your child is sensitive to sound, you could include this on your passport:

- 'I cope better if there is somewhere quiet to wait before my appointment'
- 'I prefer to come to appointments when it is less busy (so it is quieter)'
- 'I would like to wear noise-reducing headphones when I am at the dentist'
- 'I prefer there to be no background music during my appointment'
- 'I need you to tell me before using something noisy'

If your child is sensitive to lights, you could include this on your passport:

- 'I would prefer if lights could be dimmed or adjusted in the waiting area and during my appointment'
- 'I would like to wear double sunglasses to reduce light sensitivity'.
- 'I am unable to tolerate the dental light, please use a pen torch/_____'

If your child is sensitive to smells, you could include this on your passport:

- 'I really struggle with the smell of _____'
- 'I would like to bring something with me that is a comforting smell'

If your child is sensitive to taste, you could ask for the following accommodations:

- 'I do not like the taste of _____'
- 'I prefer flavourless or mild-tasting alternatives for toothpaste'

If your child is sensitive to touch, you could ask for the following accommodations:

- 'I need a warning before you need to touch me'
- 'I need to be slowly introduced to metal equipment'
- 'I do not want to be touched in a particular area of the mouth: _____'
- 'When the dentist touches my mouth area it needs to be firm/gentle'
- 'I prefer a hug/squeeze from my parent during my appointment'
- 'I like to use a weighted blanket during my appointment'

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