**Template Letter to be sent to Liability Insurance Carrier**

Date

<Insurance Company>

RE: Sedation

I am writing to inform you that my practice provides sedation through the use of a DEA Schedule IV drug and/or nitrous oxide.

I have completed a 25-hour course on enteral (oral) sedation.

I have equipped my office with the following:

* Vital Signs Monitor with capnography
* Automated External Defibrillator (AED)
* Positive pressure oxygen delivery

Please don’t hesitate to contact me for further information or clarification.

Regards, Dr. <Name>