

## **TREATMENT GUIDELINES FOR HEALTH STAFF**

### **AVULSED TOOTH**

Authorized health and wellness staff may treat an avulsed tooth as follows:

1. Handle the tooth by its crown at all times. Never touch the periodontal root ligament.
2. Place the tooth in a physiologic solution such as milk or 0.9% normal saline solution (plain water should be avoided).
3. Evaluate the student for any attendant medical problems.
4. Check the tooth socket for gross contamination. If the tooth socket has been grossly contaminated by dirt or other debris, contact the center physician regarding tetanus-diphtheria booster immunization and antibiotics.
5. If the tooth socket is bleeding excessively, take measures to stop the bleeding.

### **WHEN TO REFER TO THE CENTER DENTIST**

Immediately—If the student is transported to the dentist within 30 minutes after the tooth avulsed, there is a 90 percent chance that the tooth can be successfully reimplanted.

## **TREATMENT GUIDELINES FOR HEALTH STAFF**

### **ORAL BLEEDING**

Authorized health and wellness staff may treat oral bleeding as follows:

1. Check to see if there is a clot protruding prominently from the socket of a recently extracted tooth, from a wound or trauma, or from a gum problem. If so, instruct the student to rinse mouth or spit to remove clot. It may be necessary for the health staff to remove or wipe out the protruding clot with gauze.
2. The health staff should make a pad with sterile gauze sponges small enough to fit over the bleeding area but large enough to guarantee pressure on biting.
3. The health staff should place the pad in the mouth over the bleeding area.
4. Instruct the student to bite, bringing his/her teeth together, and maintain pressure for at least 15 minutes.
5. Remove the gauze pack, and then recheck the area for bleeding with a flashlight after approximately 15 minutes. If bleeding seems to have stopped, dismiss the student after placing a clean gauze pad in the mouth. Give the student instructions to maintain the pressure for an additional 30 minutes.
6. Supply the student with extra gauze. Instruct the student to repeat the entire process; biting on the gauze pad firmly for 20-30 minute intervals if bleeding recurs.
7. Advise the student to avoid strenuous work or exercise for 24 hours and do not rinse mouth.

### **WHEN TO REFER TO THE CENTER DENTIST**

- If bleeding recurs and continues another hour after the student leaves the Wellness Center
- If trauma to jaw or teeth caused the oral bleeding
- If oral bleeding is not related to previous treatment, student should be referred to determine the cause

## TREATMENT GUIDELINES FOR HEALTH STAFF

### ORAL INFECTION

Authorized health and wellness staff may treat oral infection as follows:

1. If the temperature  $< 100^{\circ}\text{F}$ , the student should be referred to the center dentist for an assessment during the next scheduled clinic session. (In such a case, the dental infection will be identified as a localized fluctuant swelling with or without pus oozing from the gingiva.)
2. If the temperature is  $\geq 100^{\circ}\text{F}$  and  $<102^{\circ}\text{F}$  and the student is not allergic to penicillin, administer penicillin VK 2g po immediately, followed by penicillin VK 500 mg po four times per day. If the student is allergic to penicillin, administer clindamycin 600 mg po immediately, followed by clindamycin 300 mg po four times per day.
3. Refer any student with an oral infection, whether on antibiotics or not, to the center dentist for an assessment during the next scheduled clinic session.
4. Observe the student on antibiotics every 2 days and continue the student on antibiotics for 7 days.
5. If the student is on penicillin and there is no dramatic improvement in symptoms within 48-72 hours, change to clindamycin at a dosage of 300 mg four times per day for 7 days.
6. Follow the center dentist's dental emergency instructions and arrange for immediate emergency care (e.g., on-call oral surgeon or emergency room visit) if the student displays any or a combination of the following symptoms:
  - fever is  $\geq 102^{\circ}\text{F}$
  - dehydration occurs
  - there is a rapid progression of swelling
  - trismus is present and difficulty swallowing
  - there is marked pain
  - the tongue is elevated
  - there is swelling of soft palate
  - there is bilateral submandibular swelling
6. Inform the student about the signs and symptoms of a worsening dental infection as described above. Request that the student notify wellness center staff or other center staff after-hours immediately if the oral infection becomes emergent.

## TREATMENT GUIDELINES FOR HEALTH STAFF

### ORAL PAIN

Authorized health and wellness staff may treat oral pain according to pain level as follows:

Anticipated Pain Level	Analgesic Recommendation
<b>Mild</b>	Single-agent ibuprofen* 200 to 400 mg as needed for pain every 4 to 6 hours
<b>Mild to Moderate</b>	Single-agent ibuprofen 400 to 600 mg fixed interval every 6 hours for 24 hours <i>then</i> Single-agent ibuprofen 400 mg as needed for pain every 4 to 6 hours
<b>Moderate to Severe</b>	Ibuprofen 400 to 600 mg plus acetaminophen 500 mg fixed interval every 6 hours for 24 hours <i>then</i> Ibuprofen 400 mg plus acetaminophen 500 mg as needed for pain every 6 hours
<b>Severe</b>	Ibuprofen 400 to 600 mg plus acetaminophen 650 mg with hydrocodone 10 mg fixed interval every 6 hours for 24 to 48 hours <i>then</i> Ibuprofen 400 to 600 mg plus acetaminophen 500 mg as needed for pain every 6 hours

\*Ibuprofen should be taken with meals or a full glass of milk (or water).

Reference: American Dental Association Dental Drug Handbook: A Quick Reference (2019)

### WHEN TO REFER TO THE CENTER DENTIST

- All students with oral pain