

DENTAL TRAUMA: PERMANENT TEETH REFERRAL GUIDELINE

IMMEDIATE

WITHIN 60 MINUTES

SYMPTOMS

Avulsion: Tooth knocked out



SUGGESTED PREVISIT WORKUP

Avulsion:

- Call Dentist immediately
- If tooth is free from debris, re-implant on sight
- If covered in debris, or unsafe to re-implant, put tooth in clean container with cold milk or patient/parent's saliva
- Do not store tooth in water
- Systemic antibiotics should be considered in case of permanent tooth avulsion
- Tetracycline for older patients
- Penicillin V or Amoxicillin for younger patients

URGENT

WITHIN 6 HOURS

SYMPTOMS

Luxation or Tooth moved from original position: Teeth driven into or partially out of the jaw, pushed out of alignment



Chip/Fracture with pulp exposed or ongoing pain and throbbing

Root Fracture



Soft Tissue Trauma

SUGGESTED PREVISIT WORKUP

Luxation:

- Gently reposition tooth to original position. If tooth remains mobile, referral is recommended to dentist for assessment of splinting.

Chip/Fracture with pulp exposed:

- Inquire about pain to hot and/or cold exposures. This may indicate dentin and/or pulp exposure.
- Store broken tooth fragments in cold milk or patient's saliva

Soft Tissue Trauma:

- Gently wash and rinse wound with soap and water, and carefully remove debris by hand
- Apply direct pressure with gauze to control bleeding
- Examine face, lips, and oral musculature for signs of fractures, abnormal tooth position, and tooth mobility

LESS URGENT

WITHIN 12-24 HOURS

SYMPTOMS

Chip/Fracture:

- Tooth is visibly cracked, surface feels different, strange, or sharp when chewing or on tongue



Loosened tooth or one tender to touch

SUGGESTED PREVISIT WORKUP

Chip/Fracture:

- Inquire about pain to hot and/or cold exposures. This may indicate dentin and/or pulp exposure.
- Locate and store any lost tooth fragments in cold milk
- Referral to dentist is recommended as soon as possible to lessen discomfort and avoid possible infection

Loosened tooth or one tender to touch:

- If tooth is not very loose, monitor for changes in looseness or discoloration. If discoloration or any change occur, then referral to dentist is recommended.

CLINICAL PEARLS

- If patient experienced any loss of consciousness at time of head injury, even temporary, they should go to the hospital for assessment of serious injury. If no head injury or loss of consciousness, dentists are often more helpful than a hospital/emergency clinic for assessment and treatment of dental injuries.
- A tetanus booster and antibiotics should be considered whenever a dental injury is at risk for infection.
- Provide education to parents/caregivers about strategies to reduce risk of dental trauma, including utilization of a mouth guard when activity involves risks of fall, collision, or hard surfaces or equipment.
- A darkened permanent teeth is a long term sequelae and is not an urgent referral. Call dentist to evaluate for follow up.
- Additional resource for primary care: <http://pediatrics.aappublications.org/content/pediatrics/early/2014/01/22/peds.2013-3792.full.pdf>



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