

ORAL SURGERY PROTOCOL

Our goal is to relieve pain and address the most urgent need(s). Please remember this is not like doing dentistry in your dental office where more options are available to you and the patient has the ability to access a dentist more frequently. This has been kept in mind as they went through triage and routing and when determining what care they will be provided with today. Refer to the priority section of the patient form to find out what treatment and which teeth you will be working on. NOTE: PATIENTS WHO HAVE HAD EXTRACTIONS WILL NOT BE ALLOWED TO GET BACK IN LINE FOR ADDITIONAL TREATMENT OF ANY TYPE THAT DAY. If it is Friday, they may get back in line on Saturday.

1. Just as in a dental office or clinic, Universal Precautions must be adhered to. This includes wearing personal protective equipment. Gloves, masks, eye protection, and gowns must be used during patient treatment. Everyone providing treatment shall wear disposable gowns. Gloves, masks, and disposable gowns will be provided. All providers, including assistants, are expected to bring their own eye protection.
2. The paper charts are NOT to be touched with gloved hands at any time.
3. Verify informed consent has been initialed.
4. The patient will be anesthetized before arriving in your chair. Ensure that they are (still) numb before proceeding. Apply additional anesthetic if needed.
5. X-rays will arrive with the patient – either a Panorex or a PA – either on paper or in the patient portal. Review recommended treatment plan and x-rays and modify as necessary.
6. Teeth to be extracted include:
 - a. Visibly non-restorable teeth.
 - b. Painful or infected teeth that do not fit WDAMOM protocol for endodontic treatment.
 - c. Teeth, in addition to a. and b. above, that would complicate prosthetics fabrication if left in place.
 - d. Minor pre-prosthetic surgical procedures, (alveoloplasty, exostosis) in patients treated for a - c above in order to simplify later prosthetic rehab.
 - e. 3rd molars only if visible on clinical examination and/or carious or causing acute pain.
7. If you have an emergency, there are EMT services on site. Stay with the patient, send your assistant to alert the department lead who will immediately call for an EMT. Either you or your assistant should hold up the EMT station card so the EMT can quickly identify where to go once they have been radioed.
8. Please **PRINT** on the patient charts – DO NOT USE ABBREVIATIONS. Your full signature and printed name is required. Just as in your office, all treatment and advisements should be recorded on the patient chart.
9. Only **BLUE** pens should be used on patient charts – NO BLACK ink.

10. Use your station cards when you need the following assistance:
 - a. **Yellow** – translator needed
 - b. **Orange** – equipment problems
 - c. **Purple** – requesting a Nomad x-ray
 - d. White w/ red cross – EMT needed
11. When treatment is completed, take one last look to make sure all treatment has been recorded on the patient, hand the clipboard to the patient and have a patient ambassador take the patient to the onsite pharmacy if needed otherwise to the data entry area by the Patient Exit. Let the department lead know when you are ready for a new patient.
12. Translators are available. They are wearing orange vests for easy identification.
13. If you stick yourself with a needle or are stuck with an instrument, immediately notify the department lead who will follow the needle stick/sharp instrument protocol.
14. Prescriptions for Acetaminophen, Amoxicillin, Azithromycin and Ibuprofen can be filled onsite. Those will be indicated on the patient registration form and the patient will receive those free of charge onsite. Due to the opiate epidemic and registry, you are encouraged to give the patient the Ibuprofen/ Acetaminophen alternating protocol for pain relief. If you wish to prescribe something other than what is listed, speak to the department lead who will have a written prescription prepared that a patient can take to the pharmacy of their choice and have it filled at their own expense. **Any MOM pain med prescriptions written will be for 3 days only.**
15. Please stagger your lunch breaks. Be sure to let the department head know how long you will be gone, depending on the time someone else may use the chair while you are gone so patient flow isn't disrupted. Use the "ON BREAK" sign on your chair to indicate you are on break and will be returning.
16. DO NOT adjust chair height - ask dental equipment technician or department lead.

STERILIZATION and INSTRUMENTS

- 1) Remove all sharps from the instruments before taking them to sterilization – do not walk on the clinic floor with sharps. Instruments that came in a cassette should be put back into the cassette before being taken to Sterilization.
- 2) All instruments will be bagged or wrapped in Sterilization.
- 3) You or your assistant are responsible for making sure that your personal instruments are identified as yours when they go through sterilization. To ensure this, drop your instruments off at the side of the table marked "Used Personal Instruments" and have your name written on the sterilization pouch(es) and leave the pouch(es) on the tray with the instruments. You will pick them up from at the "Clean Personal Instruments" station. Unless instruments are in a cassette, they will need to be individually bagged so make sure that there are enough bags with your name on them to do so.
- 4) If you are using instruments provided at the event, be sure to take them to the "Used MOM Instruments" side of sterilization.
- 5) Broken ADCF instruments should be returned to sterilization, do NOT throw them away.

- 6) Suction lines need to be flushed after every patient per the MOM protocol. There is a container with a line cleaner solution to be used. Use one small paper cup of line cleaner each time.
- 7) Scrap amalgam and teeth with amalgam shall be placed in the appropriate containers for amalgam disposal.
- 8) Biowaste shall be placed in the appropriate red biowaste containers. **Please do not put non-biowaste, such as gloves and gowns, in red containers as it adds unnecessary expense to the disposal.**
- 9) Before leaving your station at the end of your shift, be sure to wipe down all surfaces of the chair and dental equipment with a Caviwipe, including foot pedal and leave the used Caviwipe on the chair so we know it was done. Return all unused supplies to the supply area.

PLEASE BE FLEXIBLE and THANK YOU for participating today.