

## ROUTING PROTOCOL

- 1) Utilizing Dental Triage recommendations on the Patient Registration Form, Routing will determine the treatment priority for the patient.
- 2) Routing will verify that all areas on the patient chart are signed by Medical and Dental Triage providers.
- 3) Confirm with the patient the treatment to be done and after the patient agrees, the teeth to be treated will be circled in **Red**.
- 4) Verify informed consent has been initialed.
- 5) Routing will provide each patient with a colored and numbered department routing card (s).
- 6) All Oral Surgery patients will be sent for the appropriate x-ray (PA or Pan) based on the priority.
- 7) All potential endodontic patients will be sent for an x-ray.
- 8) Restorative patients may or may not receive an x-ray.
- 9) For any tooth that the triage doctor was unsure what treatment is appropriate they will have been given a "Review" card indicating the tooth # and appropriate notes. Routing should not attempt to diagnose, they should assign the first priority routing card (or whichever priority the patient consents to) and if it is the questionable tooth assign the tx routing card indicated for the most likely tx along with an X-ray card, make sure the patient consent is signed, and have the patient escorted to radiology. A dentist in radiology will make final determination and if necessary, send a patient ambassador to routing to switch out the card.
- 10) All families with children 17 and under will be routed to the Family Restorative Department. Each family member will be given a Family Restorative Department routing card.
- 11) If Family Restorative becomes too busy, patients 11 and older may be sent to the Restorative Department or Oral Surgery Department. Anyone 17 and under must be accompanied by their parent or guardian. This decision will be made by the Pediatric and Routing Leads.
- 12) Patients receiving root canal treatment will receive routing cards for x-ray and endodontics and after receiving the x-ray will have the case evaluated by the lead or second in the Restorative department to determine if the tooth can be treated under our root canal criteria. If it is determined that the tooth does not meet the criteria, then the patient will be escorted back to Routing to receive an extractions routing card.
- 13) Patients that have conditions fitting our premedication protocols will be administered premeds in Routing.
- 14) Persons receiving lab services will receive three routing tickets – one for x-ray, one for lab and one for extractions. The patient will go to x-ray, then lab for an impression before going to oral surgery. When determining if a case falls under our treatment partial criteria, a consultation with the lab department may be done.

If the teeth to be replaced are already missing, the patient would only get the x-ray and lab routing cards. If a treatment partial cannot be made and the patient doesn't want to proceed with the extractions, or if the treatment partial cannot be made and no extractions were required, then the patient will return to Routing and the appropriate care for their second priority would be given.

- 15) Van routing cards will only be used once we know how much availability we have in the van for vets after those that are being bussed are seen. If time permits, vets identified in line during the registration process, who came alone can be given a van routing card. This needs to be done discreetly as they may receive quicker service and more services overall in the van. They may not be handed out until notified by the van coordinator (Dr. Andrew Smith).

- 16) Routing card colors are as follows:

Cleanings – Green

Fillings – Blue

Extractions – Orange

X-rays – White

Lab – Yellow

Family Restorative – Dark Pink

Pediatrics – Lt Pink

Root Canal – Purple

Van – Lt Green

Review - Red