

DENTAL EMERGENCY GUIDE

The following information is designed to aid school nurses and teachers in treating minor dental emergencies.

In a dental emergency:

- Stay calm and reassure the student
- Notify the parent and/or guardian
- Wear gloves with any bleeding injury
- Rule out head injury

Signs and symptoms of concussion may include:

- Nausea and Vomiting
- Dizziness
- Headache
- Dilated Pupils
- Cold/Clammy

BLEEDING AFTER LOSING A PRIMARY (BABY) TOOTH

- Place a clean folded gauze pad, cloth or paper towel over the site.
- Ask child to bite on the gauze with pressure for 15 minutes.
- Repeat if necessary. If bleeding continues, see a dentist!

AVULSED (KNOCKED OUT) TOOTH

The tooth may be successfully re-planted and saved, if gotten to the dentist within one hour.

- Find the tooth and pick it up by its CROWN, not the root.
- If dirty, gently rinse with water.
- Do NOT scrub the tooth.
- Hold the tooth by the crown and gently reinsert the tooth back into the socket. Make sure to insert it facing the right way!
- Have child hold tooth in the socket while being transported to the dentist, by biting on a clean gauze or cloth.



If an avulsed tooth CANNOT be placed back into the socket:

- Place the tooth in a cup of fresh milk, saline solution, or the patient's own saliva (water as a last resort) and transport to the dentist immediately!
- Never wrap the tooth in a gauze or tissue.
- Do not attempt to re-plant avulsed primary (baby) teeth. Simply control the bleeding with pressure, check for other injury and notify the parent.
- Check the child's tetanus immunization status.



DISPLACED OR PARTIALLY DISLODGED TOOTH

- If a tooth has been pushed up into the socket or gum by trauma, control the bleeding.
- Do NOT attempt to pull it out into position.
- If it is loose, but not pushed up into the socket or gum, gently place tooth back in its original position with gloved hands.
- Transport child to dentist immediately.

BROKEN OR FRACTURED TOOTH

- Control bleeding.
- Gently clean any dirt from the injured area, using warm water.
- Place a cold compress over the injured area.
- Attempt to find the broken tooth fragments.
- Wrap tooth in wet gauze. See a dentist immediately.



JAW DISLOCATION OR FRACTURE

- Contact hospital immediately.
- Contact hospital emergency department or oral surgeon and arrange transport of student.

TOOTHACHE OR ABSCESS

- Rinse the mouth vigorously with warm or salt water to dislodge any food debris.
- Clean the area around the tooth by brushing and flossing gently.
- Do NOT place aspirin at the toothache site, as this may cause a chemical burn of the gum tissue.
- Apply cold compress on the outside of the cheek. If the face is swollen, apply cold compress alternating 10 minutes on, 5 minutes off. Avoid heat and chewing pressure at site.
- Refer child immediately to a dentist.



SOFT TISSUE INJURIES

- Rinse repeatedly with warm water.
- Apply firm gentle pressure to the area using a tea bag or gauze squares for about 15 minutes.
- Apply cold compress to the outside of the affected area if swelling/bruising is present.
- Refer child to the dentist or hospital emergency room if bleeding persists.



PROLONGED BLEEDING OR PAIN POSTEXTRACTION

Blood will ooze from the extraction site. However, if the bleed is more than excessive, has a bright red color or is alarming the student, the following is recommended:

- Place sterile gauze on the extraction site and have student apply pressure by biting down for ½ hour. Replace soaked gauze as needed.
- Use enough gauze to keep top and bottom teeth slightly apart.
- Contact parent/guardian and refer to treating dentist.
- If dentist can't be contacted or there is excessive bleeding, advise parent to take child to hospital emergency room.

BROKEN ORTHODONTIC BRACES OR OTHER APPLIANCES

- A blunt item (tongue depressor or pencil eraser) may be used to gently bend the wire, so it is no longer irritating or poking the soft oral tissues. Broken wires can be covered with wax or gauze until the student can be seen by an orthodontist.
- Do NOT remove a wire if it is broken off and embedded in the cheeks, gum, or tongue. See the orthodontist IMMEDIATELY!

