



Pediatric Protocol

Our goal is to relieve pain and address the most urgent need(s) of our pediatric patients. Please refer to the priority section of the patient form to find out what teeth will be treated today. If you find that this setting does not work for a particular patient, explain your treatment decision to the parent or legal guardian of the minor child and what other treatment options and referrals are available to them. Please use your discretion to determine if you plan on treating this patient in the MOM setting.

PLEASE PRACTICE UNIVERSAL PRECAUTIONS AND FOLLOW ALL STANDARD INFECTION CONTROL PRACTICES.

1. EMTs are onsite to deal with patient and volunteer emergencies. In the case of an emergency, **stay with the patient**; send your assistant to alert the department head, who will immediately radio for an EMT. Hold your EMT Card (**white with a red cross**) up so the EMT can quickly identify where to go.
2. If you receive a sharps injury (instrument or needle stick) or incur any other personal injury, please notify the department lead immediately.

PATIENT CARE:

1. The treating Pediatric Dentist will review the patient's medical and dental history and develop a treatment plan. Please remember to address the patient's most urgent need(s). When possible, quadrant dentistry is ideal.
2. Please clearly print on patient charts. Please do not use abbreviations.
3. Nomad X-rays are available on the clinic floor.
4. Choice of restorative material and final treatment plans are up to you as the clinician. Again, keep in mind that your patient may not have regular access to dental care. Discuss this with the patient's parent or legal guardian.
5. Stainless steel crowns will not be provided. If you wish to place these types of crowns, you are encouraged to bring your own materials.
6. Prescriptions will be available at the pharmacy for Acetaminophen, Ibuprofen, Amoxicillin and Clindamycin, which will be given to the patient free of charge.
7. Please stagger your lunch breaks to avoid a disruption in patient flow.

8. Patients/Parents are not allowed to walk unattended on the clinic floor. Use your station cards for moving patients or if there are problems.
 - a. **Green – bring me a patient.**
 - b. **Red – take the patient to the Exit Interview.**
 - c. **Orange – Equipment maintenance needed.**
 - Yellow – Translator needed.**
 - e. **White w/ Red Cross – EMT needed.**

STERILIZATION AND INSTRUMENTS:

1. Remove all sharps from the instruments and dispose of them in the nearest sharps container. **DO NOT WALK THE CLINIC FLOOR WITH SHARPS.**
2. Please place extracted teeth that contain dental amalgam, extra amalgam and amalgam capsules in the nearest container labeled **dental amalgam.**
3. Dispose of all anesthetic carpules in the designated biohazard container. Do not throw them in the regular trash.
4. Please be aware that you are responsible for making sure that your personal instruments are identified and labeled as “yours” when they go to sterilization. To ensure this, drop your instruments off at the sterilization table marked “Used Personal Instruments” and have your name written on the sterilization pouch(es). Leave the pouch(es) on the tray with the instruments. You will pick up sterilized instruments at the “Clean Personal Instruments” station.

IN ADDITION, THE FOLLOWING MUST BE ADHERED TO THROUGHOUT THE EVENT:

1. DO NOT allow the patient to form a lip seal on the saliva ejector or large suction.
2. Before turning off the suction, remove it from the patient’s mouth, point it at the ceiling, and then turn it off.
3. After each patient, obtain two (2) one-ounce cups of pre-mixed Slugbuster solution and pull one cup through the saliva ejector and one cup through the large suction.
4. After the patient is escorted away, don new gloves and use utility gloves over those to clean the operatory. Please do this after each patient.