
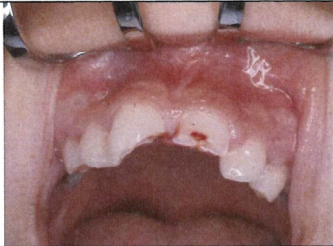




What is considered “dental emergency” for the NCH Emergency Department?


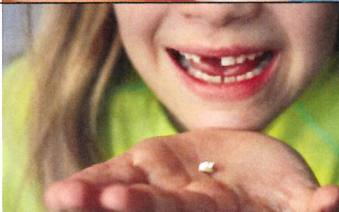



These are cases where the **Dental Resident On Call** should be called in ASAP. 614-690-1017

Avulsed permanent tooth – usually age 7 and older -- Please put the tooth back in ASAP, and hold with gauze!		
Trauma to any permanent tooth – intrusion, luxation, fractures		
Extra-oral swelling from infected tooth. Dentistry should be consulted BEFORE a child is admitted.		
Trauma to primary teeth (other than avulsion)		
Braces embedded in the lip	<didn't find a good pic on Google>	
Anything else?		

These are NOT considered dental emergencies for the ED. The Dental Resident On-Call should not be paged.

Please refer these patients back to their dentists or the NCH Dental Clinic, 2nd floor, Livingston Ambulatory Center

Walk-in hours, Mon-Fri 9-11am, 1-3pm (Note: No walk-ins on evenings or weekends)

<p>Loose baby (primary) teeth – usually ages 5-12 – patient should be encouraged to wiggle his tooth out</p>		
<p>Avulsed front baby (primary) teeth – usually under age 8 – there is no treatment indicated for this</p>		
<p>Toothaches (pain) in absence of visible facial swelling – manage with pain meds</p>		
<p>Abscess/fistula in gingiva – antibiotics not indicated for this</p>		
<p>Orthodontic patients – loose brackets, wires, etc. Patient should call his/her orthodontist for emergency care. (If patient has orthodontics through NCH Dental Clinic....??)</p>		
<p>Anything else?</p>		