Clyde Emergency Department Tooth Avuision Protocol

The avulsion (complete displacement of a tooth from its socket) of a permanent tooth is a serious injury, and hence requires fast and accurate management in order to provide a patient with the best prognosis.

Prehospital Management

- Reassure the patient
- Locate the tooth, handling only the crown and avoiding touching the root
- Washing the tooth should be carried out for a maximum of 10 seconds under cold water.
- Reposition the tooth and encourage the replantation of the tooth.
- Once the tooth is back in place, biting on a handkerchief helps to hold it in its position

Replantation not possible?

- Place the tooth in a glass of milk (or another suitable storage medium) and bring it with the patient to the emergency department.

Failing to implant the tooth, or suitably store it appropriately within the first hour since avulsion makes it non-viable for further treatment. After 60 minutes 'drytime', peridontal ligament cells likely will not survive.

Clinical Management

Prehospital replantation

- Clean the replanted tooth with water spray, saline or chlorhexidine
- Suture any gingival lacerations
- Verify normal position of tooth clinically and
- Apply a flexible splint for up to 2 weeks
- (you may have to arrange this with Max Fax or Dentist)
- Check tetanus protection

Consider antibiotic cover after discussion with above

Appropriately stored tooth or within 60 minutes

- Clean the tooth
- Administer local anaesthesia
- Irrigate the socket with saline
- Replant the tooth slowly without forcing it
- Suture any gingival lacerations
- Verify normal position of tooth clinically and

Apply a flexible splint for up to 2 weeks- (you may have to arrange this with Max Fax or Dentist)

- Check tetanus protection
- Consider antibiotic cover after discussion with above

Outwith 60 minutes or suspected unviable tooth - Refer dentist

Discharge advice

Avoid participation in contact sports Soft diet for up to 2 weeks Brush teeth with a soft toothbrush after each meal Use an antiseptic mouth rinse twice a day for 1 week

Follow up with dentist in the absence of facial fractures. Consider maxillofacial surgical involvement with fractures.

References

International Association of Dental Traumatology guidelines for the management of traumatic dental injuries: 2. Avulsion of permanent teeth. *Dental Traumatology.* 28: 88–96. doi: 10.1111/j.1600-9657.2012.01125.x