



Dental Problems

History

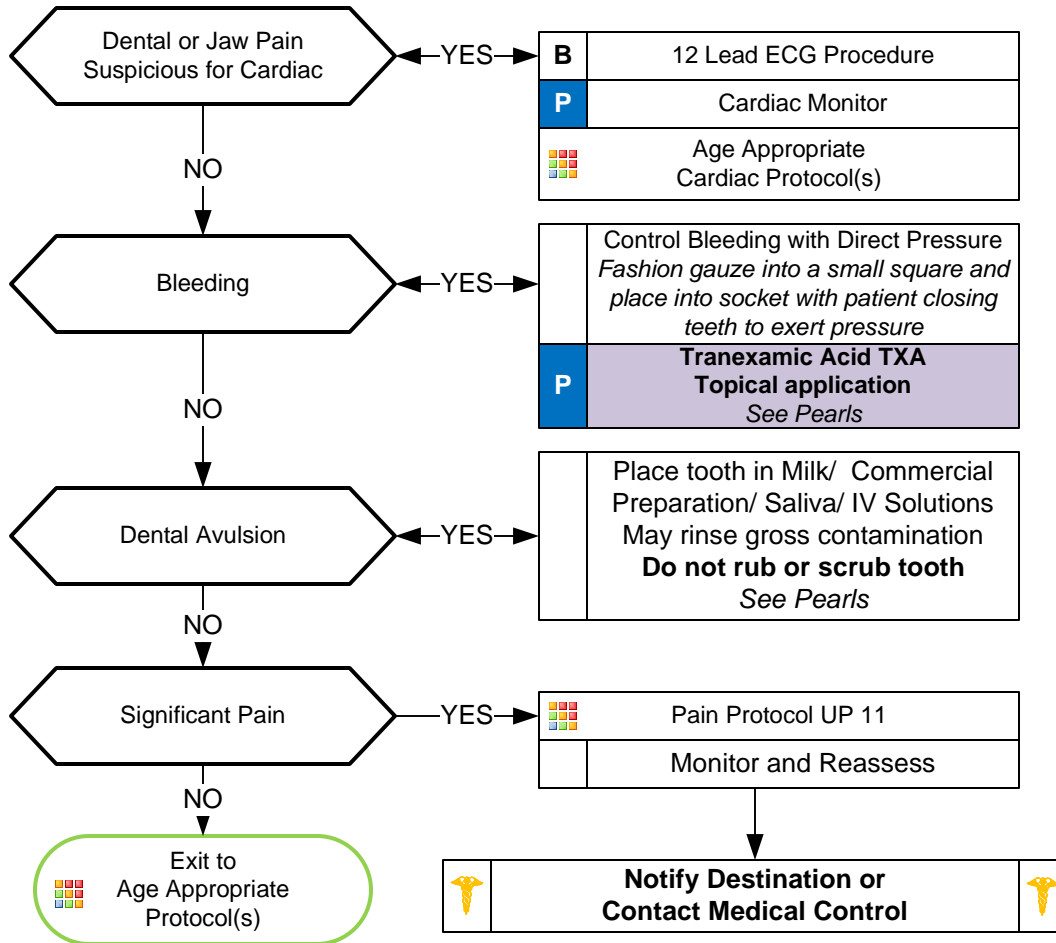
- Age
- Past medical history
- Medications
- Onset of pain / injury
- Trauma with "knocked out" tooth
- Location of tooth
- Whole vs. partial tooth injury

Signs and Symptoms

- Bleeding
- Pain
- Fever
- Swelling
- Tooth missing or fractured

Differential

- Decay
- Infection
- Fracture
- Avulsion
- Abscess
- Facial cellulitis
- Impacted tooth (wisdom)
- TMJ syndrome
- Myocardial infarction



Universal Protocol Section

Pearls

- **Recommended Exam: Mental Status, HEENT, Neck, Chest, Lungs, Neuro**
- Significant soft tissue swelling to the face or oral cavity can represent a cellulitis or abscess.
- Scene and transport times should be minimized in complete tooth avulsions. Reimplantation is possible within 4 hours if the tooth is properly cared for, but unlikely when > 1 hour from time of injury.
- Cardiac chest pain may radiate to the jaw and teeth mimicking dental pain.
- **Avulsed tooth:**
Handle tooth by the crown, do not touch the root.
Rinse tooth if soiled but do not scrub, as this can damage the ligaments vital for possible reimplantation.
Rinse with mild, commercial tooth solution, normal saline or lactated ringers, or the patient's own saliva if dry.
Transport tooth in milk, commercial solution, patient's own saliva, or IV solution in a container to protect.
- **TXA Use in Dental Bleeding:**
May be used topically if approved by agency Medical Director.
Procedure should be created with specific guidance on how to administer TXA for dental bleeding.
TXA offers modest benefit as TXA instilled gauze combined with direct pressure.