

EMERGENCY POLICY

Reviewed:
Board Approved:
Board President Signature and date:
Effective Date:

Purpose:

Effective Date: To guide the care of patients calling or walking in to _____
(Name of Dental Clinic/health center) for emergency treatment.

Policy:

Patients presenting with pain, swelling, acute infection, fever, hemorrhage or trauma will receive a 30-minute appointment for diagnostic evaluation and definitive treatment. Palliative care will only be provided if definitive care is contraindicated or if the provider does not have sufficient time in the schedule to provide definitive care. If further treatment is needed, the patient will be advised to call the clinic one or two days after the visit to schedule the appointment. Patients seeking emergency care who were recently treated in the clinic will also be seen the same day they call or walk in. Front desk staff will be responsible for the triage and scheduling of all emergency patients. A sample Triage Form is attached to this policy.

One emergency slot per dentist per session (morning and afternoon) will be built into each day's schedule. Additional emergency patients will be put in open slots in the day's schedule caused by no-shows or cancellations. It will be extremely important to monitor these appointments to make sure they are being utilized regularly.

Procedure:

1. All calls or walk-ins for emergency care will be triaged by the front desk staff. Patients with the following complaints will be seen the same day:
 - Pain
 - Swelling
 - Acute infection
 - Fever
 - Hemorrhage
 - Trauma
 - Patients with any complaint related to recent treatment in the clinic

In the absence of any of these complaints, patients with such problems as lost fillings or broken teeth or patients seeking a denture adjustment (unless recently fitted in the clinic)

do **not** constitute emergencies and will be scheduled for a regular appointment or double booked at the request of the treating dentist.

2. If there are unfilled slots in the daily schedule, emergency patients will be given a 30-minute appointment for diagnostic evaluation and palliative treatment. If all the slots are filled, patients calling in the morning will be told to come in and wait for a slot to open (as the result of a no-show or cancellation). If no slots open up, the patient will be seen by the dentist at the conclusion of the morning session (ie, during the lunch break). Patients calling after lunch will also be told to come in and wait for an open slot. If no slots open up, the patient will be seen by the dentist at the conclusion of the afternoon session. Under no circumstances will a patient who was told to wait be turned away from the clinic without being seen.
3. To facilitate the evaluation and treatment of emergency patients, both hygienists and dentists can use unfilled chair time. Either hygienists or dental assistants (if not currently assisting a dentist) can prepare the patient and take any necessary x-rays.