



# University Hospital Galway

EMERGENCY DEPARTMENT  
GalwayEM.ie

## **Dental Conditions**

**(<https://galwayem.ie/index.php/index.php/guidelines/trauma-and-musculoskeletal/dental-conditions>)**

Category

[Trauma and Musculoskeletal](#)

<https://galwayem.ie/index.php/index.php/guidelines/trauma-and-musculoskeletal>

### **Fractured Teeth**

If symptoms are severe, especially in children or those with good dentition, refer to own dentist or try emergency dentist if out of hours. If symptoms are not severe - the definitive treatment will be done by the patient's own dentist. If the tooth is exposed (pulp visible), treatment is an emergency (hours) if viability is to be maintained.

### **Avulsed permanent tooth.**

These can sometimes be re-implanted.

Do not handle the root.

If possible replace tooth (the right way round!) and refer to own/emergency dentist.

However clot in the empty socket may preclude easy replacement.

If in doubt put the tooth in milk/saline and then refer to Maxillofacial team.

### **Toothache**

Give analgesics and refer to own dentist.

### **Dental Abscess**

- Always ensure the airway is adequate.

- If gross facial swelling, severe trismus or marked systemic symptoms refer to Maxillofacial team for IV antibiotics.

- In simple apical abscess the tooth will be tender to percussion - give Penicillin, Metronidazole (or co-amoxiclav) and analgesics and refer to own dentist.

### **Bleeding Tooth Socket**

Roll up a piece of gauze soaked in 1:10,000 adrenaline to exactly fit the gap and get the patient to bite on it for 30 minutes by the clock.

If unsuccessful, either suture or refer to Maxillofacial team.

Once bleeding has stopped advise patient against alcohol, mouth and teeth washes and poking cavity with tongue etc. Late ("reactive") bleeding may be due to infection.

### **Dry Socket**

Onset of severe pain, without much swelling, several days after extraction are typical. Give analgesics and refer to own dentist for local treatment.

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