

Top Ten ED Dental Diagnoses that May Not Require Antibiotics

1. Alveolar osteitis (aka "Dry Socket")

- a. Appropriate blood clot fails to form or is lost from the socket
- b. inflammation of the bone (i.e. the alveolar process maxilla or mandible)
- c. Treatment: OTC pain meds, saline irrigation, pack w/ lidocaine infused gauze

2. Gingival hyperplasia or Gingivitis (w/o secondary bacterial infection)

- a. Caused by plaque; gums are inflamed (red or purple), bleed, and tender
- b. Sores may be present and gingival recession is common in chronic cases.
- c. Treatment: Chlorhexidine Gluconate 0.12% oral rinse, improve hygiene

3. Exostosis (aka "Tori")

- a. A noncancerous bone tumor that forms as a bump out of an existing bone
- b. Traumatic irritation from chewing can lead to bone apposition and inflammation resulting in its apparent growth
- c. Treatment: Soft diet, OTC pain meds, surgical removal if appropriate

4. Dental Caries (aka: "Cavities")

- a. Erosion of the dental enamel and dentin by acidic metabolites of tooth bacteria
- b. Polymicrobial infection, yes, but no blood flow, so no role for antibiotics
- c. Treatment: Improve oral hygiene, dental referral for fillings

5. Reversible Pulpitis

- a. Dental caries that extend into the innervated pulp
- b. Polymicrobial infection, yes, but no blood flow, so no role for antibiotics
- c. Treatment: Soft diet, avoid irritating foods (hot/cold/very sweet), dental referral for fillings or possibly root canal

6. Pericoronitis

- a. Inflammation (and possibly infection) of the soft tissues surrounding a partially erupted tooth, including the gingiva and dental follicle
- b. Treatment: Targeted saline irrigation, Chlorhexidine oral rinse, OTC pain meds and dentist referral. Possibly PCN if spread to adjacent tissue

7. Fractured Tooth (aka Cracked Tooth)

- a. A vertical crack that runs from the biting surface of your tooth up to your gum line. Sometimes, the crack extends into your gum line and root.
- b. Treatment: Soft diet, Chlorhexidine Gluconate 0.12% oral rinse, OTC pain meds and dentist referral for crown, root canal or extraction

8. Apical Periodontitis

- a. Acute or chronic inflammatory lesion around the apex of a tooth root, most commonly caused by bacterial invasion of the pulp of the tooth
- b. Treatment: OTC pain meds and dentist referral for extraction or root canal. PCN only recommended if spread to adjacent tissue or lymphadenopathy.

9. Fibroepithelial Polyp

- a. Often develop in sites of trauma, painful if inflamed
- b. Treatment: OTC pain meds and optional removal by dentist or oral surgeon

10. Impacted Molar

- a. A third molar that has erupted incorrectly or cannot erupt through the gums
- b. Treatment: OTC pain meds, soft diet, and oral surgeon referral for extraction

#1 Alveolar osteitis (aka "Dry Socket")



#2 Gingival hyperplasia or Gingivitis



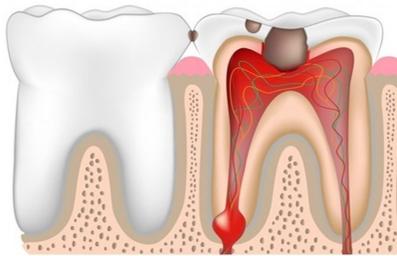
#3 Exostosis (aka "Tori")



#4 Dental Caries (aka "Cavities")



#5 Reversible Pulpitis



#6 Pericoronitis



#7 Fractured Tooth (Cracked Tooth)



#8 Apical Periodontitis



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