## **DENTAL EMERGENCY FLOW CHART**

## Provincial Ambulance: Land line: 10177 Cellphone: 112/911 082 911/ 084 124 **Private Ambulance:** 0800 333 444 Poison control: Numbers are subject to change please

consult your directory.

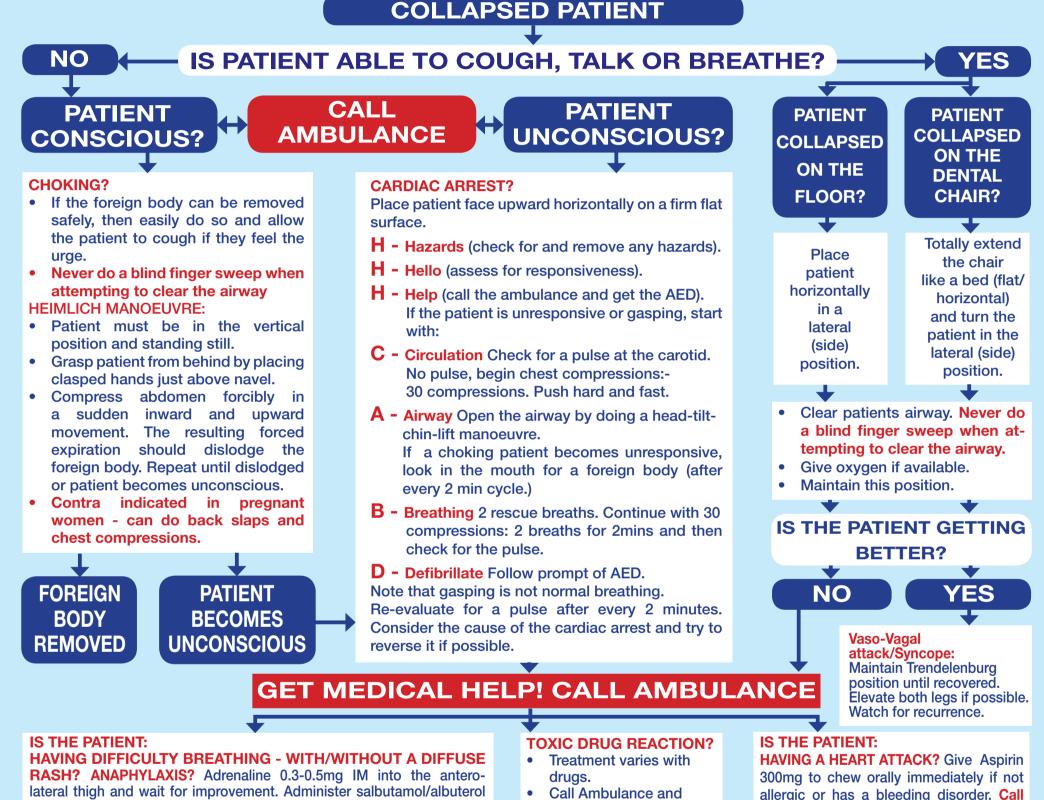
## PREVENTION

- 1. Update medical history at every visit. Check drug allergies.
- 2. Update contact details of patient's medical doctor/ physician at every visit.
- 3. Ensure that the patient has taken their usual medication.



## HOW TO MAKE AN EMERGENCY CALL

- Give the operator your name, and telephone number immediately in case you are disconnected.
- Give as much detail as possible of your location (address, the building, room number, describe the building or house, give well known landmarks, eg., school, halls, shopping centre, etc.).
- Give time of incident to operator (particularly important with stroke patients). NB Time is brain.
- Describe the nature of your emergency as fully as possible.
- Stay on the line for as long as the operator asks you to, if you are able to do so.



allergic or has a bleeding disorder. Call contact Poisons Centre. an ambulance immediately. Watch for Treat symptomatically. cardiac arrest.

(e.g., prednisone 50mg (po). Administer an antihistamine (eg., phenergan 25mg po). If an IV line is available, administer 20ml/kg of ringer's lactate. Remove the offending agent e.g., latex gloves. If no improvement after 5 minutes, repeat the dose in the same position.

continuously until help arrives. Administer a dose of steroids if available

**PREGNANT?** Supine Hypotensive Syndrome? Turn patient into the left lateral horizontal position.

HYPOGLYCAEMIC? Drink liquid with sugar if conscious. If unconscious, rub sugar/honey/syrup onto inside of cheek. If IV line available, give 50ml Dextrose 50% IV slowly.

**HAVING A SEIZURE?** Keep patient in safe horizontal lateral position. Protect head from hitting hard objects. Suction any secretions in mouth if present. Give oxygen. Administer glucose if hypoglycaemic. **SUSPECTED HYPOTENSION?** Keep patient in safe horizontal lateral position. Maintain airway. Give oxygen.

ALL THESE PATIENTS SHOULD BE SENT TO HOSPITAL BY AMBULANCE FOR MEDICAL EVALUATION

**Consider local** anaesthetic toxicity and report it to the ambulance personnel so that the correct drug (20% intralipid) can be administered.

HAVING A STROKE? Maintain airway. Give oxygen. Place patient in lateral position to prevent aspiration. Protect weak side. Transfer to a stroke-prepared hospital. HYPERVENTILATING? (exclude all other diagnoses first). Breathe in and out of a paper bag with a tight seal around the nose and mouth until symptoms disappear.

IF NO OBVIOUS CAUSE, MAINTAIN AIRWAY, **BREATHING AND CIRCULATION** WAIT FOR EMERGENCY SERVICES

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