

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES  
Health Care Department Operations Manual

**3.3.5.9 Dental Emergencies**

**(a) Policy**

All California Department of Corrections and Rehabilitation (CDCR) facilities shall ensure the availability of emergency dental care 24-hours a day, seven days a week.

**(b) Purpose**

To provide cost-effective, timely and competent emergency dental care to every patient consistent with adopted standards for quality and scope of services within a custodial environment, and to establish procedures and guidelines for managing and responding to dental emergencies in CDCR facilities.

**(c) Procedure**

**(1) General Requirements**

(A) Patients requiring treatment for a dental emergency shall be seen immediately.

(B) Emergency dental services shall be provided first to those most in need, to attempt stabilization and prevent deterioration of a patient's condition.

(C) Emergency dental services shall be the responsibility of the Health Program Manager (HPM) III and Supervising Dentist (SD) at that institution. The HPM III's and SD's duties shall include, but not be limited to:

1. Developing and maintaining approved written policies and procedures for emergency dental services. Implementing and annually reviewing approved policies and procedures to ensure they are current with the required state regulations.
2. Ensuring the availability of emergency dental services coverage 24-hours a day, seven days a week.
3. Ensuring that Supervising Registered Nurses (SRN), Registered Nurses (RN), mid-level providers and physicians working in the medical clinic or Triage and Treatment Area (TTA) receive training in Oral Assessments and Dental Emergencies for Medical Staff.
4. Ensuring that the medical department has the Dentist on Call (DOC) and SD's contact phone numbers on file.

(D) The Chief Executive Officer or designee at each institution shall ensure that an RN with current training in Oral Assessments and Dental Emergencies for Medical Staff is available 24-hours a day to assess patients with dental emergencies.

(E) All patients shall provide authorization for treatment via informed consent for emergency dental services prior to treatment being rendered.

1. All patients who have life-threatening conditions, as determined by the Physician on Call (POC), or treating dentist, (including the SD), and who are unable to provide informed consent shall be treated regardless of whether or not authorization for treatment is provided.
2. The effort to obtain authorization for treatment shall continue simultaneously with the treatment.
3. The POC or treating dentist shall document in the patient's health record the life-threatening condition that requires treatment without authorization.

(F) No treatment shall be forced over the objection of the patient, or their legally authorized representative or responsible relative, except in emergencies, where immediate action is imperative to save the life of the patient, or in such cases as are provided for by law as noted in the California Code of Regulations, Title 15, Division 3, Chapter 2, Subchapter 2, Article 2, Section 3999.210.

1. If, after adequate explanation of the necessity for treatment and possible adverse effects that may result as a consequence of refusal, the patient maintains their desire to refuse treatment, the patient shall be required to sign a CDCR 7225-D, Dental Refusal of Examination and/or Treatment.
2. The refusal of emergency dental treatment shall also be documented in a clinical note in the Electronic Dental Record System (EDRS), in accordance with EDRS Workflow 1-2 and associated Back Office Job Aid, and as outlined in the Health Care Department Operations Manual (HCDOM), Section 3.3.6.1(c)(1)(F) through (H). (Reference HCDOM, Section 3.3.5.6(c)(6) of this policy for other requirements concerning a patient refusal).

(G) For every patient receiving emergency dental treatment, an appropriate entry shall be documented in a clinical note in the EDRS, in accordance with EDRS Workflow 1-2 and associated Back Office Job Aid, and as outlined in the HCDOM, Section 3.3.6.1(c)(1)(F) through (H) of this policy.

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- (H) Emergency dental services shall be performed only by, or as ordered by, a dentist within the scope of their license.
  - (I) Emergency first aid shall be rendered as necessary.
  - (J) Patients shall be allowed to participate in their dental care whenever possible. Patients shall receive instruction from the dentist or RN regarding their care, the nature of the illness or injury and any follow up care that is necessary. The dentist or RN shall document in the patient's health record, any instructions given to the patient.
  - (K) Any patient needing emergency dental services at another health care facility shall be transported in a safe, secure and efficient manner.
  - (L) When a dental emergency requires the use of a medical transport vehicle, the clinic RN shall be notified via the institutional telephone system.
- (2) Dental Emergencies During Dental Clinic Operating Hours
- (A) Patients initiating dental emergency requests during dental clinic operating hours shall contact an available or accessible CDCR staff member, who shall then notify the dental clinic of the emergency.
    - 1. The CDCR staff member notifying the dental clinic of the emergency shall work with the dental clinic staff to arrange for the patient to report to the dental clinic on their own, or be escorted to the dental clinic for evaluation.
    - 2. If a patient is unable to walk, arrangements shall be made to have the patient transported to the dental clinic or TTA as appropriate.
  - (B) The CDCR staff member notifying the dental clinic of the emergency shall contact the SD or designee who shall provide direction in those instances when there is not a dentist in the clinic.
  - (C) The dentist shall see these patients upon their arrival at the dental clinic or TTA to establish the patient's disposition and if needed provide treatment. The dentist shall ensure that the patient is scheduled for any needed follow-up care relating to the dental emergency.
  - (D) The dentist shall review and sign a CDCR 237-F, Dental Pain Profile, for each patient with a dental emergency. If a patient is unable or refuses to complete the CDCR 237-F, the dentist shall complete the form on behalf of the patient, documenting the complaint and the reason the patient did not personally complete the form.
  - (E) Patients with a life threatening illness or injury shall receive immediate medical attention.
- (3) Dental Emergencies Outside Dental Clinic Operating Hours
- (A) The Medical Department shall manage dental emergencies occurring outside of dental clinic operating hours.
  - (B) RNs, who have received training in Oral Assessments and Dental Emergencies for Medical Staff under the direction of the HPM III and SD, shall be notified of dental emergencies by institutional staff, and shall assess patients to determine the need for emergency dental treatment.
  - (C) If in the opinion of the medical staff the situation does not require the attention of a dentist, the POC shall prescribe the appropriate level and type of care.
  - (D) If in the opinion of the medical staff the situation requires the attention of a dentist, the POC, via the medical clinic's RN, shall be responsible for contacting the DOC at the earliest opportunity to arrange for definitive treatment.
  - (E) The DOC contacted outside dental clinic operating hours regarding a dental emergency shall notify the SD or designee on the next business day of the dental emergency contact. The notification shall be documented in the DOC Log as well as in a clinical note in the EDRS, in accordance with EDRS Workflow 1-2 and associated Back Office Job Aid, and as outlined in the HCDOM, Section 3.3.6.1(c)(1)(F) through (H) of this policy. This notification shall include, but not be limited to, the following:
    - 1. The time the call was received from the RN recorded in military time (using the 24-hour clock).
    - 2. Patient's name.
    - 3. Patient's chief complaint.
    - 4. Diagnosis or provisional diagnosis.
    - 5. Treatment or action provided or ordered.
    - 6. Any scheduled follow-up care.
  - (F) When clinically indicated, a dentist shall see the patient the next business day after medical staff contacts the DOC after hours regarding the patient.
  - (G) The HPM III and/or SD shall maintain completed DOC Logs for a period of three years.

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(4) Emergency Transfers

- (A) When in the opinion of the DOC, treating dentist, or SD it becomes necessary to transfer a patient to another facility for emergency dental services, the RN shall make a written request on a CDC 7252 Request for Authorization of Temporary Removal for Medical Treatment and notify the Watch Commander. The RN shall document the following on the CDC 7252:
1. Patient's name and CDCR number.
  2. Name of receiving facility.
  3. Description of the condition necessitating transfer.
  4. The dental evaluation or treatment recommended by the DOC, treating dentist, or SD.
  5. Name of the DOC, treating dentist, or SD.
- (B) The CDC 7252 shall be submitted prior to the transfer and shall be approved so as to create no undue delays. In a life or death situation, it shall not be necessary to await completion and return of the form. The patient shall be transferred immediately.
- (C) The DOC, treating dentist, or SD shall:
1. Contact or have the sending facility RN contact the receiving physician or dentist at the receiving facility and obtain their acceptance of the patient.
  2. Document in a clinical note in the EDRS, in accordance with EDRS Workflow 1-2 and associated Back Office Job Aid, a brief history of the illness or injury, treatment received, reason and permission for the transfer, as well as the name of the accepting physician or dentist.
  3. Generate a Transfer to Higher Level of Care order in the Electronic Health Record System or provide verbal orders to the emergency medical services physician for the transfer of the patient.
  4. Document on the CDC 7252 a brief history of the illness or injury, treatment received and reason for transfer. In the absence of the DOC, treating dentist, or SD, the RN shall complete the CDC 7252.
  5. Determine whether an ambulance is necessary, and if so, direct the RN or designee to contact the contract ambulance service. If an ambulance is unnecessary, the Watch Commander shall provide a state vehicle for transportation.
- (D) The CDC 7252 shall accompany the patient to the receiving facility.
- (E) The RN or designee shall notify the receiving facility of the impending transfer.

**References**

- California Code of Regulations, Title 15, Division 3, Chapter 2, Subchapter 2, Article 2, Section 3999.210
- Health Care Department Operations Manual, Chapter 3, Article 3, Section 3.3.5.6, Patient's Right to Refuse Treatment
- Health Care Department Operations Manual, Chapter 3, Article 3, Section 3.3.6.1, Health Records Organization and Maintenance

**Revision History**

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