

The Kinder Garden



Dental Accidents Policy

Aim

Our service aims to facilitate the prevention and management of dental trauma in children and provide training for staff in dental first aid in consultation with public health dentists. The training will include, training staff to be able to identify the difference between deciduous (baby teeth) and permanent teeth, and to be skilled in dealing with a dental emergency and applying first aid for a dental injury.

Legislative Requirements

Education and Care Services National Law Act 2010
Education and Care Services National Regulations 2011
Work Health and Safety Act 2011
Work Health and Safety Regulations 2011

Who is affected by this policy?

Children
Parents
Staff
Management
Families

Implementation

Aid for a knocked out or chipped tooth in a younger child if as follows:

- If a child has a dental injury where the tooth is chipped or the whole tooth is knocked out: Manage as an emergency, inform the parents/family and complete an injury report form.
- Do not reinsert the tooth back into the socket (avulsed deciduous teeth are not usually placed back-as they may fuse to the socket and can damage permanent teeth).
- Briefly and gently rinse the tooth or tooth fragments in clean milk or clean water to remove blood and place in a clean container or wrap in cling wrap to give to the parent or dentist.
- Seek dental advice as soon as possible and ensure staff or the parent takes the tooth/tooth fragments to the dentist with the child.
- First Aid for a knocked out or chipped permanent tooth in an older child or adult
Manage as an emergency, inform the parents/family and complete an injury report form.
- Gently rinse the tooth fragments in clean milk or clean water for a few seconds to remove excess dirt and blood.
- Handle the tooth by its crown (the white enamel top part of the tooth), not its root and be careful not to rub off the endothelial fragments on the root of the tooth as these are needed for the tooth to take if replaced by the dentist.
- In an adult or older child who can be relied on not to swallow their tooth, it is preferable to replace the tooth back into the socket. (Be certain that the tooth is placed into the socket the correct way round, in its original position, using the other teeth next to it as a guide).
- Hold the tooth in place by gently biting on a clean handkerchief or gauze pad.
- If unable to reinsert the tooth, get the casualty to hold the tooth inside the mouth next to the cheek or place the tooth in clean milk, sterile saline, or clean water. Place a firm pad of gauze over the socket and have the casualty bite gently on the gauze.

- Seek dental advice as soon as possible and ensure you or the family takes the child to the dentist with the tooth/tooth fragments within 30 minutes, as the root endothelial layer begins to deteriorate after 30 minutes.
- If the tooth has been in contact with dirt or soil, advise the family that tetanus prophylaxis may be required and advise them to consult with both their dentist and doctor.

The Approved Provider/Nominated Supervisor will ensure that this policy is maintained and implemented at all times.

Sources

Australian Dental Association FAQ's www.ada.org.au Retrieved 20th February 2017
Raising Children Network <http://raisingchildren.net.au> Retrieved 20th February 2017
Education and Care Services National Law Act 2010
Education and Care Services National Regulations 2011
www.betterhealth.vic.gov.au
Australian Dental Association (Victorian Branch) Dental Emergencies
Dept of Human Services (Public Health Division)
Kids Health Children's Hospital Westmead www.kidshealth.chw.edu.au

Review

The policy will be reviewed annually. Review will be conducted by management, employees, parents and any interested parties.

Reviewed: February 2018

Date for next review: February 2019