

Care and Treatment Plan: Dental Abscess – Adult

Definition

Infection of the soft tissue surrounding a tooth or gum.

Registered Nurses with **Remote Nursing** and **RN First Call** Certified Practice designation (RN(C)) are authorized to manage, diagnose, and treat adults with dental abscess.

Management and Intervention

Goals of Treatment

- Relieve symptoms
- Prevent spread of infection

Non-pharmacologic Interventions

- Warm saline rinses (1 tsp in 1 cup of warm water) QID
- Ice pack wrapped in a towel against the cheek to reduce pain and swelling

Pharmacologic Interventions

- Analgesics for mild to moderate pain:
 - Acetaminophen 325mg, 1-2 tabs PO q4-6h PRN, *or*
 - Ibuprofen 200mg, 1-2 tabs PO q4-6h PRN
- Oral antibiotic therapy:
 - Penicillin VK 300mg, 1-2 PO QID for 7 days
 - Amoxicillin 500mg, PO BID or TID for 5 days
- For clients with penicillin allergy:
 - Clindamycin 150-300mg, PO QID for 7 days

Note: Clindamycin can cause pseudomembranous colitis with diarrhea, severe abdominal cramps, and blood or mucous in the stool. Do not use if there is a history of gastrointestinal disease. Clients must be advised to seek medical attention immediately if they experience persistent diarrhea, stomach pain or cramping, or notice blood or mucous in the stool during and following treatment with clindamycin.

Pregnant or Breastfeeding Women

- Acetaminophen, Penicillin VK and Clindamycin may be used as listed above
- Do not use Ibuprofen

Potential Complications

- Cellulitis
- Recurrent abscess formation
- Systemic infection
- Osteomyelitis
- Sepsis

Client Education/Discharge Information

- Counsel client about appropriate use of medications (dosage and side effects)
- Recommend dietary modifications as indicated – limit consumption of sugary drinks

- Recommend dental hygiene or improvement to dental hygiene
- Make dental appointment

Consultation and/or Referral

- Consult a physician or nurse practitioner if a large fluctuant abscess is present
- Refer if client is acutely ill, if the infection has spread to the soft tissues of the neck, or if there is no response in 48-72 hours
- Refer immediately if facial swelling beyond midline or client has intractable pain
- Refer to a dentist for definitive therapy

Monitoring and Follow-up

- Follow up in 48-72 hours

Documentation

As per agency policy.

References

More recent editions of any of the items in the References List may have been published since this DST was published. If you have a newer version, please use it.

Aaron K, Cooper TE, Warner L, Burton MJ. Ear drops for the removal of ear wax. Cochrane ENT Group, ed. Cochrane Database of Systematic Reviews. July 2018. doi:10.1002/14651858.CD012171.pub2

[Acute otitis media: Update on diagnosis and treatment.](#) (2013). *Consultant*, 53(5), 352-353.

Alberta Medical Association. (2008). [Guideline for the diagnosis and management of acute otitis media.](#) *Toward Optimized Practice.* Edmonton, AB: TOP Alberta Doctors.

American Academy of Pediatrics. (2013). [Clinical practice guideline: The diagnosis and management of acute otitis media.](#) *Pediatrics*, 131(3), e964-e999.

Anti-Infective Review Panel. (2012). *Anti-infective guidelines for community-acquired infections.* Toronto, ON: MUMS Guideline Clearinghouse.

Ball, J. W., Dains, J. E., Flynn, J. A., Solomon, B. S., & Stewart, R. W. (Eds.). (2015). *Seidel's guide to physical examination* (8th ed.). St. Louis, MO: Elsevier.

Blondel-Hill, E., & Fryters, S. (2012). *Bugs and drugs: An antimicrobial infectious diseases reference.* Edmonton, AB: Alberta Health Services.

Canadian Dental Association. [Antimicrobial treatment options in the management of odontogenic infections.](#)

Canadian Pharmacists Association. (2014). *Therapeutic choices* (7th ed.). Ottawa, ON: Author.

Canadian Pharmacists Association. (2014). *Therapeutic choices for minor ailments.* Ottawa, ON: Author.

Cash, J. C., & Glass, C. A. (Eds.). (2014). *Family practice guidelines* (3rd ed.). New York, NY: Springer.

Carillo-Marquez, M. A. (2015). [Bacterial pharyngitis.](#)

Carter, S., & Laird, C. (2005). [10 assessment and care of ENT problems.](#) *Emergency Medicine Journal*, 22, 128-139. doi: 10.1136/emj.2004.021642.

Cash, J. C., & Glass, C. A. (Eds.). (2014). *Family practice guidelines* (3rd ed.). New York, NY: Springer.

[Centers for Disease Control and Prevention.](#) (CDC). (2017). [Candida infections of the mouth, throat, and esophagus.](#) CDC.

Chan, P. D., & Johnson, M. T. (2010). *Treatment guidelines for medicine and primary care.* Blue Jay, CA: Current Clinical Strategies Publishing

Chen, Y. A., & Tran, C. (Eds.). (2011). *The Toronto notes 2011: Comprehensive medical reference and review for the Medical Council of Canada Qualifying Exam Part 1 and the United States Medical Licensing Exam Step 2* (27th ed.). Toronto, ON: Toronto Notes for Medical Students.

Chow, A.W. (2016). [Complications, diagnosis, and treatment of odontogenic infections.](#) UpToDate.

Chow, A. W. (2015). [Epidemiology, pathogenesis, and clinical manifestations of odontogenic infections.](#) *UpToDate*

- Dains, J. E., Baumann, L. C., & Scheibel, P. (2012). *Advanced health assessment and clinical diagnosis in primary care* (4th ed.). St. Louis, MO: Elsevier Mosby.
- DynaMed. (2015, March 31). [Acute apical dental abscess](#).
- DynaMed. (2015, August 17). [Acute otitis media \(AOM\)](#).
- DynaMed. (2016, March 25). [Antibiotics for streptococcal pharyngitis](#).
- DynaMed. (2016, March 25). [Streptococcal pharyngitis](#).
- DynaMed. (2016, March 25). [Pharyngitis](#).
- Estes, M. E. Z. (2014). *Health assessment and physical examination* (5th ed.). Clifton Park, NY: Cengage Learning.
- Gore, J. M. (2013). Acute pharyngitis. *JAAPA: Journal of the American Academy of Physician Assistants*, 26(2), 57-58.
- Gould, J. M. (2015, April 22). [Dental abscess](#).
- Gregoire, C. (2010). [How are odontogenic infections best managed?](#) *Journal of the Canadian Dental Association*.76 (a37).
- Guidelines and Protocols Advisory Committee. (2010). [Otitis media: Acute otitis media \(AOM\) and otitis media with effusion \(OME\)](#)
- Harmes, K. M., Blackwood, R. A., Burrows, H. L., Cooke, J. M., Harrison, R., & Passamani, P. P. (2013). Otitis media: Diagnosis and treatment. *American Family Physician*, 88(7), 435-440.
- Hersh, A. L., Jackson, M., & Hicks, L. A. (2013). [Principles of judicious antibiotic prescribing for upper respiratory tract infections in pediatrics](#). *Pediatrics*, 132(6), 1146-1154.
- Hirst, S., & Neill, S. (2013). [Treatment of acute otitis media in childhood](#). *Practice Nursing*, 24(8), 407-410
- Jensen, B., & Regier, L. D. (Eds). (2014). *RxFiles: Drug comparison charts* (10th ed.). Saskatoon, SK: RxFiles
- Lieberthal, A.S. et al., American Academy of Pediatrics. (2013). [Clinical practice guideline: The diagnosis and management of acute otitis media](#). *Pediatrics*, 131(3), e964-e999.
- Limb, C. J., Lustig, L. R., & Klein, J. O. (2014). [Acute otitis media in adults \(suppurative and serous\)](#). *UptoDate*.
- McCarter, D. F., Courtney, U., & Pollart, S. M. (2007). [Cerumen impaction](#). *American Family Physician*, 75(10), 1523-1528.
- McWilliams, C. J., & Goldman, R. D. (2011). [Update on acute otitis media in children younger than 2 years of age](#). *Canadian Family Physician*, 57(11), 1283-1285.
- Michaudet C, Malaty J. [Cerumen impaction: diagnosis and management](#). *American Family Physician*. 2018;98(8):7.
- National Institute for Health and Clinical Excellence (NICE). (2008, July). [Respiratory tract infections – antibiotic prescribing: Prescribing of antibiotics for self-limiting respiratory tract infections in adults and children in primary care](#). Manchester, UK: Author.
- Peng, L. F. (2015, February 27). [Dental infections in emergency medicine](#).
- Porter, R. S., & Kaplan, J. L. (2011). Section 5: Ear, nose, throat and dental disorders. In *The Merck Manual* (19th ed.), (p. 411-534). Whitehouse Station, NJ: Merck Sharp & Dohme Corp.

- Ramakrishnan, K., Sparks, R. A., & Berryhill, W. E. (2007). [Diagnosis and treatment of otitis media](#). *American Family Physician*, 76(11), 1650-1658.
- Sawyer, S. S. (2014). *Pediatric physical examination and health assessment*. Sudbury, MA: Jones & Bartlett Learning
- Schwartz SR, Magit AE, Rosenfeld RM, et al. Cerumen impaction: an updated guideline from the AAO-HNSF. *Otolaryngol Head Neck Surg*. 2017;156(1_suppl):S1-S29. doi:10.1177/0194599816671491
- Stephen, T. C., Skillen, D. L., Day, R. A., & Bickley L. S. (2010). *Canadian Bates' guide to health assessment for nurses*. Philadelphia, PA: Lippincott, Williams & Wilkins.
- Shepherd, A. B. (2013). Assessment and management of acute sore throat. *Nurse Prescribing*, 11(11), 549-553.
- Shulman, S.T., Bisno, A.L., Clegg, H.W., Gerber, M.A., Kaplan, E.L., Lee, G.,...Van Beneden, C. (2012). [Clinical practice guideline for the diagnosis and management of group A streptococcal pharyngitis: 2012 update by the Infectious Diseases Society of America](#). *Clinical Infectious Diseases*. 55(10), e86-e102.
- Substance Abuse and Mental Health Services Administration (SAMHSA). 2017. [Alcohol, Tobacco, and Other Drugs](#).
- University of Michigan Health System. (2013, May). [Pharyngitis. Guidelines for clinical care: Ambulatory](#) (Rev.). Ann Arbor, MI: Author.
- Venekamp, R. P., Sanders, S. L., Glasziou, P. P., Del Mar, C. B., Rovers, M. M. (2015). [Antibiotics for acute otitis media in children](#). *The Cochrane Database of Systematic Reviews*, (6). Doi: 10.1002/14651858.CD000219.pub4.