

Prescribing an Opioid?

- ✓ Review KASPER for preceding 12 months
- ✓ Document medical history and physical exam of the oral or maxillofacial area
- ✓ Develop a written treatment plan
- ✓ Discuss risks and benefits with patient
- ✓ Obtain patient's signed consent for treatment
- ✓ Limit prescription to a 3-day supply
OR
Document lack of alternatives and sign attestation with patient
- ✓ Send electronic prescription to preferred pharmacy

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Dental Pain Management



Effective Communication

Take your time

Be honest

Set realistic expectations

Explain the pain

Have a plan

Use reflective listening

Ask questions

Use teach-back

Stay professional

Be empathetic to fear & anxiety

Avoid confrontation

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Anticipated Pain by Procedure

Recommendation by Pain Severity

Anticipated Pain by Procedure		Recommendation by Pain Severity
Frenectomy Gingivectomy Routine endodontics Scaling/root planing Simple extraction Subgingival restorative procedures	MILD	Ibuprofen every 4 to 6 hours as needed Ibuprofen every 6 hours for 24 hours, then Ibuprofen every 4 to 6 hours as needed
Implant surgery Quadrant periodontal flap surgery w/bony recontouring Surgical endodontics Surgical extraction	MODERATE	Ibuprofen + Acetaminophen every 6 hours for 24 hours, then Ibuprofen + Acetaminophen every 6 hours as needed
Complex implant Partial or full bony impaction surgery Periodontal surgery	SEVERE	Ibuprofen + Acetaminophen every 6 hours + Hydrocodone w/Acetaminophen every 6 hours as needed for 24 to 48 hours, then Ibuprofen + Acetaminophen every 6 hours as needed

Dosing Recommendations for Adults and Adolescents:

Ibuprofen 200 to 600 mg = 1 to 3 OTC tablets (depending on pain severity)

Acetaminophen 500 mg = 1 OTC extra strength tablet (for all pain severities)

Hydrocodone 5 mg w/Acetaminophen 325 mg = 1 Rx Hydrocodone-APAP 5-325 mg tablet (for severe pain only)