



Royal College of
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Ensuring Continued Trust

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Information about Medical Emergency Preparedness for Dentists



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Information about Medical Emergency Preparedness for Dentists



Are there courses to assist dentists in preparing for a medical emergency in the dental office?

The College has approved multiple Category 1 courses on medical emergency preparedness by various presenters. You can find the complete list of approved Category 1 courses on the College's website.

http://www.rcdso.org/Assets/DOCUMENTS/Quality_Assurance/Continuing_Education/RCDSO_CE_Category_1_Core_Courses.pdf

Is CPR training mandatory?

It is the College's expectation that all Ontario dentists and their support staff are prepared to deal with medical emergencies when they arise. This means that dentists and all clinical staff must have the training and ability to perform basic cardiac life support techniques. The College strongly recommends that all dentists maintain current BLS certification (CPR Level HCP).

All dentists providing sedation and/or general anesthesia **must** maintain current BLS certification (CPR Level HCP) **as a minimum**.

Where can I get a CPR course to recertify?

CPR courses are offered across the province by numerous providers, including the Canadian Red Cross, Heart and Stroke Foundation, St. John Ambulance and others.

What is the recertification period?

The frequency of recertification is determined by the course provider and ranges from annually to every three years.

What emergency drugs are required?

There are six basic drugs that should be included in the emergency kit of every dental office: oxygen, epinephrine, nitroglycerin, diphenhydramine or chlorpheniramine, salbutamol inhalation aerosol, and ASA.

The emergency drugs should have current dates and be stored in a readily identifiable and organized fashion (e.g. labelled trays or bags).

The following table presents the six basic drugs and their recommended dosages.

DRUG	INDICATION	INITIAL ADULT DOSE	RECOMMENDED CHILD DOSE
Oxygen	Most medical emergencies	100% inhalation	100% inhalation
Epinephrine	Anaphylaxis	0.3-0.5 mg i.m.* or 0.01-0.1 mg i.v.	0.01 mg/kg
	Asthmatic bronchospasm which is unresponsive to salbutamol	0.3-0.5 mg i.m.* or 0.01-0.1 mg i.v.	0.01mg/kg
	Cardiac arrest	1 mg i.v.	0.01mg/kg
Nitroglycerin	Angina pectoris	0.3 or 0.4 mg sublingual	No paediatric dose
Diphenhydramine or chlorpheniramine	Allergic reactions	50 mg i.m.* or i.v. 10 mg i.m.* or i.v.	1 mg/kg
Salbutamol inhalation aerosol	Asthmatic bronchospasm	2 puffs (100 micrograms/puff)	1 puff
ASA	Acute Myocardial Infarction	160 or 325 mg	Not indicated

**The dose suggested for the i.m. route is also appropriate for sublingual injections. Total paediatric dose should not exceed the adult dose.*

What size of oxygen tank is recommended by the College?

The College strongly recommends an E-size cylinder.

All dentists providing sedation and/or general anesthesia are **required** to have an E-size cylinder.

Ref: Standard of Practice on the Use of Sedation and General Anesthesia in Dental Practice.

Are there any additional emergency drugs recommended by the College?

The College also recommends that some type of quick source of glucose be available.

All dentists providing sedation and/or general anesthesia are required to have additional emergency drugs and equipment, depending on the modality administered.

Is there anything else I should do to be prepared?

The College recommends that a written emergency protocol is in place in the office. All dental office staff should be aware of this protocol and the procedures to follow when a medical emergency arises. This protocol should be periodically reviewed at staff meetings so everyone is clear about who does what when a medical emergency occurs.