

JUVENILE COURT HEALTH SERVICES DENTAL PROCEDURES

Subject: INCOMPLETE ROOT CANAL TREATMENT		Original Issue Date:	Procedure # 013
		Supersedes:	Effective Date: 1/23/13
Departments Consulted:	Approved By: (Signature on File) Head Dentist (Signature on File) Medical Director	Approved by: (Signature on File) Health Services Administrator	

PURPOSE

To ensure continuity of care of root canals treatment that has started. Once root canal treatment is initiated, it must be followed through to completion, or the patient is released to follow-up treatment by his/her private dentist.

PROCEDURE:

1. Root canal treatment procedure will not be started unless youth stays in the Juvenile Hall facility.
2. The procedure and date of initiating treatment is documented in PEMRS PowerChart.
3. The dentist that initiated the root canal treatment will continue until its completion.
4. Transfer of root canal treatments to another staff dentist must be approved by the Dental Supervisor or his/her designee.
5. If a root canal patient is released from the Probation Department's system with incomplete treatment, a letter must be sent to the last home address of the patient, indicating that the patient has undergone a root canal which is unfinished. The work must be completed by a private dentist. (See Attachment).
6. The dentist will submit a completed notification letter to Health Information Management (HIM) department to mail to the youth or parent / guardian.
7. A copy of the letter is scanned in PEMRS PowerChart under Clinical Note-Dental for record.

REFERENCE

JCHS Policy # C-304, "Oral Care"