JUVENILE COURT HEALTH SERVICES DENTAL PROCEDURES

Subject: **LAC/USC ORAL-MAXILLOFACIAL SURGERY (OMF) REFERRAL**	Original Issue Date:	Procedure # **032**
	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 that youths have proper oral surgery referral by the process of attaining youth's parent or legal guardian's contact information through a given written consent form or Probation Department. It is necessary that the OMF surgeon provides informed consent (verbally) for the required treatment to the parent or legal guardian before the treatment proceeds.

PROCEDURE:

JCHS Dental

1. When a youth is diagnosed with a dental condition requiring evaluation or treatment beyond the scope of JCHS services, an OMF consultation must be verbally offered to the youth and the youth must agree to receive the recommended consultation or treatment
2. The youth's name, PDJ number, DOB and Type of Treatment are documented on the OMF Referral Informed Consent Procedure Log by the attending dentist
3. Dentist or dental assistant provides a consent form indicating procedure description to the youths that are under age of 18 to be signed by parents or guardians and a reachable phone number. 18 year-old or older youths can consent themselves at the OMF clinic on the appointment date. If a youth cannot obtain parental written consent, parent contact number can be given verbally during the visit only when it is urgent.
4. After the dentist has made an initial confirmation with the youth's parent or legal guardian regarding the treatment plan, a dental assistant (or dentist, if DA is not available) will call LAC+USC OMF clinic to make an appointment for the youth. OMF staff will provide a next available date and time for the appointment. The Dental staff (dentist or DA) will document the appointment date on the <u>OMF Referral Informed Consent Procedure Log.</u>
5. The attending dentist will complete the OMF Consultation Request and CJH Medical Appointment Team scheduling using the Probation Electronic Medical Record System (PEMRS).
6. Youths that are not in detention at CJH including camps and other halls will be transferred to CJH one day before the OMF appointment. Compound / Unfit youths will be transported by Sheriff Department from BJNJH directly to OMF clinic and return to BJNJH after the treatment or consultation is completed or transferred to CJH MAT on the same day of the appointment. Transportation process may be vary from each hall.
7. Youth will be transported to the OMF appointment with the referral sheet which includes name and phone number for the parent or legal guardian. This information will be used

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by the OMF surgeon to obtain informed consent at the time of the appointment. Youth will be dismissed by OMF without treatment provided if the parent or legal guardian cannot be reached for informed consent. Dental staff will be notified by Probation regarding the issue. Youth can be rescheduled for OMF appointment when parent verbally consent for the treatment referral.

8. If the parent / legal guardian cannot be contacted or the youth is a ward of court, the attending dentist can submit a <u>Request for Court Consent for Dental Surgery</u> letter to request court consent. If a court consent is obtained, it will be sent with the youth to the OMF appointment.

<u>Probation</u>

Youths with OMF appointment will escort by Central Juvenile Hall (CJH) Medical Appointment Team (MAT) to the designated appointment site LAC-USC Medical Center Out-patient Tower A3C.

<u>OMF</u>

LAC-USC OMF appointment: (323)409-5013

<u>REFERENCES:</u>

JCHS Policy # C-112, "Informed Consent
    JCHS Policy # C-304, "Oral Care"

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