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The collapsed child protocol

Duraphat®, when applied at the correct dose, is not normally associated with any adverse reactions.

Every child in the programme will have been asked about asthma and history of allergies.

In addition, children in Childsmile Practice will have had their medical history taken and updated at each appointment. Children who have severe asthma or allergies, categorised by a previous hospital admission for either asthma or allergies, will initially be excluded from Duraphat® application in the Nursery and School Programme and be referred to a dental practice for a full assessment.

Dental Health Support Workers (DHSWs) and Extended Duty Dental Nurses (EDDNs) are required to undertake Basic Life Support Training in their local area.

In the unlikely event of an adverse reaction, the protocol for dealing with a child who collapses whilst undergoing treatment is:

- stop the procedure immediately and summon help from the rest of the dental team and/or class teacher
- send someone to call 999 and note the time
- remove all equipment from the vicinity of the child
- put the child in the recovery position, ensuring that the chin is elevated
- make sure a member of the team keeps all the other children safe and away from the incident.

In nurseries and schools

It is possible that a child may, for reasons not associated with the Fluoride Varnish, collapse while the dental teams are in the nursery or school. It is hoped that children with a medical history consistent with collapse are flagged up through the medical history form in Childsmile Practice or by the nursery or school teacher.

As the dental teams are visitors in nurseries and schools, it is reasonable to expect that the nursery or school will have their own protocols for dealing with such a situation. It is important that, in the extremely unlikely event of a collapse, the teachers in the classroom and the dental team work together.

In dental practices

Each dental practice will have its own protocol for collapse and employees of the practice should be trained to follow this.

When a trained assistant is not available

In January 2006 the General Dental Council (GDC) published <u>Principles of Dental Team Working[https://standards.gdc-</u>

uk.org/Assets/pdf/Standards%20for%20the%20Dental%20Team.pdf] [PDF 314kB] (external link) which states in paragraph 3.7 and 3.8:

When treating patients, make sure there is someone else – preferably a registered team member – present in the room, who is trained to deal with medical emergencies.

'There may be circumstances in which it is not possible for a trained person to be present - for example, if you are treating a patient in an out-of-hours emergency or on a home visit. If this is the case, you are responsible for assessing the possible risk to the patient of continuing with treatment in the absence of a trained person.'

In a Childsmile Practice, while it is important that this GDC standard is followed for EDDNs, it is accepted that there is not always an assistant available.

On the occasions when an assistant is not available, the EDDN is responsible for assessing the possible risk to the patient of continuing with the Childsmile session in the absence of a trained person.

They should also ensure that the GDC principles are met, namely that:

- at least two people are always available to deal with medical emergencies when treatment is planned to take place
- all members of staff (not just the registered team members) know their role if a patient collapses or there is another kind of dental emergency
- all members of staff who might be involved in dealing with a medical emergency are trained and prepared to deal with such an emergency at any time, and practice together regularly in a simulated emergency so that they know exactly what to do.

If the decision is to proceed, an 'open door' policy should be adopted. This should be carried out as follows:

- the EDDN should inform the receptionist that they are seeing a Childsmile patient and family member, and let them know which room will be used. This room should be within calling distance of another staff member at all times
- the door should be kept open at all times when the family is with the EDDN.
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