



Department: Dental Number: HHS-5102 D

Attachment: _____

Policy: Oral Surgery

Date: October 1995 Revised: July 2001, July 2007, 12/12

Approved by:  Date: 9/26/13

Policy Statement:

The Ne-Ia-Shing Dental Clinic will provide oral surgery services for patients based on degree of difficulty and available service of each individual provider.

Purpose:

To remove non-restorable or diseased teeth in order to relieve the patient of pain and infection.

Procedure:

1. The necessary radiographs are taken.
2. The patient is informed of all benefits, alternatives and risks.
3. The patient then consents to the treatment, and signs consent form.
4. Extraction procedures are then performed.
5. The patient is given both verbal and written post-surgical instructions.

Additional notes: Due to strict OSHA regulation and for infection control purposes, teeth that are removed can no longer be taken home by the patient. Extracted teeth are immediately discarded as biohazard.