

Extended NYUCD Emergency Care Services – Effective July 1, 2008

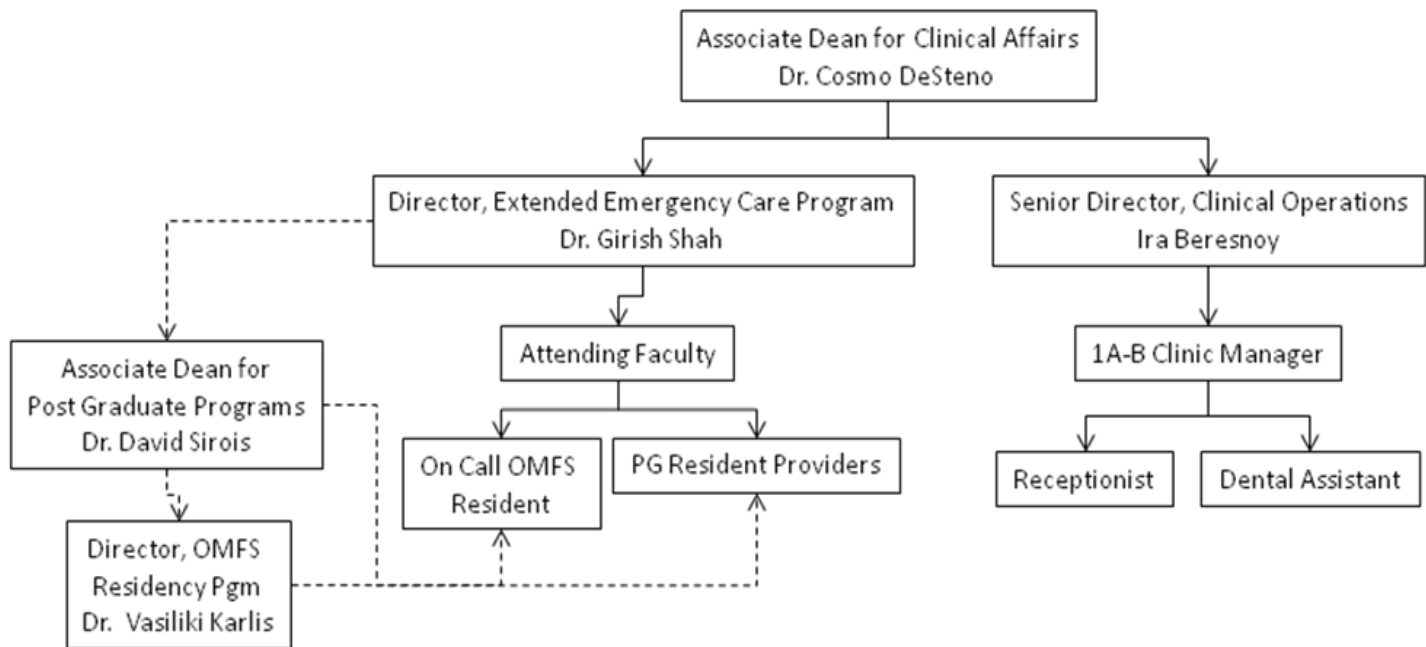
Urgent and emergent dental care is provided 24 hours/day, 7 days per week at the NYUCD through a variety of programs that engage both pre-doctoral and post-doctoral students. Weekday and evening services during normal operating periods are provided through the Emergency Care Clinic under the supervision of the Department of Oral and Maxillofacial Pathology, Medicine and Radiology with dental students assigned as the provider group under faculty attending supervision.

Extended emergency care services are provided from 9:00a.m.-5:00p.m. on weekends and during periods when the College clinical programs are suspended. Individuals and programs contributing to extended emergency care services are accountable to the Director of Extended Emergency Services under the supervision of the office of Clinical Affairs. Care is delivered by **post-graduate residents** in the various College programs, under the direct supervision of on-site Attending faculty. On average, each resident in the PGY1 and PGY2 year will be assigned a weekend day of call 2-3 times per year.

All after hours walk-in or call-in emergencies are triaged by the Security desk (x8-9828) with referral to Bellevue Hospital emergency room for serious urgent problems such as severe pain, swelling, infection, trauma. Care after hours is provided by on-call OMFS residents and is limited to serious orofacial / dental emergencies.

The organizational chart below summarizes the relationships between the various individuals with respect to extended emergency services.

See specific details regarding the extended care program beginning on page 3.



CONTACT INFORMATION:

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Extended Care Program on WEEKENDS and DURING NYUCD CLINIC CLOSURES

The table below summarizes the Extended Care Program, described in detail in the following sections.

EMERGENCY COVERAGE DURING NON-REGULAR HOURS		
	Weekends	Holidays
9:00a.m. – 5:00 p.m.	2 PG Residents assigned July-August 2008; 4 PG Residents assigned beginning September 2008; 1 On-site Attending Faculty 1 Dental Assistant 1 Receptionist	No in-house emergency coverage - patients are referred to Bellevue Hospital for serious urgent problems such as pain, swelling, infection, trauma.
After 5:00 p.m.	Security refers patients to Bellevue Hospital for serious urgent problems such as pain, swelling, infection, trauma	

Effective September 1, 2008:

Emergency care by 4 PGs, 1 on-site faculty, 1 dental assistant and 1 receptionist in Clinic 1A

Hours of operation: 9:00-5:00.

All personnel are to arrive by 8:45 so we are ready for patient care by 9:00. All care should be completed by 5:00, requiring cut off of admission for care at a time before 5:00 to allow completion of all care – the attending faculty will make the cut off time determination as needed.

Clinical Affairs Staff: to be determined

- 1 Dental Assistant
- 1 Receptionist

Faculty Attending on-site cover:

Arranged and managed by the Director of Extended Care Services (Dr. Girish Shah). Posted in advance. Confirmed weekly by email or telephone, with substitutions / back up managed by Director of Extended Care Services.

Post Graduate Resident assignments:

Arranged by the Office of the Associate Dean for Graduate Programs and distributed in advance. Once established, ALL changes in PG coverage must be approved / managed by the Director of Extended Care Services (Dr. Girish Shah).

On average, each resident in the PGY1 and PGY2 year will be assigned a weekend day of call 2-3 times per year.

On-call OMFS Resident:

The Director of the OMFS residency program will produce a monthly schedule of on-call resident with contact information to the Director of Extended Care Services (Dr. Girish Shah) who be sure this is posted in the Clinic Area. OMFS residents are expected to respond by telephone to inquiry within 15 minutes, and determine the need / time to arrive for hands-on assistance.

NYUCD Security Desk: 212-998-9828 After hours inquires

Triage and direct referral to Bellevue Hospital Emergency Service instructing patient to clearly identify himself or herself as a Dental College patient of record (for reduced Emergency Room fee); non patients of record will not be eligible for reduced fee. For serious urgent problems such as severe pain, swelling, infection, and trauma.

OFFICIAL NYUCD HOLIDAYS:

No in-house emergency coverage is provided on official holidays and on those occasions when an extra day is bounded by the holiday period (i.e. day after thanksgiving). Patients are referred to Bellevue Hospital for serious urgent problems such as severe pain, swelling, infection, and trauma.

The list of official holidays which may, based upon the College annual calendar, include adjacent weekdays.

1. Independence Day
2. Labor Day
3. Thanksgiving
4. Day after Thanksgiving
5. Christmas Day
6. Day after Christmas
7. New Years Day
8. Martin Luther King, Jr Day
9. President's Day
10. Commencement
11. Memorial Day
12. Independence Day
13. Labor Day

WEEKEND COVERAGE ADJACENT TO HOLIDAYS AND COLLEGE CLOSURES:

(this includes Winter, Spring, August closures)

- Weekends WITHIN a holiday or closure period will NOT have on-site emergency care
- Weekends FOLLOWING a holiday or closure period will NOT have on-site emergency care
- Weekends PRECEDING a holiday or closure period WILL have on-site emergency care

Detailed dates will be reflected in the detailed schedule developed each year.

Scope of Emergency Services:

Pain – this may result from a variety of processes. It will always be the goal to eliminate or reduce pain through procedural (see below) or pharmacologic methods. When analgesic medication is necessary, generally speaking acute pain can adequately managed using OTC medications, non-controlled medications (NSAID, salicylate) or those limited to Schedule III. On-site attending faculty will authenticate prescriptions according to NYUCD prescription SOP.

Infection – definitive management of odontogenic and other oral infections can be achieved definitively through various procedures (see below) or pharmacologic means. On-site attending faculty will authenticate prescriptions according to NYUCD prescription SOP.

Serious Infection-Conditions which may place the patient at significant risk (serious infection, swelling which adversely affects, or could adversely affect, the airway; cellulitis in fascial planes that can result in spread to high-risk areas) require a call to the oral surgery resident on call. Oral surgery residents on call at Bellevue Hospital are always available for consultation by referral

Trauma – minor dentoalveolar trauma limited to stabilization, pulp therapy or removal of precarious tooth fragments can be easily managed in an ambulatory setting. Simple, non-esthetic soft tissue trauma can be managed by debridement, irrigation and primary closure where appropriate. More complex dentoalveolar, and all forms of fracture involving the maxilla or mandible, should be referred to OMFS for evaluation and care.

Restorative / Prosthetic Problems – the loss of non-esthetic restorations can be easily managed by replacement with a definitive or interim restoration followed by instructions for continued care. Loss of esthetic restorations (anterior teeth) can often be addressed on a limited basis; patients should be advised of any need for continued care: this especially applies to patient with debonded, fractured or lost laminates. Broken or loose fixed or removable prostheses can present a challenge in terms of the responsibility and liability of the dentist when s/he did not fabricate the original prosthesis; treatment of these conditions should be made after careful consideration of the benefits and risks with full disclosure to the patient. This includes repair or refabrication of multiple unit tooth or implant borne temporaries. If one chooses to repair a prostheses, the limitations of that repair, its prognosis and instructions for continued care should be clearly stated in the chart and signed by the patient BEFORE rendering treatment. A simple implant prosthetic kit is available to support urgent care requiring stabilization of a loose implant supported prosthesis.

Special note on exodontia – With a mixture of specialty residents, attending faculty, and on-call OMFS there exists a reasonable care and support team for providing simple exodontias and related (i.e. I&D) surgical services. The Attending faculty will make the determination of permissible surgery, based upon consideration of risk for complication; hi-risk procedures that are NOT essential should not be provided, and hi-risk procedures that ARE necessary should be considered in consultation with the OMFS resident on call.

SPECIAL NOTE ON SIGNS – SYMPTOMS of serious orofacial infection for which OMFS should be consulted:

1. Temperature over 101 degrees.
2. Systemic complications.
3. Difficulty breathing or speaking.
4. Difficulty swallowing
5. Serious hemorrhage
6. Cellulitis in fascial plane that can result in spread to hi-risk areas.
7. Trismus

Resident, Faculty and Staff Accountability

All personnel assigned to emergency coverage will be present for all assigned sessions, and will arrive on time (15 minutes before clinic opening).

Resident failure to attend scheduled sessions is considered a breach of academic and professional responsibility, and is subject to disciplinary action as described in the post-graduate handbook and program descriptions.

Residents may switch dates with a colleague, however it is the responsibility of the resident originally scheduled to ensure coverage. All changes must be approved by the Director of Extended Care, submitted in writing or by email and requiring reply from the Director regarding approval or disapproval.

There will be zero-tolerance for unexcused absence. Residents who cannot meet their assigned obligation due to events beyond their control must notify the Director of Extended Care prior to their scheduled sessions.

The penalty for missing call is as follows:

- Miss *one call*, the resident must then cover three times to make it up.
- Miss call a *second time* and the resident will be required to extend their program by 2 weeks beyond their program conclusion, AND will be assigned to cover three additional sessions.
- Miss call a *third time* and the resident will be subject to dismissal from the program subsequent to review by Council on Professionalism and Ethics.

Faculty will be present during emergency care and actively supervise care, teaching and supporting by demonstration whenever necessary. Any faculty who cannot report for their assigned date must contact the Director of Extended Care who will identify an alternate faculty to cover. Faculty who do not show, or who come late, may be removed from the faculty cover candidate pool.

Staff will arrive on time and stay until all clinical and administrative duties are complete. Any staff who cannot report for their assigned date must contact the Director of Extended Emergency Care Services who will identify an alternate staff to cover