Anesthesia

Clinic Floor

- Hygienist need to arrive by 5:45 am and be ready to work at 6:15 am.
- Hygienists will need to find a seat quickly.
- A brief training/orientation for the first ½ hour of each shift will be provided by the Lead.
- Please assure all equipment in your area is wiped down between patients and at the end of your shift. Please leave the disinfecting wipe on each item to show that a wipe down has been completed after your shift.
- Assure patient form is complete and includes all procedures for each patient. Use only BLUE ink.
- Assure all sharps and any bio-hazard material are deposited into bio hazard bags and containers. **Do not put other trash in bio hazard bags.**
- Assure all instruments are taken to Sterilization in a covered container. Please make sure no sharps are sent to Sterilization.
- Wear appropriate personal protection equipment either provided by NM MOM or their own equipment such as safety glasses, face masks, gloves and disposable gowns, where appropriate.

**Patient treatment and cleaning of area should be approximately 7 to 10 minutes per patient. Please attempt to see at least 36 patients per shift.**

Supplies

- A boat will be provided with the materials for each patient. These boats will be sitting in your department supply area.
- Other special items may be obtained in Central Supply or in your department supply area.

Instruments

- Syringes will be in Sterilization and should be returned regularly without sharps.

Process

The goal of the Anesthesia areas is to ready the patients for restorative/endo or oral surgery with the necessary local anesthesia for the procedures to be done. We will have an area of numbed patients waiting for treatment for each department. As a chair in this numbed area becomes available a Patient Escort will bring a new patient to Anesthesia for numbing. Anesthesia will be located in each department and report directly to the department Lead. Routing will identify the area to be numbed on each patient form.

1. Only **BLUE** pens should be used on patient charts – NO BLACK ink.
2. Review health history and medications.
3. Complete patient form:
   a. Circle medication
b. Define area of injection
c. Amount of medication giving in carpules
d. Time
e. Print your name next to By:

<table>
<thead>
<tr>
<th>ANESTHETIC: Lido = 2% Lidocaine 1:100,000 epi, Septo = 4% Articaine 1:100,000 epi, Mep = 3% Mepivicaine, Mar = 0.5% Bupivicaine 1:200,000 epi</th>
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The following anesthetic agents are available (unless supplies run out):

- Lido - Lidocaine 2% epi 1:100,000
- Septo - Articaine 4% epi 1:100,000
- Mep - Mepivicaine 3% no epi
- Mar - Bupivicaine 0.5% epi 1:200,000

Choose your anesthetic agents based on your best clinical judgment for the procedures to be done. It is recommended to avoid Articaine for IAN injections. Multiple extractions are best served by Bupivicaine because of the duration issue. (If timing goes well lidocaine would suffice and give better vasoconstriction)

We suggest for multiple maxillary teeth the use of block (PSA, MSA, IO) anesthesia administration rather than multiple infiltrations as this can minimize the amount of anesthetic used and therefore make the addition of more anesthetic less of an issue if anesthesia wears off due to delays before treatment begins.

Anesthesia for children will be administered by dentists in the Pedodontics Department.

PLEASE BE FLEXIBLE and THANK YOU for participating today.