TEXAS DENTAL PRESCRIPTION RESOURCE FACT SHEET



TEXAS PRESCRIPTION MONITORING PROGRAM

The Texas Prescription Monitoring Program (PMP) collects and monitors prescription data for all Schedule II, III, IV and V controlled substances dispensed by a pharmacy in Texas or to a Texas resident from a pharmacy located in another state. The PMP also provides a venue for monitoring patient prescription history for practitioners and the ordering of Schedule II Texas Official Prescription Forms.



BEST DRUGS FOR DENTAL PAIN

PAIN LEVEL	MILD	MILD TO MODERATE	MODERATE TO SEVERE	SEVERE
Recommended Pain Reliever	as ibuprofen (Advil, Motrin IB, & generic) or naproxen (Aleve and generic). Ibuprofen 200-400 mg as	does of an OTC product (as advised by dentist). Ibuprofen 400 to 600 mg fixed interval every 6 hours for 24 hours then	Ibuprofen 400 to 600 mg plus acetaminophen 500 mg fixed interval every 6 hours for 24 hours then Ibuprofen 400 mg plus	An NSAID & a prescription opioid for the first 24-48 hours. Ten stepping back to just an NSAID, or an NSAID combined with acetaminophen. Ibuprofen 400 to 600 mg plus acetaminophen 650 mg with hydrocodone 10 mg fixed interval every 6 hours for 24 to 48 hours then Ibuprofen 400 to 600 mg plus acetaminophen 500 mg as needed for pain every 6 hours
Important Cautions			acetaminophen tablets per day or a total 4000mg of	Never combine prescription opioids that conatin acetaminophen (Percocet, Tylenol #3, and Vicodin) with an OTC product that contains acetaminophen (Tylenol and many couch and cold drugs.) Doubling up on acetaminophen can damage the liver and can be fatal.

Moore PA, Hersh EV. Combining ibuprofen and acetaminophen for acute pain management after third-molar extractions: translating clinical research to dental practice. J Am Dent Assoc. 2013 Aug;144(8):898-908. doi: 10.14219/jada.archive.2013.0207. PMID: 23904576. https://bit.ly/3XYFC4R

ADA's Oral Analgesics for Acute Dental Pain, http://bit.ly/3srZg8G

WAYS DENTISTS CAN HELP WITH THE OPIOID CRISIS

- Dental professionals should limit opioid prescriptions for acute pain to no more tablets than are necessary.
- Examine patients before extending prescriptions.
- Dental professionals should be aware of opioid offerings in and out of your office, check prescription drug monitoring program data before writing an opioid prescription.
- Dental professionals should be ready to intervene when necessary. It's important to discuss your concerns with the patient. Dentists should also consider offering risk factor screenings.

Theresa Pablos, "ADA, CDC webinar summarizes dentists' role in opioid crisis." Dr. Bicuspid. Feb. 16, 2018 http://bit.ly/2Cs6uyQ.

Scott Murray, "4 Ways Dentists Can Help with the Opioid Crisis." MultiiBriefs: Exclusive. Nov. 30, 2017 http://bit.ly/2ABJYDw.



- NSAIDs have been shown to be more effective at reducing pain than opioid analgesics, and are therefore recommended as the first-line therapy for acute pain management.
- Experts recommend NSAIDs alone or with acetaminophen to manage short-term dental pain in adolescents, adults of all ages.
- Postoperative pain should be handled with a NSAID alone or in combination with acetaminophen.

Carrasco-Labra et al. "Evidence-based clinical practice guideline for the pharmacologic management of acute dental pain in adolescents, adults, and older adults." JADA. Feb. 5, 2024 https://bit.ly/4bz60IU.

22 Texas. Admin. Code § 170.3 (2020) http://bit.ly/2k1DpEj

ADA's Mouth Healthy - "Opioids" http://www.mouthhealthy.org/en/az-topics/o/opioids

ADA's Policy Statement on the use of Opioid Treatment for Dental Pain https://bit.ly/3JUc82a

ADA's Practical Guide to Substance Use Disorders and Safe Prescribing, available for purchase on the ADA website https://bit.ly/3rnV8Lt

AMA's Encourage safe storage & disposal of all Rx medications https://bit.ly/3bCbbtx

CDC Releases UPDATED Clinical Practice Guideline for Prescribing Opioids for Pain https://bit.ly/3NLtKOZ

PRESCRIPTION/OPIOID RESOURCES



DentistryIQ, Opioid addiction: 4 ways dentists can help solve the national epidemic http://bit.ly/3gW5zRe

HHS Office for Civil Rights on How HIPAA Allows Doctors to Respond to the Opioid Crisis https://www.hhs.gov/sites/default/files/hipaa-opioid-crisis.pdf

Pew Charitable Trusts, Overview of Opioid Treatment Program Regulations by State https://bit.ly/44EKuOR

Prevention of Prescription Opioid Abuse - Journal of the American Dental Association http://bit.ly/2Cj61iL

Utilization of Texas Prescription Monitoring Program: A Texas Pain Society White Paper http://www.texaspain.org/assets/bestpractices13.pdf

ANTIBIOTIC STEWARDSHIP RESOURCE FACT SHEET

Improving antibiotic use in dental care will keep you healthy now, help prevent side effects, and help fight antimicrobial resistance. Antibiotic prophylaxis prior to dental procedures should be reserved for patients at high risk of post-treatment complications.



ADA TREATMENT RECOMMENDATIONS

American Dental Association (ADA) treatment guidelines state that antibiotics are not needed for the urgent management of most dental pain and intraoral swelling associated with pulpal and periapical infections in immunocompetent adult patients without additional comorbidities.

Dulpal/Darianical Candition	DCDT Immediately Available		DCDT Not Immediately Available	
Pulpal/Periapical Condition	Prescribe Antibiotics	Perform DCDT	Prescribe Antibiotics	Refer to DCDT
Symptomatic irreversible pulpitis with or without symptomatic apical periodontitis				
Pulp necrosis and symptomatic apical periodontitis				
Pulp necrosis and localized acute apical abscess without systemic involvement				
Pulp necrosis and localized acute apical abscess with systemic involvement				

Lockhart PB, et al., "Evidence-based clinical practice guideline on antibiotic use for the urgent management of pulpal- and periapical-related dental pain and intraoral swelling: A report from the American Dental Association, Nov. 2019. https://pubmed.ncbi.nlm.nih.gov/31668170/

7 WAYS DENTISTS CAN ACT AGAINST ANTIBIOTIC RESISTANCE

- 1. MAKE an accurate diagnosis.
- 2. When prescribing an antibiotic, CHOOSE the right drug for the right dose and duration.
- 3. SE narrow-spectrum antibiotics for simple infections and preser e broad-spectrum drugs for more complex infections.
- 4. AVOID prescribing antibiotics for viral infections.
- 5. For empiric treatment, REVISE treatment regimen based on patient progress and/or test results.
- 6. KNOW the side effects and drug interactions of an antibiotic before prescribing.
- 7. TEACH your patients about appropriate antibiotic use and emphasize the importance of taking antibiotics exactly as prescribed.
- "7 Ways Dentists Can Act Against Antibiotic Resistance." CDC https://bit.ly/3pJuuw9



ADA, Antibiotic Prophylaxis Prior to Dental Procedures https://bit.ly/3PSq0y3

ADA's Dental Drug Handbook, available for purchase on the ADA website https://bit.ly/3rn4IDZ

Antibiotics for Dental Pain and Swelling Guideline https://bit.ly/3rrwCcr

Antibiotic Use in Endodontic Infections https://bit.ly/3rpEEm8

Antibiotic Use in the United States Progrss and Opportunities, 2017 https://www.cdc.gov/antibiotic-use/stewardship-report/pdf/stewardship-report.pdf

ASTDD, Policy Statement: Promoting Antibiotic Stewardship in Dentistry https://bit.ly/3NI2AI5

ANTIBIOTIC STEWARDSHIP RESOURCES



CDC, Antibiotic Stewardship https://bit.ly/3XOTOxo

CDC, Antibiotic Use for a Safe Dental Visit

https://www.cdc.gov/antibiotic-use/pdfs/AU-Dental-Trifold-Brochure-P.pdf

CDC, Antimicrobial Resistance https://www.cdc.gov/drugresistance/index.html

CDC, Checklist for Antibiotic Prescribing in Dentistry https://bit.ly/308RL3Q

CDC, DENTISTS: BE ANTIBIOTICS AWARE Treating Patients with Dental Pain and Swelling

https://www.cdc.gov/antibiotic-use/pdfs/ADA-treatment-guidelines-508.pdf

JADA, Using antibiotic Wisely https://bit.ly/46LjgiH

