



American Dental Association Statement on Provision of Dental Treatment for Patients with Substance Use Disorders

1. Dentists are urged to be aware of each patient's substance use history, and to take this into consideration when planning treatment and prescribing medications.
2. Dentists are encouraged to be knowledgeable about substance use disorders — both active and in remission — in order to safely prescribe controlled substances and other medications to patients with these disorders.
3. Dentists should draw upon their professional judgment in advising patients who are heavy drinkers to cut back, or the users of illegal drugs to stop.
4. Dentists may want to be familiar with their community's treatment resources for patients with substance use disorders and be able to make referrals when indicated.
5. Dentists are encouraged to seek consultation with the patient's physician, when the patient has a history of alcoholism or other substance use disorder.
6. Dentists are urged to be current in their knowledge of pharmacology, including: content related to drugs of abuse; recognition of contraindications to the delivery of epinephrine-constraining local anesthetics; safe prescribing practice for patients with substance use disorders — both active in remission — and management of patient emergencies that may result from unforeseen drug interactions.
7. Dentists are obliged to protect patient confidentiality of substance abuse treatment information, in accordance with applicable state and federal law.

Stepwise Guidelines for Acute Pain Management

Mild pain

Ibuprofen 200-400 mg every 4-6 h: as needed for pain (p.r.n.)

Mild-to-moderate pain

Ibuprofen 400-600 mg every 6 h: fixed interval for 24 h. Then ibuprofen 400 mg q 4-6 h: p.r.n. pain

Moderate-to-severe pain

Ibuprofen 400-600 mg plus APAP 500 mg every 6 h: fixed interval for 24 h. Then ibuprofen 400 mg plus APAP 500 mg every 6 h p.r.n. pain

Severe pain

Ibuprofen 400-600 mg plus APAP 650 mg-hydrocodone 10 mg q 6 h: fixed interval for 24- 48 h. Then ibuprofen 400-600 mg plus APAP 500 mg q 6 h p.r.n. pain

Additional considerations

Patients should be cautioned to avoid APAP in other medications. Maximum dose for APAP (Tylenol) is 3000 mg/day. To avoid potential APAP toxicity, dentists should consider prescribing a rescue medication containing ibuprofen (Vicoprofen) if patients experience breakthrough pain.

Maximum dose of ibuprofen is 2400 mg/day. Higher maximal daily doses have been reported for osteoarthritis when prescribed under the direction of a physician.