Case Presentation

Factors to keep in Mind When Seeking a Medical Recommendation



CC: "I want this my tooth out"

HPI:

Pt is a 53 y/o F present to OS for extraction. Pt reports that the <u>tooth (#3) has been painful since 2006</u> with concomitant active drainage that comes and goes. Pt was evaluated by a general dentist who gave her the option to restore the tooth, but due to financial reasons, pt decided to extract. Pt reports pain on palpation and percussion as well as sensitivity to cold. Pt states the pain is throbbing, sharp, and radiated to the ear. The patient states she does not take medications for pain.

Medical History:

- 1. Hypertension.
- 2. Autoimmune blood clotting disorder.
- 3. 3-4 <u>TIAs</u> She was admitted to the hospital for two days in Nov. 2023. (First TIA Dec. 2022)
- 4. DVT (right arm)
- 5. Hashimoto's
- 6. Sjögren's syndrome.
- 7. Rheumatoid Arthritis.
- 8. Anxiety
- 9. Depression.
- 10. Migraines (Marijuana)
- 11. Fibromyalgia.

Medications:

- 1. Synthroid.
- 2. Alprazolam.
- 3. Effexor.
- 4. Amlodipine.
- 5. Clopidogrel.

Allergies:

NSAIDs (anaphylactic shock), Levaquin (hives), Zofran environmental allergies.



Vitals Signs:

BP:123/82

P: 77 b/m

R: 16 r/m

METs: >4

Clinical Presentation:

Extraoral exam: NO facial swelling or asymmetry.

Intraorally: NO swelling no sinus track or signs of infection.

Decayed # 2 and 3

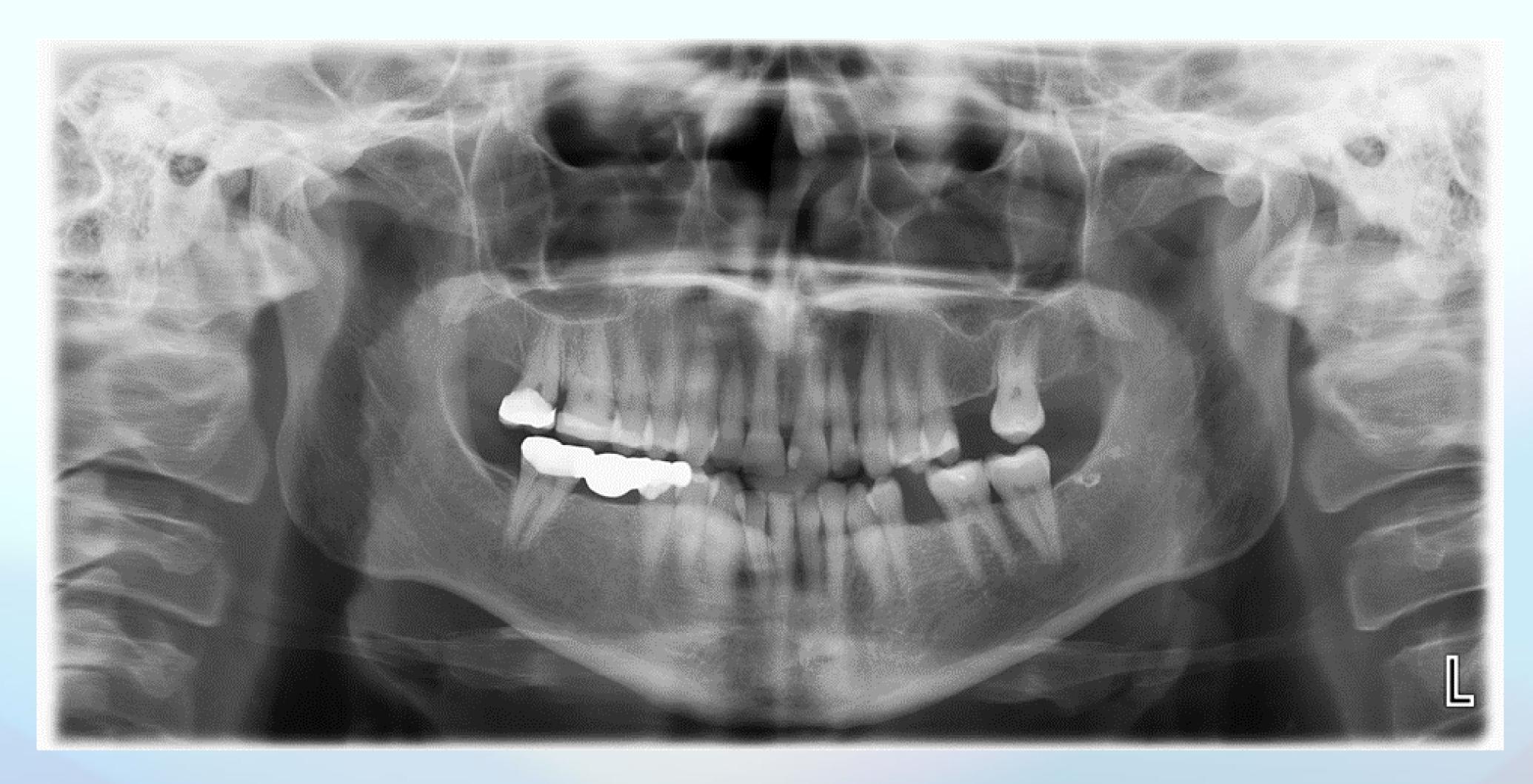
Diagnosis:

1. Grossly Carious # 2 and 3

Treatment Plan:

1. Surgical Extraction # 2 and 3.







With patient's medical history

Can we proceed with the surgical extraction?

Is there anything that concerns you about this patient? (Medical finding)

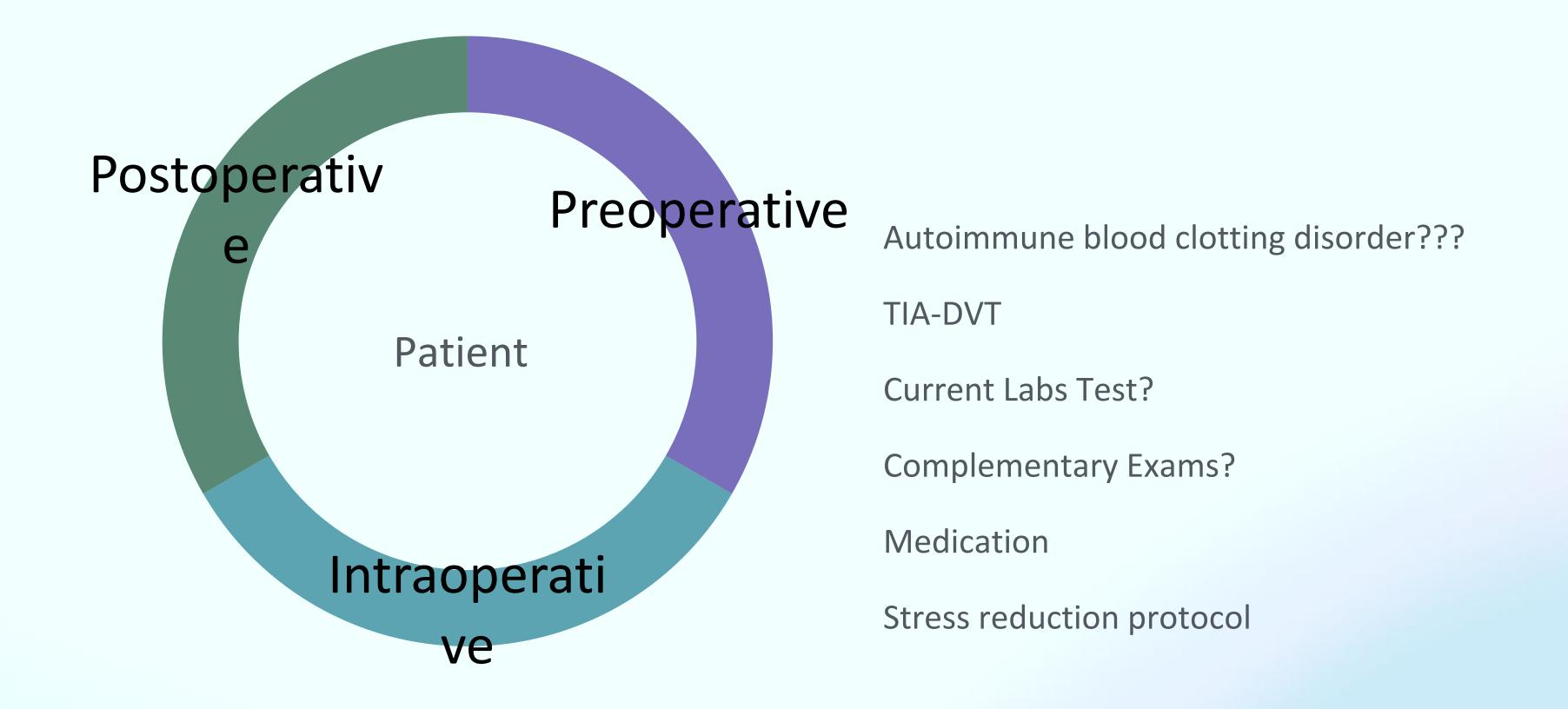
If yes,

What is your concern? (Medical)

Should we request a medical consult before the procedure?

What should we ask the physician?







Preoperative

Medical History:

- 1. Hypertension.
- 2. Autoimmune blood clotting disorder.
- 3 3-4 TIAs
- 4. DVT (right arm)
- 5. Hashimoto's
- 6. Sjögren's syndrome.
- 7. Rheumatoid Arthritis.
- 8. Anxiety
- 9. Depression.
- 10. Migraines (Marijuana)
- 11. Fibromyalgia.

Autoimmune blood clotting disorder???

TIA-DVT

Current Labs Test?

Complementary Exams?

Medication

Stress reduction protocol

Disease identification

Disease quantification

Details of Medications

Sedation considerations

Drug interactions

Impact on Healing

Medications:

1. Synthroid.

2. Alprazolam.

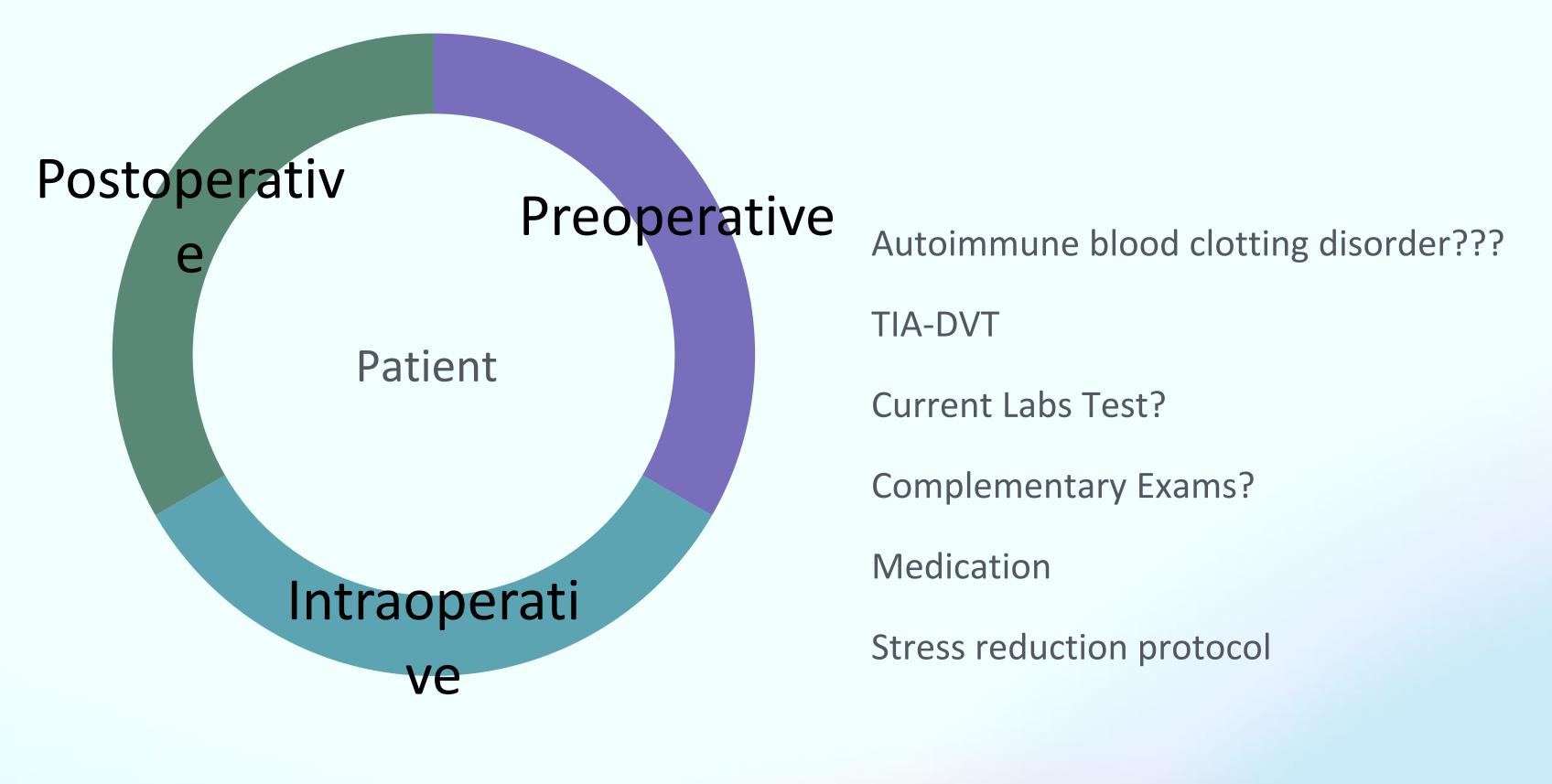
3. Effexor.

4. Amlodipine.

5. Clopidogrel.

Allergies: NSAIDs (anaphylactic shock), Levaquin (hives), Zofran, and environmental allergies.





Another TIA or thromboembolism event.

Bleeding.

Stress reduction Protocol



Intra-operative

Medical History:

- 1 Hypertension.
- 2. Autoimmune blood clotting disorder.
- 3. 3-4 TIAs
- 4. DVT (right arm)
- 5. Hashimoto's
- 6. Sjögren's syndrome.
- 7. Rheumatoid Arthritis.
- 8. Anxiety
- 9. Depression.
- 10. Migraines (Marijuana)
- 11. Fibromyalgia.

Another TIA or

Thromboembolism event.

Bleeding

Epinephrine caution

Stress reduction Protocol

Medications:

1. Synthroid.

2. Alprazolam.

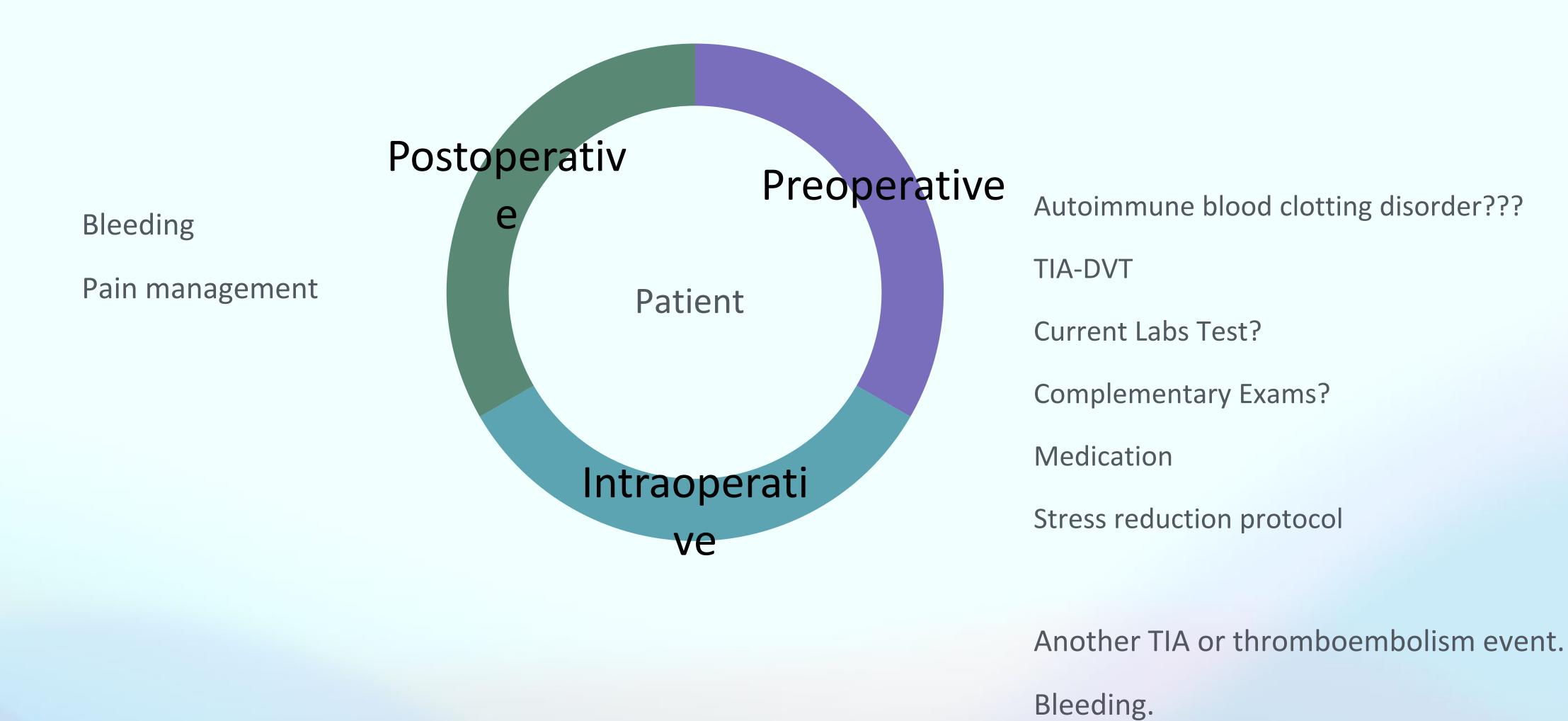
3. Effexor.

4. Amlodipine.

5. Clopidogrel.

Allergies: NSAIDs (anaphylactic shock), Levaquin (hives), Zofran, and environmental allergies.









Post-operative

Medical History:

- 1. Hypertension.
- 2. Autoimmune blood clotting disorder.
- 3. 3-4 TIAs
- 4. DVT (right arm)
- 5. Hashimoto's
- 6. Sjögren's syndrome.
- 7. Rheumatoid Arthritis.
- 8. Anxiety
- 9. Depression.
- 10. Migraines (Marijuana)
- 11. Fibromyalgia.

Bleeding
Pain Management

Antibiotic

Drug Considerations

Medications:

- 1. Synthroid.
- 2. Alprazolam.
- 3. Effexor.
- 4. Amlodipine.
- 5. Clopidogrel.

Allergies: NSAIDs (anaphylactic shock), Levaquin (hives), Zofran, and environmental allergies.



Medical Consult Template

Dear Dr.

During my routine dental examination of our mutual patient on I recorded a medical history that requires additional input from your office.

Medications: Add list of medications.

Medical Conditions: Add list of Medical Conditions

Dental Treatment Anticipated:

Information Requested:

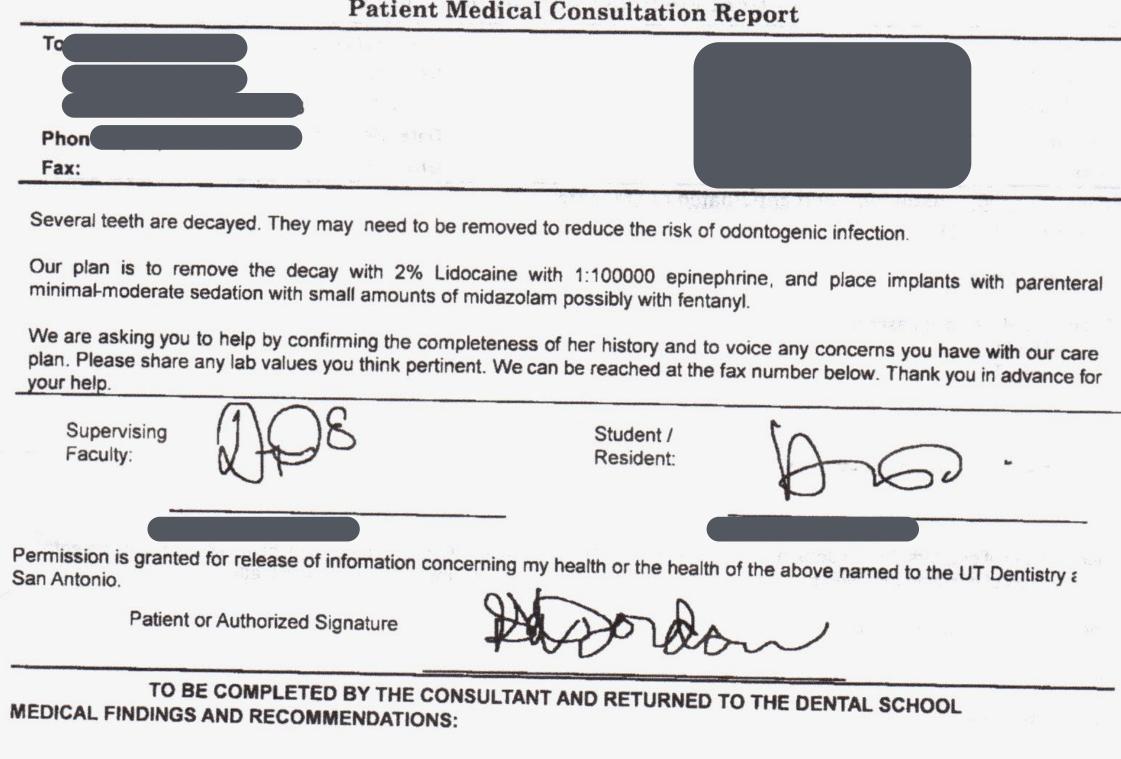




Dentistry

UTHSCSA Dental Clinic | | 8210 Floyd Curl Dr | | San Antonio, TX | | 78229-3923 Phone: (210) 450-3336 | | Fax: (210) 450-2216

Patient Medical Consultation Report



Cleaned

Consulting Physician's Signature



14/9/23



Request for Clearance is RARELY NEEDED for Minor Surgery & Dentistry



Dear Dr.

During my routine dental examination of our mutual patient on Dec 2023, I recorded a medical history that requires additional input from your office, pt has reported to us that she has the following medical conditions.

Medications: Synthroid: Alprazolam, Effexor, Amlodipine, Clopidogrel.

Medical Conditions: 1. Hypertension, Autoimmune blood clotting disorder, 3-4 TIAs (Pt has reported 3-4 TIAs within the last 2 years)?, Deep Vein Thrombosis?, Hashimoto's, Sjögren's syndrome, Rheumatoid Arthritis, Anxiety, Depression, Migraines (Marijuana), Fibromyalgia.

Dental Treatment Anticipated: Surgical Extraction of teeth #2 and #3 under local anesthesia 2% lidocaine w/1:100k epinephrine.

Information Requested:

- 1. We'd like you to kindly provide us the <u>details of her history of</u> TIAs, DVT, and type of the autoimmune clothing disorder.
- 2. We'd like if the patient has any other medical conditions or medication that she is taking that we should be aware of.
- 3. We'd like the current cardiac status and her suitability to go forth with the surgical extraction.

Thanks for your valuable help in this matter, we really appreciate it.





SHANNON CLINIC MAGDALEN 102 NORTH MAGDALEN SAN ANGELO TX 76903-5400

Dept: 325-653-6741 Loc: 325-658-1511

Patient:
Date of Birth:

Date of Visit:

Dear

There is no contraindication for patient to have dental procedure that is necessary based on patient's neurological history. However, under NO circumstance should patient have her Plavix stopped for any procedure due to her history of stroke.

Sincerely,



Medical Consultation - Summary

Aid Disease identification Disease quantification **Details of Medications Details of Devices** Suggest management Preoperative, Intraperative and Postoperative management Identify potential complications Prompt recognition Appropriate therapy

Knowing your patient well will also be very helpful information in preventing medical emergencies during a surgical procedure

