# QOMS Covid-19 Dental Infection Audit

## Patient's Details

**REDCap record ID**

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**Age at presentation (years)**

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**Gender**

- Female
- Male
- Other

**Source of referral**

- Hub Emergency Department
- Tier2/IMOS
- Inpatient in Hub hospital
- Transfer/referral from spoke OMFS
- Primary care - dentist
- Urgent Dental Care Centre
- Primary care - doctor
- Via 111 / Direct contact from patient
- Spoke Emergency Department

## Number of days from presentation to treatment

(treatment date minus presentation date, where presentation date is day = 0; if treated on the same day, write "Treated on the same day")

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## If admitted, indicate the number of days spent in hospital

(discharge date minus admission date, where admission date is day = 0; if not admitted, write "N/A")

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## Presentation

**Is the patient currently being seen at a Hub or Peripheral hospital?**

- Hub
- Spoke

**Main clinical presentation**

- Dental pain, no swelling
- Necrotising fasciitis
- Pus from socket
- Local cellulitis
- Paradental swelling
- Space infection with collection

**Aetiology**

- Caries / periapical periodontitis
- Infected cyst
- Pericoronitis from 3rd molar
- Post-extraction infection

**Dental location**

- Lower 3rd molar
- Lower anterior / premolar
- Lower molar
- Upper anterior / canine
- Upper premolar / molar

**Patient’s pre-treatment covid-19 status**

- Covid negative test
- Covid positive test
- Post-covid infection
- Unknown

**ASA status**

- ASA I
- ASA II
- ASA III
- ASA IV
- ASA V
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## Intervention(s)
- Admission antibiotics - IV
- Antibiotics - oral
- Extraction(s)
- No treatment
- Extraoral incision and drainage
- Intra oral incision and drainage
- Local treatment (dressing/washout)
- Transfer to hub for definitive treatment

## Anaesthetic
- None
- LA with sedation
- GA - Daycase
- LA in Outpatients
- LA in theatre
- GA - inpatient

## 14. Patient's outcome
- Discharged
- To see Dentist for further treatment
- Telephone review by OMFS
- Clinic review by OMFS
- Admitted to ITU/High Dependency
- Death

## Reason(s) why treatment and anaesthetic differ
- No access to emergency theatre
- Patient known COVID Positive
- Limiting activity to preserve stock of PPE
- Applying COVID policy to treat only emergencies with minimum inpatient/theatre use
- Patient suspected COVID
- Avoiding AGP