

1. WHAT SHOULD I ADVISE PATIENTS WHEN A TOOTH IS CHIPPED OR "KNOCKED OUT"?

STEP 1:

Get the patient or the patient's parents to quickly locate the tooth or tooth fragment. It is important to know whether the tooth/ tooth fragment(s) has been inhaled.

*A child may need a chest x-ray to rule out aspiration if the tooth/fragment cannot be accounted for.

STEP 2:

Scenario A - If it is a baby tooth, DO NOT put it back in the tooth socket because it may damage the underlying developing permanent (adult) tooth.

Additional Tip *Children aged five years or younger are more likely to have baby teeth than permanent teeth. Ask the parent/guardian if the child had recently had a new permanent tooth. If in doubt, put the tooth in fresh milk or saline and send the child to a dental clinic immediately.

Scenario B - If a permanent tooth has been knocked out, place it in fresh milk or saline immediately to avoid dehydrating and damaging the delicate cells on the root. Do not allow the tooth to remain dry at any stage.

- If possible, gently rinse any debris from the root by holding onto the crown of the tooth (the fattest part of the tooth), and put it back into the tooth socket. Do not touch the root of the tooth.
- If that is not possible, keep the tooth in fresh milk or saline or get the patient to hold it in the mouth (place the tooth on the inside of the cheek).

Time is a critical factor in saving the tooth. Send the patient to a dentist immediately.



Fractured upper left permanent central incisor in an 8.5 year old child



Knocked out upper left permanent lateral incisor and chipped upper permanent central incisors in an 8 year old child

2. WHAT SHOULD I DO IF A YOUNG CHILD VISITS MY CLINIC ONLY SEVERAL DAYS OR WEEKS AFTER THE **DENTAL INJURY?**

Unmanaged infection and trauma to the baby teeth can damage the unerupted permanent teeth. Even if there has been a time lapse, patients should still be advised to seek a dental consultation, especially if any of the following is present:

- Unusual redness or swollen gums
- Pain and difficulty eating
- Excessive shakiness of the injured tooth or a risk of accidental inhalation
- Change in colour of injured tooth

3. CAN "KNOCKED-OUT" TEETH BE SAVED?

The highest chances of saving knocked-out teeth are for those that have been kept moist, and returned to their socket within one hour of being knocked out.

4. CAN CHIPPED TOOTH FRAGMENTS BE REPAIRED?

Yes, they can. Depending on the size of the fragment, it may be feasible for the dentist to re-attach the chipped tooth fragment to the broken tooth. If not, the dentist can use a tooth-coloured filling material to repair the broken tooth.

5. I PARTICIPATE ACTIVELY IN CONTACT SPORTS THAT PUT ME AT RISK OF ORAL INJURIES. WHAT PRECAUTIONS CAN I TAKE?

Those who participate actively in contact sports are advised to wear a mouthguard during competition and practice. They can be referred to a dentist to have a well-fitted, customised mouthquard made.



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Dr Tong received her formal dental training at the National University of Singapore (NUS). She then pursued her postgraduate training in paediatric dentistry at the University of Leeds (UK) on the National University of Singapore Overseas Graduate Scholarship where she was conferred a Masters of Dental Science (Distinction). Dr Tong also obtained membership in paediatric dentistry of the Royal College of Surgeons (England) and is an accredited specialist on the Singapore Dental Specialist Register. She is currently an Assistant Professor at her alma mater, and is also a Visiting Specialist at the School Dental Centre, Health Promotion Board.

Dr Tong has a keen interest in management of dental trauma in young individuals. Her other research areas includes improving oral health for children with special needs. Dr Tong strongly supports in inter-professional education, and frequently participates in oral health education and training initiatives for medical and allied health professionals.