



THE WISCONSIN DENTAL PAIN PROTOCOL

White Paper for Hospital Administrators

**WISCONSIN
DENTAL PAIN PROTOCOL**
track record of success in
first two pilot communities

Dane County:

- Repeat dental pain visits declined since 2016 in all participating hospital Emergency Departments and Urgent Care Centers.
- The number of Emergency Department visits for dental pain decreased by more than half since 2014, dropping from 2,405 to 1,123 visits in 2018.

La Crosse County:

- In 2021, 550 referrals were made to community-based dental care
- There was an increase in the number of local anesthetics given for dental pain.

For complete reports from Dane and La Crosse counties, visit www.widentalpainprotocol.com

EXECUTIVE SUMMARY

What is The Wisconsin Dental Pain Protocol (WDPP)?

WDPP is a suite of hospital level policy and educational materials provided at no cost to emergency and primary care providers with a goal of improving adherence to best practices for the management of non-traumatic dental pain. The ultimate goals of the project are to improve opioid and antibiotic stewardship and also decrease unnecessary ED, urgent care, and clinic utilization for non-traumatic dental pain.

What is the “ask” of the hospital?

We ask that hospital allow us access to the relevant clinical directors and quality improvement professionals in order to facilitate lecture-based training modules and hands-on, in-person procedures labs (dental nerve blocks). Adoption of “the Badger Box”—a one-stop resource for treatment of non-traumatic dental pain in acute care settings—is optional and provided to the clinical site at no cost. We also ask for modest data reporting on a quarterly basis in order to sustain our project’s mission through state and federal grant funding.

What is the business case for WDPP?

Fewer multi-drug resistant organisms, hospital acquired infections and adverse drug events are obvious financial benefits of WDPP for hospitals. On the revenue side, high quality care increases patient satisfaction and promotional materials demonstrating a commitment to comprehensive oral health care can help capture market share. In terms of losses, repeat visits for non-traumatic dental pain trend towards Medicaid reimbursement rates or right-offs / charity care. High-utilizers also contribute to compromised ED throughput and increased left-without-being-seen rates. Non-traumatic dental pain visits are typically coded as a 99282 professional code and thus bring in very little revenue even if reimbursed at self-pay rates.

What is the catch?

There is no catch. WDPP is considered a win-win-win, grant-funded community health program. Patients win because their pain is better treated and they receive definitive management sooner. Hospitals and communities win because preventive dentistry and opioid/antibiotic stewardship lower overall costs to the organization and system. Dental professionals win because they successfully bring a cohort of patients into the sphere of community dental care that was previously slipping through the cracks. In terms of costs, the funding for WDPP comes from federal grants from the CDC’s Overdose Data to Action (OD2A), which makes possible the substantial cost-savings in offering this program to local hospitals and providers.

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WHAT ARE THE POTENTIAL PITFALLS OF WDPP?

Any failed program creates frustration, disillusionment, and erosion of trust. To ensure success, we do ask that hospitals identify an engaged provider, nurse, and quality improvement champion to help the roll-out and continuing education go smoothly. On WDPP's end, our aim is to set both partners up for success by:

- enrolling hospitals in the regions where the need is greatest
- providing ready access to 1:1 guidance to any role group with an appropriate subject matter expert
- constantly improving our protocols / policies / best-practices to ensure that all recommendations are up-to-date and represent the best available consensus evidence.

BENEFITS

How will patients benefit?

Best available evidence shows that a dental nerve block and non-opioid pain management strategy provides superior analgesia to an opioid-based strategy. Adherence to the WDPP increases patient safety by eliminating the patient's exposure to opioid related risks like mental status changes, constipation, opioid use disorder, and overdose. Furthermore, use of the WDPP also results in increased referrals to community dental care and ultimately less morbidity and mortality from oral infections or related pathology.

How will the community benefit?

Opioid and antibiotic stewardship in the treatment of non-traumatic dental pain provide direct benefit to the hospital and the greater community by reducing the incidence of opioid use disorder / overdose and multi-drug resistant organisms. Early and accurate diagnosis of dental pathology also reduces emergency department utilization and costly presentations of more advanced disease. On a societal scale, oral infections disproportionately affect low-socioeconomic status patients and have been linked to the incidence of diabetes, coronary artery disease, stroke, and low-birthweight babies.

How will hospital employees benefit?

Emergency departments and urgent cares report increased staff satisfaction and improved retention when their patient population matches the scope of their training and expertise. Inappropriate ED or urgent care use contributes to long waits, crowding and ultimately staff burnout. A visit (or repeat visit) for non-traumatic dental pain without a definitive plan for appropriate pain management and referral for definitive care can feel like a waste of time & expertise, a misuse of acute care resources, or even potential "drug seeking" encounter.

How will the hospital benefit?

Proactive efforts towards opioid and antibiotic stewardship demonstrate a health system's commitment to quality and patient safety, not only to its patients, but also to key stakeholders and regulatory bodies like the board of directors, Patient and Family Advisory Councils (PFACs), Department of Health Services (DHS), and the Joint Commission. For most communities in Wisconsin, improving referrals to community dental care will have an outsized impact on low-socioeconomic status patients and patients of color, which represents an opportunity to combat healthcare disparities and demonstrate a commitment to equity and inclusion.



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DISCUSSION: DENTAL PAIN ESSENTIAL QUESTIONS



- How common are non-traumatic dental pain (NTDP) presentations?
- What are current non-opioid pain control guidelines for NTDP?
- What are current opioid pain control guidelines for NTDP?
- Are local anesthetic blocks and infiltrations being given for NTDP?
- Do EDs/UCCs have dental anesthetic instruments, resources?
- What are current discharge protocols?
- Is the Clinical Algorithm being used and available via Epic or other online resources?
- Have you had high staff turnover?

TOOLS AND RESOURCES

The following is a list of tools and resources available for communities and health systems implementing the Wisconsin Dental Pain Protocol.

- **WDPP Presentations for Administrative Leadership**
This powerpoint presentation provides an overview of the Wisconsin Dental Pain Protocol and action steps for administrative leadership.
- **Clinical Hands-on Training**
These materials can be used by health systems to train clinical staff on the Wisconsin Dental Pain Protocol, particularly on the Clinical Algorithm for control of dental pain and infection and the administration of local anesthetics. Training Folder Resources available.
- **Webinar**
This YouTube webinar, titled “Management of Dental Pain in the Emergency Room,” can be viewed prior to or as part of educational programs for Emergency Department and Urgent Care Center staff on evidence-based practices for treating dental pain and infection.
- **Manikins for In-house Training on Oral Anesthetic Injections**
These manikins of the oral cavity offer an opportunity for providers to practice before performing anesthetic injections in clinic. Through use of indicator lights and tones, these training manikins provide real-time evaluation of the injection technique and are available for use by health systems for training staff.
- **Technical Assistance for Care Coordination**
For communities implementing the WDPP, technical assistance is available on implementing an effective dental care coordination process. Support includes access background information, materials, and contact information for other care coordinators.
- **Technical Assistance for Monitoring and Evaluation**
There are national, state and local reports, templates and support materials available for assessing the impacts in any community implementing the WDPP.
- **Badger Tooth Box (Dental Syringes, Anesthetics)**
The Badger Tooth Box is a starter kit of supplies for managing dental pain and infection, including topical anesthetic, dental syringes and needles, anesthetic carpules and copies of the Clinical Protocol.