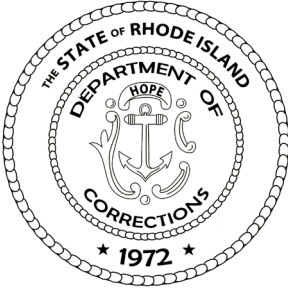



RHODE ISLAND DEPARTMENT OF CORRECTIONS POLICY AND PROCEDURE

	POLICY NUMBER: 18.40-4 DOC	EFFECTIVE DATE: 06/01/2022	PAGE 1 OF 11
	SUPERCEDES: 18.40-3 DOC	DIRECTOR: 	
SECTION: HEALTH CARE SERVICES		SUBJECT: ORAL SCREENING AND DENTAL TREATMENT	
AUTHORITY: Rhode Island General Laws (RIGL) § 42-56-10(22), Powers of the director			
REFERENCES: DOJ Final PREA Standards 115.21, Evidence protocol and forensic medical examinations; 115.82, Access to emergency medical and mental health services; NCCHC Jail Standards J-E-06, Oral Care (essential); NCCHC Prison Standards P-E-06, Oral Care (essential); the most recent version of RIDOC policy 2.28 DOC, Medical Co-Pay .			
INMATE / PUBLIC ACCESS?		X YES	
AVAILABLE IN SPANISH?		X NO	

I. **PURPOSE:**

- A. To ensure inmates within the Rhode Island Department of Corrections (RIDOC) receive adequate dental treatment including oral screening, instruction in oral hygiene and oral health education by a qualified Dentist or a dental staff member licensed or certified to perform such procedures.

- B. To ensure a qualified Dentist prioritizes treatment as appropriate and consults with specialists as needed.

II. POLICY:

- A. All Dentists and allied dental personnel employed by or under contract with RIDOC must be licensed or certified by their respective licensing or certifying Rhode Island authorities.
- B. Dental care and treatment are provided to inmates under the direction and supervision of Dentists licensed in the State of Rhode Island. These Dentists perform all dental treatment at regular intervals and supervise registered or certified dental auxiliaries.
- C. Oral treatment is provided according to a dental treatment plan based on a system of established priorities for care when an inmate's health could be adversely affected, in the dentist's judgment.
- D. Dental care and treatment shall be provided in a timely manner and will include immediate access for emergency conditions. All encounters are required to be documented in the Electronic Medical Record (EMR) at RIDOC.

III. DEFINITIONS:

- 1. **Emergency Care** - a serious, disabling condition of the teeth or surrounding tissues, manifested by severe symptoms and occurring suddenly or unexpectedly. This condition requires immediate attention as it is severe enough to significantly compromise the ability to eat or sleep, and in the most extreme situations could be life threatening.
- 2. **Hygiene Services** - habits and practices that are conducive to maintaining or improving the health of the teeth and gums performed by a licensed dental hygienist.
- 3. **Oral Care** - instruction in oral hygiene (i.e., plaque control, proper brushing of teeth), examination, and treatment of dental problems.
- 4. **Oral Screening** - visual observation of the teeth and gums, and notation of any obvious or gross abnormalities requiring immediate referral to a dentist.
- 5. **Oral Examination** - taking or reviewing the inmate's oral history, an extraoral head and neck examination, charting of teeth, periodontal assessment, and examination of the hard and soft tissue of the oral cavity with a mouth mirror, explorer, and adequate illumination.

6. **Oral Treatment** - the full range of services that in the supervising dentist's judgment are necessary for maintaining the inmate's health.
7. **Routine Care** - non-acute care for dental conditions that are not of an urgent nature.
8. **Urgent Care** - treatment conditions of an urgent nature such as grossly decayed teeth with significant pain. These conditions are not considered life threatening but must be addressed within twenty-four (24) hours.

IV. **PROCEDURES:**

A. **All RIDOC Inmates**

Upon commitment, all inmates undergo an oral screening performed by a Dentist, Registered Dental Hygienist (RDH) or trained Health Care Services personnel member within fourteen (14) calendar days of admission. This includes visual observation of the teeth and gums and notation of any obvious gross abnormalities requiring immediate referral to the Dentist.

B. **Awaiting Trial Inmates**

1. **Inmates Held for Under One (1) Year**

Inmates awaiting trial who are held for under one (1) year are eligible for the following dental services and will not be charged a co-pay:

- a. Emergency/urgent care performed by the Dentist through a sick call request.
- b. Oral Hygiene instruction (OHI) and preventative oral education within fourteen (14) days of admission including:
 - (1) Information on plaque control;
 - (2) Techniques for proper brushing.
- c. Initial oral examination performed by a licensed Dentist within twelve (12) months of admission including:
 - (1) Dental history

- (2) Extraoral health and neck examination
 - (3) Charting of Decayed-Missing-Filled (DMF) teeth
 - (4) Periodontal assessment, screening and recording (PSR)
 - (5) Examination of hard and soft tissue with a mouth mirror, explorer and appropriate lighting
- d. Radiographs to assist in the development of a dental treatment plan.
 - e. Consultation with an oral health care specialist, if needed.
- NOTE:** This service is available through a referral process.
- f. Appropriate access to fluoride as determined by the Dentist.

2. Inmates Held for More Than One (1) Year

Inmates awaiting trial who are held for more than one (1) year are eligible for additional dental services and will not be charged a co-pay. These services, which are performed by the Dentist through a sick call request, include:

- a. Hygiene services (i.e., cleanings);
- b. Restorative care (i.e., fillings);
- c. Removable prosthetic repairs; and
- d. Extractions.

C. Sentenced Inmates

- 1. All sentenced inmates receive a Sentenced Dental Exam within thirty (30) days of sentencing performed by a Dentist and are charged a co-pay.

NOTE: This examination does not include comprehensive treatment planning. If further treatment is needed, the inmate will be advised to submit a sick call request at his/her facility.

The examination should include:

- a. Periodontal examination and recording (PSR)
- b. Dental history
- c. Extraoral head and neck examination
- d. Examination of hard and soft tissue with a mouth mirror, explorer and appropriate lighting
- e. Charting of Decayed-Missing-Filled (DMF) teeth
- f. Oral cancer screening;
- g. Panoramic X-ray;

NOTE: Panoramic X-rays may be performed by a Dental Assistant (DA) or RDH

- h. Oral Hygiene Instructions (OHI) handout provided by DA or RDH.
2. All sentenced inmates are eligible to receive emergency/urgent care performed by a Dentist through a sick call request.
 3. Sentenced inmates are also eligible to receive routine dental care performed by a Dentist through a sick call request. Routine dental care includes:
 - a. Hygiene services (i.e., cleanings);
 - b. Restorative care (i.e., fillings);
 - c. Extractions.

NOTE: Inmates sentenced to **over** 365 days are also eligible for removable prosthetic repairs in addition to the other dental services.

D. Covered Services for Sentenced Inmates

1. Extractions of symptomatic and non-restorable teeth.

2. Restorations – Amalgam is recommended for all posterior restorations; composite is recommended for anterior restorations.
3. Hygiene Services – subgingival scaling, prophylaxis and OHI.
4. Full upper and/or lower dentures when the inmate has at a minimum 365 days left in his/her sentence at the time the first impression is taken.
5. Removable prosthodontics is approved if two (2) or more posterior teeth are missing on one side, not including second and third molars, or one or more missing anterior teeth with the remaining teeth in good condition.
6. Endodontic treatment is limited to one (1) per lifetime per tooth. Treatment is limited to anterior teeth only if the treatment will lead to a favorable prognosis, and only if; 1. all three (3) anterior teeth are present in the involved arch, or 2. if the involved tooth cannot be added to an existing or proposed removable partial denture and the tooth will not need a post and core and/or crown to be restored.
7. Stainless steel crowns for posterior teeth and pre-fabricated resin crowns for anterior teeth.
8. Mouthguards – when indicated and diagnosed by the Dentist.
9. Sentenced inmates are automatically called within 12 months of their sentenced date for annual updates of their dental charts. Annual visits include dental examination, x-ray (if needed) and prophylaxis.
10. Sentenced inmates readmitted to RIDOC who have received dental examinations within the previous six (6) months do not require new examinations, except as determined by the supervising Dentist.
11. Consultation through referral to dental specialists is available. The treating Dentist may refer inmates to specialists at his/her discretion.
12. The results of all dental examinations and treatment are recorded in the SOAP (subjective, objective, assessment, plan) format in the electronic medical record (EMR) at the time of treatment.

E. Services Not Provided

Services not provided include, but are not limited to:

- a. cosmetic procedures;
 - b. experimental procedures;
 - c. implants;
 - d. desensitization;
 - e. occlusal equilibration;
 - f. extensive periodontal surgery;
 - g. root canal therapy for bicuspid and molars;
 - h. flippers;
 - i. lab processed crowns.
- F. Specialty Dental Services
- Symptomatic extractions requiring general anesthesia, fixation of the jaw and jaw fractures are seen by an oral surgeon or an emergency room physician.
- G. Dental Care Access
- Inmates may request dental care by:
- 1. Submitting a sick call request to the dental clinic requesting dental care. The DA will triage sick call request slips and schedule inmates accordingly to be seen by the Dentist (**Preferred request method**).
 - 2. Submitting a sick call request to the nurse requesting dental care. The nursing department will submit a request on behalf of the inmate through the electronic medical record (EMR). The DA will triage the sick call requests and schedule inmates accordingly to be seen by the Dentist.
- H. Categories of Dental Care
- 1. Emergency Care - Category 1
- All inmates (non-sentenced and sentenced) are eligible for Category 1 care. Inmates presenting with Category 1 complaints shall be stabilized

within twenty-four (24) hours. Urgent oral care will not be denied on the basis of an inmate's noncompliance with good oral hygiene practice.

a. Examples include but are not limited to:

- (1) acute infection (i.e., dental, periodontal or peri-coronal infection);
- (2) severe pain;
- (3) suspected fractures of the jaw;
- (4) uncontrolled bleeding.

b. Treatment includes but may not be limited to:

- (1) emergency extractions, consistent with community standards;

NOTE: A recent radiograph is required.

- (2) medication prescription(s);
- (3) referral to an appropriate medical facility in the case of suspected fractures or infections which are life-threatening.

2. Urgent Care - Category 2

All inmates (non-sentenced and sentenced) are eligible for Category 2 care. Urgent oral care will not be denied on the basis of an inmate's non-compliance with good oral hygiene practice.

a. Examples include but are not limited to:

- (1) gross caries with significant pain;
- (2) Acute Necrotizing Ulcerative Gingivitis (ANUG).

b. Treatment includes but may not be limited to:

- (1) Extraction of non-restorable symptomatic teeth, consistent with community standards;

NOTE: A recent radiograph is required.

- (2) Placement of a sedative restoration;
- (3) medication prescription(s);
- (4) Full mouth debridement (i.e., in the case of ANUG).

3. Routine Care - Category 3

All sentenced inmates and non-sentenced inmates held for over 365 days are eligible for Category 3 care.

Examples include but may not be limited to:

- a. extractions of non-restorable teeth as determined by the Dentist;
- b. restorations as determined by the treating Dentist.

4. Removable Prosthodontic Care - Category 4

Category 4 is reserved for sentenced inmates with a remaining length of stay in RIDOC greater than 365 days. Inmates are allowed to receive one (1) set of dentures/partials every five (5) years and are eligible for relines once per year, as necessary.

- a. Eligibility for dentures is based upon:
 - (1) the ability of the inmate to undergo the denture process (e.g., an inmate would be ineligible if s/he had a fractured jaw, recent head/neck surgery, etc.); and
 - (2) The inmate must have the appropriate residual ridge or ridges as determined by the treating Dentist.
- b. Eligibility for partials is based upon:
 - (1) impaired masticatory function as is found with less than six (6) opposing teeth;
 - (2) Appropriate level of oral hygiene as determined by the Dentist; and

(3) Periodontal health of supporting teeth as determined by treating Dentist.

5. Hygiene Services - Category 5

All sentenced inmates are eligible for a prophylaxis on an annual basis. However, priority will be given to patients with chronic care illnesses (i.e., diabetics, Hepatitis B, HIV+, undergoing dialysis treatment or immunocompromised due to illness or treatment) or those taking medications that markedly decrease the flow of their saliva.

NOTE: Hygiene services will be performed by the RDH.

I. Waiting Periods

1. **Category 1 and 2: Emergency/Urgent**

Twenty-four (24) hours from when the sick call request was received in the dental clinic for assessment, stabilization and/or treatment.

2. **Category 3: Extractions and Restorations**

Three (3) weeks from when the sick call request was received in the dental clinic.

3. **Category 4: Removable Prosthetics (including Removable Prosthetic Repairs)**

Six (6) weeks from when the sick call request was received in the dental clinic to performance of first impression or beginning the repair.

4. **Category 5: Hygiene Services**

Six (6) months from when the sick call request was received in the dental clinic.

J. Informed Consent and Refusal of Treatment

1. Prior to performing extractions or any general dentistry procedure, the dental staff must fill out an [Oral Surgery and General Dentistry Consent](#) form or the electronic record equivalent and have this form signed by the dental staff and the inmate.

2. If an inmate refuses the treatment recommended by the examining Dentist or the Dentist providing the treatment, a written notation of refusal of treatment shall be made in the dental record and the inmate shall sign an [Oral Surgery and General Dentistry Release of Responsibility](#) form, which will be filed in the inmate's dental record. If the inmate does not sign the [Oral Surgery and General Dentistry Release of Responsibility](#) form, it is to be noted by a second healthcare or custody staff witness on the form.