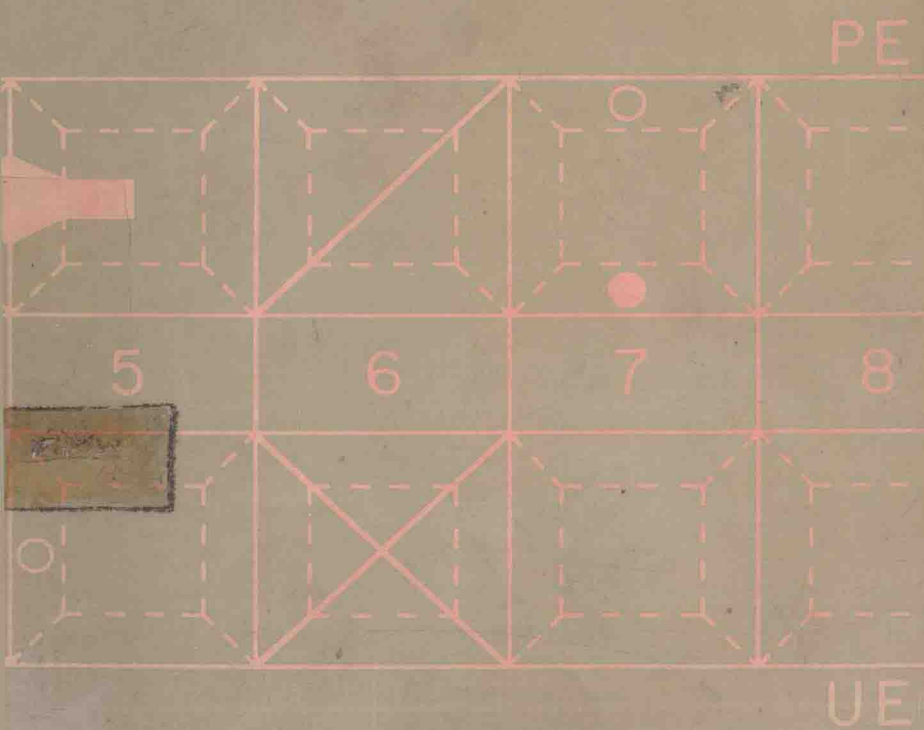


Textbook for Dental Nurses

Fifth edition

H. Levison

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Textbook for Dental Nurses

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FIFTH EDITION

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Textbook for Dental Nurses

Introduction

To the Fifth Edition

Many changes have taken place since this book was last revised in 1973. There have been changes in the entrance requirements, syllabus and form of the national examination for dental surgery assistants; the National Health Service has been reorganized; and there have been advances in dental knowledge and techniques.

This edition is intended to cover these changes and the text has accordingly been revised, augmented and brought up to date where necessary. For their help in this task I am indebted to: Miss M. Jean Smith, M.B.E., for her advice and guidance; Dr. G. Rushman, Consultant Anaesthetist, Southend Hospital, for his advice on the chapters covering general anaesthesia and collapse; the Amalgamated Dental Trade Distributors Ltd. for illustrations of dental instruments; and Chas. F. Thackray Ltd. for illustrations of oral surgery instruments.

To the First Edition

This book is designed to cover the syllabus for the British Dental Nurses and Assistants Examination. Although written primarily for nurses preparing for this examination, it also provides an outline of dental surgery for those embarking on a career of dental nursing; thus helping them gain a greater understanding of the nature and aims of their duties. For examination purposes, the subject matter is deliberately presented in a dogmatic fashion and, to aid final revision, there is a summary after each chapter.

The text was prepared during a winter spent in the North Isles of Shetland with the School Health Service mobile dental unit; and for helpful advice and encouragement throughout, I am indebted to my former dental nurse, Miss M.E. Isbister. I wish to thank my wife for typing the manuscript; my sister, Miss B. Levison, for the drawings; the Amalgamated Dental Trade Distributors Ltd. for providing some new blocks; and Mr. P. Saugman, of Blackwell Scientific Publications, for his guidance.

H. LEVISON

Contents

Introduction to the Fifth Edition	vii
Introduction to the First Edition	vii
1 Structure of the Dental Profession	1
2 The Dental Surgery Assistant	8
3 Outline of Anatomy and Physiology	15
4 The Blood	16
5 The Heart and Circulation	19
6 Respiration	27
7 Digestion	32
8 Bacteriology	42
9 Pathology	45
10 Sterilization	48
11 Drugs	59
12 Dental Anatomy	70
13 Nerve Supply of the Teeth and Local Anaesthesia	95
14 General Anaesthesia	107
15 Collapse	124
16 Extractions and Minor Oral Surgery	132
17 Haemorrhage	144
18 Caries	148
19 Fillings	159
20 Temporary Fillings	171
21 Amalgam	176
22 Gold Inlays and Crowns	184
23 Silicate Cement	190
24 Composite Fillings	196
25 Endodontics	205
26 Periodontal Disease	217
27 Prevention of Dental Disease	231
28 Prosthetics	244
29 Orthodontics	259
30 Radiography	267
31 Records	279
Index	285

I **Structure of the Dental Profession**

The Dentist

The dentist today undergoes a period of training at a University Dental School which lasts up to six years. On passing his final examination the dental student is awarded the degree of Bachelor of Dental Surgery (B.D.S.) or the Licence in Dental Surgery (L.D.S.). But he cannot use the title of dentist or practise his profession until his name has been entered in THE DENTISTS REGISTER.

The register is kept by the GENERAL DENTAL COUNCIL and contains the name, address and qualification of every person legally entitled to practise dentistry in the United Kingdom. Such persons may describe themselves as dentist, dental surgeon or dental practitioner. There is no difference between these titles. In most countries of the world dentists are addressed as Doctor but this does not apply in the United Kingdom; all dentists here are addressed as Mr. Mrs. or Miss unless they possess a medical qualification or university doctorate.

The registered dentist has a wide choice of opportunities within his profession: general practice, community dental service, hospital service, university teaching and research, industrial dental service and the armed forces. He may also take additional higher qualifications and become a specialist in a particular branch of dentistry. Some examples of higher dental qualifications are the degree of Master of Dental Surgery (M.D.S.), the Fellowship in Dental Surgery (F.D.S.), the Diploma in Orthodontics (D.Orth.) and the Diploma in Dental Public Health (D.D.P.H.).

General Dental Council

The General Dental Council is the governing body of the dental profession and its duties are set out in the DENTISTS ACTS, 1957 and 1973. These duties are to promote high standards of professional

education and professional conduct among dentists. It thereby ensures that the status of the profession in the community is upheld and that a proper code of conduct is maintained for the protection of the public.

In performance of these duties the General Dental Council must be satisfied that courses of study at dental schools and the qualifying examinations are adequate. It is also empowered to remove from the register any dentist who has been convicted of a criminal offence or is guilty of unprofessional conduct.

Apart from registered dentists, the only other persons permitted to undertake dental treatment are DENTAL HYGIENISTS and DENTAL AUXILIARIES. The General Dental Council is responsible for these ancillary workers in much the same way as for dentists.

The Dental Team

A dentist's training enables him to undertake, without assistance, all of the treatment necessary for his patients, including construction of their dentures, crowns, gold inlays, etc. Except for the actual treatment performed within the mouth, however, much of the work which a dentist is qualified to do can be performed by others. For example, a DENTAL SURGERY ASSISTANT can mix filling and impression materials; a DENTAL TECHNICIAN can make dentures, crowns, gold inlays, etc.; whilst dental hygienists and auxiliaries are permitted to undertake limited forms of dental treatment.

By utilizing all this assistance, a dentist becomes the captain of a team which can practise in the most efficient way. The dentist carries out all the treatment which he alone can perform, whilst the other members of the team—auxiliary, hygienist, surgery assistants and technician—perform all the work which a dentist can delegate. Compared with a single-handed dentist, the dental team can provide far more treatment each day, with less effort and fatigue for all concerned, and thereby give a better total service to the patient and the community.

Dental Hygienist

After a year's training at a dental hospital, or in the armed forces, hygienists are permitted to carry out the following dental work in a general practice, clinic or hospital:

1. Scaling and polishing teeth.
2. Application of fluorides to teeth.
3. Application of fissure sealants.
4. Dental health education.

This treatment must be prescribed by a dentist and carried out under his supervision.

Dental Auxiliary

On completion of a two-year course at the training school in London, a dental auxiliary can work only in a community dental service clinic or hospital. She is permitted to carry out the following simple treatment on children, as prescribed in writing by a dentist and under his supervision:

1. Scaling and polishing teeth.
2. Application of fluorides to teeth.
3. Application of fissure sealants.
4. Dental health education.
5. Simple fillings.
6. Extraction of deciduous teeth under local infiltration anaesthesia.

Dental Technician

A dental technician is a highly skilled craftsman who constructs dentures, crowns, gold inlays and orthodontic appliances, etc. He works to the dentist's prescription in a dental laboratory. Training is by means of a three-year course in a dental hospital or a five-year apprenticeship in a dental laboratory.

Dental Surgery Assistant

The role of the dental surgery assistant, her duties and training facilities are covered in the next chapter.

The National Health Service

Dental treatment in the United Kingdom is either provided privately or through the National Health Service. Private patients obtain treatment from a practitioner of their choice; and pay a fee to the

practitioner for his professional services. Most dental treatment, however, is provided through the National Health Service and the majority of dentists, dental surgery assistants and dental technicians are engaged in the provision of such treatment. It differs from private practice in the range of treatment provided and the method of payment for such treatment. Certain types of treatment available in private practice are restricted in the National Health Service; whilst payments to the dentist are controlled by the State, with patients' contributions ranging from nil to a set maximum.

Reorganization of the National Health Service took place in 1974 and the country was divided into Regional Health Authorities. Each one of these is subdivided into areas which have the same boundaries as their corresponding county or metropolitan district. Thus each local government county or metropolitan district becomes an AREA HEALTH AUTHORITY. For operational purposes each area health authority is itself divided into one or more health districts according to its size.

Before reorganization the general practitioner service, hospital service and school health service were administered and financed by different bodies, working independently of each other. The purpose of reorganization is to bring all these services together under one administration; thereby making it more efficient and providing a better service for the patient. The administrative unit for this purpose is the area health authority, which takes over the planning and operation of all health services in the area and employs all the staff except hospital consultants.

Community Dental Service

This was formerly administered by local authorities as the school dental service, providing examination and treatment for children and expectant and nursing mothers. It still meets the same needs but is now administered by the area health authority through an AREA DENTAL OFFICER.

There is one area dental officer for each area health authority and his responsibilities include management of the community dental service; and co-operation with hospital staff and general practitioners in planning and co-ordinating all dental services in his area. Just as area health authorities are divided into districts, so may area dental officers have DISTRICT DENTAL OFFICERS on their

staff to assist them in their duties at district level and deputize for them when necessary.

Hospital Dental Service

Hospital services were formerly administered by regional hospital boards and hospital management committees, but these have now been replaced by the new health authorities.

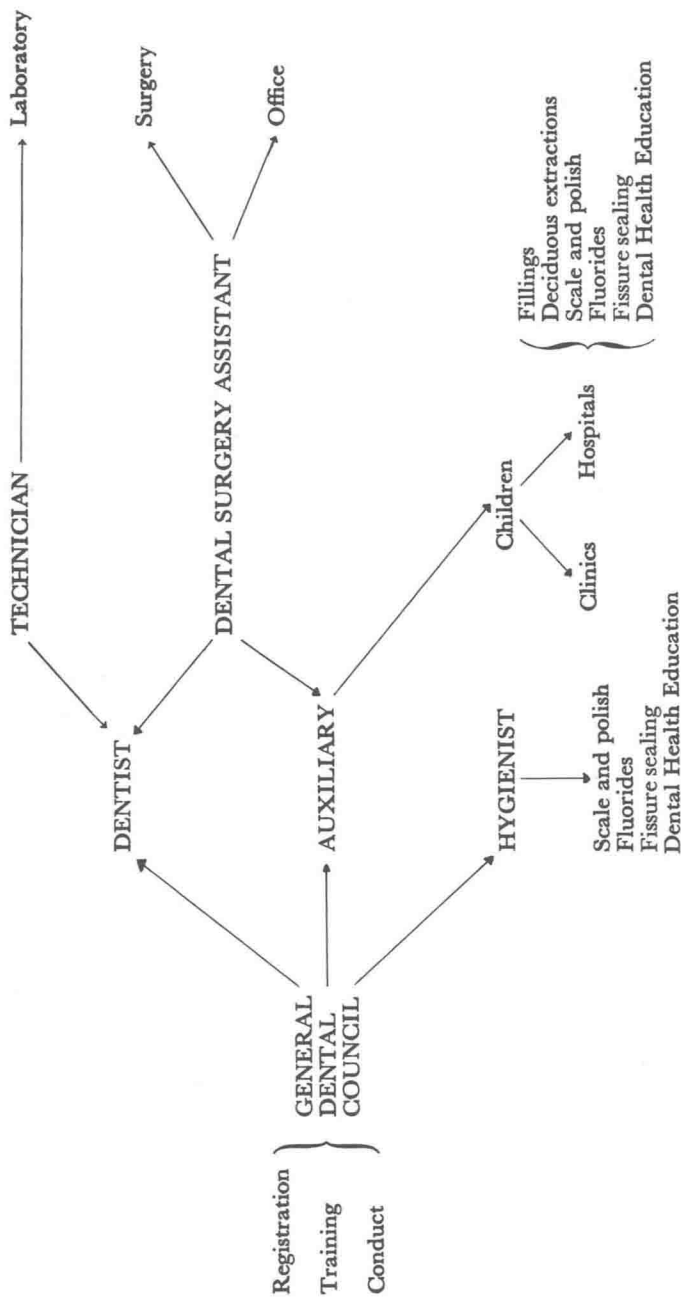
Dental services are provided by the consultant oral surgeon and consultant orthodontist. They give specialist advice and treatment for patients referred by practitioners outside the hospital; and for patients referred from other departments of the hospital. They are also in overall charge of dental care for long stay in-patients. In addition, most consultants provide postgraduate courses and part-time training posts for general practitioners.

General Dental Service

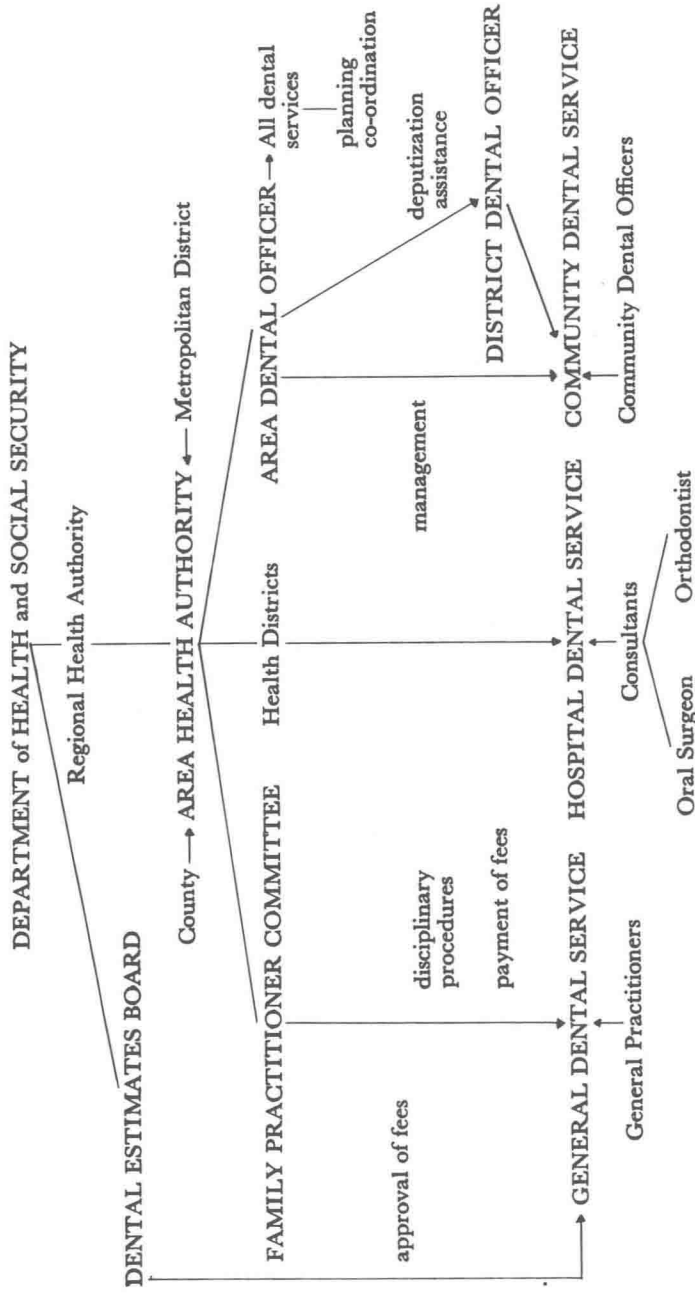
This is the general practitioner service which provides most of the dental treatment in this country. Before reorganization it was administered by executive councils, but these have been replaced by a FAMILY PRACTITIONER COMMITTEE set up by each area health authority. The new committee performs the same functions as before, in so far as payment of fees to practitioners and disciplinary procedures are concerned.

The DENTAL ESTIMATES BOARD still authorizes payment of fees by the family practitioner committee; and patients are still liable for examination by dental officers of the Department of Health and Social Security. Forms used in practice, e.g. E.C.17, E.C. 25, remain the same but are given the prefix F.P. instead of E.C.

Summary



Summary



2 **The Dental Surgery Assistant**

Although the duties of a dental surgery assistant vary from practice to practice, according to its size and number of staff employed, they may be classified under the headings of surgery and office duties. To perform these efficiently, dental surgery assistants must possess certain personal qualities and a knowledge of the law and dental ethics.

Personal Qualities

The dental surgery assistant is usually the first person to receive a patient. This is an important occasion as a patient's confidence in the practice may well be influenced by the appearance and manner of the dental surgery assistant.

Appearance

She should be smartly dressed without going to extremes of fashion. Attention to personal hygiene is essential, not only as it affects appearance, but also to ensure good results and prevent infection in the surgery.

Personality

A calm and courteous manner, combined with a cheerful disposition, is an obvious necessity when dealing with anxious patients. It will allow her to keep cool under all conditions and cope with any emergency which may arise. Handling patients in a busy practice can be very trying and requires much patience and tact.

Speech

The voice must be calm to inspire confidence; and clear enough to be understood on the telephone. Instructions to patients should be given in simple language to avoid misunderstanding.

Concentration

This requires an alert mind and attention to detail. Mistakes must not be made in patients' records, appointments, telephone messages, assisting with treatment or dealing with emergencies.

Punctuality

Smooth running of a busy practice depends on the staff and patients keeping appointments on time. Dental surgery assistants must set an example by strict punctuality on duty.

The Law

An important function of the General Dental Council is to maintain high standards of professional conduct amongst dentists, hygienists and auxiliaries. Anyone found guilty of a criminal offence or unprofessional conduct is liable to be removed from the register kept by the Council, and is thereby legally forbidden to practise. This does not, of course, apply to dental surgery assistants; but dentists may be held responsible for any acts or omissions of their staff. It is therefore necessary for dental surgery assistants to know of the legal and ethical obligations in dental practice.

A dentist found guilty by the General Dental Council of the following types of unprofessional conduct is liable to have his name erased from the register:

Covering

A dentist commits the offence of covering if he enables unqualified people to give dental treatment. He must not allow a dental surgery assistant to do dental work which is not permitted by law. The only people entitled to provide dental treatment are those registered with the General Dental Council: which means dentists, dental hygienists and dental auxiliaries only. It is illegal for dental surgery assistants and dental technicians to carry out any work in a patient's mouth.

A dental surgery assistant is, however, allowed to give patients instruction in oral hygiene, provided:

1. this is delegated to her by a dentist;
2. the dentist is satisfied that she is fully competent to do so;

3. the dentist understands that he is personally responsible for whatever instruction is given in his name;
4. both dentist and dental surgery assistant understand that it is illegal for dental surgery assistants to carry out work in a patient's mouth.

Abuse of Drugs

This includes drunkenness and misuse of drugs. There are strict legal rules for dentists relating to the purchase, storage, prescription and use of dangerous drugs. Dentists must not abuse the privileges conferred upon them under the law. Dental surgery assistants must strictly obey the dentist's instructions on the care and use of drugs.

False Certification

A dentist must never sign, or allow a dental surgery assistant to sign, or induce a patient to sign, any untrue or improper document or certificate. This includes false certification and improperly seeking fees under the National Health Service Acts.

Advertising and Canvassing

Dentists must not advertise or canvass to obtain patients or promote their own professional advantage. Nor must this be done by a dental surgery assistant or other person on behalf of the dentist.

Advertisements of staff vacancies in newspapers may now include the name, address and telephone number of the dentist, as well as an indication of his profession.

Postcards bearing the dentist's name, address and profession must not be sent through the post. They must be enclosed in a plain envelope.

Ethics

In addition to these obligations upon dentists, there is a code of ethics which every dental surgery assistant should obey.

1. She must be honest and loyal; and serve her employer and his patients to the best of her ability.
2. She must hold in strict confidence all details of professional services rendered by her employer.

3. She must not make disparaging remarks about the conduct of the profession, or of her employer's treatment of patients.

Office Duties

These include reception, clerical and administrative duties.

1. Responsibility for and supervision of general cleanliness.
2. Reception of patients and dental company representatives.
3. Arranging current and recall appointments.
4. Completion and filing of patients individual records.
5. Recording all attendances and treatment in day book.
6. Ordering and storage of supplies.
7. Management of financial records.
8. Correspondence.

Surgery Duties

Most of these are covered in the appropriate chapter but they may be summarized as follows:

1. Care and maintenance of equipment and instruments.
2. Care of drugs.
3. Preparation of surgery and setting out instruments.
4. Sterilization.
5. Recording and charting.
6. Chairside assistance during all operative procedures.
7. Pre- and post-operative care of patients.
8. Processing and mounting radiographs.
9. Oral hygiene instruction (see page 9).

In addition to the chairside duties mentioned, a dental surgery assistant also performs the indispensable roles of chaperon and witness. Dentists are sometimes accused of improper or negligent conduct and, for this reason, a dental surgery assistant must always be present in the surgery when the dentist is attending a patient. Her presence as a third party has great legal value and protects both dentist and patient. If she has to leave the surgery temporarily the door should be left wide open until she returns or somebody else takes her place.

Association of British Dental Surgery Assistants

The Association of British Dental Surgery Assistants was founded