

# Dentures Policy and Procedure



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## **DENTURES POLICY AND PROCEDURE**

### **PREFACE**

This facility promotes and supports a resident centered approach to care. The purpose of this policy is to ensure that the facility has integrated a system for proper resident assessment and care with dentures and assisting the resident in obtaining necessary repair or replacement of damaged or lost dentures timely to meet the quality of care of the resident. In addition, the facility will outline the process and circumstances for responsibility for financial replacement of dentures.

### **POLICY**

It is the policy of the facility to provide ongoing assessment and care of the resident with dentures. In the event that the resident's dentures are damaged or lost, the facility will refer the resident for dental services timely, within 3 days for an appointment. The resident will not be charged for the repair or replacement of dentures in the event that the loss or damage of dentures was incurred by facility staff.

### **Centers for Medicaid and Medicare Services (CMS)**

#### **Definitions**

**Broken Natural Teeth or Tooth Fragment** – Very large cavity, tooth broken off or decayed to gum line, or broken teeth (from a fall or trauma)

**Chewing Abnormalities** – Many conditions of the mouth, teeth, and gums can affect the resident's ability to chew foods. For example, oral pain, dry mouth, gingivitis, periodontal disease, ill-fitting dentures, and broken, decayed or missing teeth can impair oral intake

**Dental Condition Status** refers to the condition of the teeth, gums, and other structures of the oral cavity that may affect a resident's nutritional status, communication abilities or quality of life.

**Emergency Dental Services** includes services needed to treat an episode of acute pain in teeth, gums, or palate; broken, or otherwise damaged teeth, or any other problem of the oral cavity by a dentist that required immediate attention.

**Oral Hygiene** means maintaining the mouth in a clean and intact condition and treating oral pathology such as ulcers of the mucosa. Services to maintain oral hygiene may include brushing



the teeth, cleaning dentures, cleaning the mouth and tongue either by assisting the resident with a mouth wash or by manual cleaning with a gauze sponge; and application of medication as described

**Oral Lesions** – A discolored area of tissue (red, white, yellow, or darkened) on the lips, gums, tongue, palate, cheek lining, or throat.

**Oral Mass** – A swollen or raised lump, bump, or nodule on any oral surface. May be hard or soft, and with or without pain

**Prompt Referral** means within reason, as soon as the dentures are lost or damaged. Referral does not mean that the resident must see the dentist at that time, but does mean that an appointment (referral) is made, or that the facility is aggressively working at replacing the dentures

**Routine Dental Services** means an annual inspection of the oral cavity for signs of disease, diagnosis of dental disease, dental radiographs as needed, dental cleaning, fillings (new and repairs) minor dental plate adjustments, smoothing of broken teeth, and limited prosthodontic procedures, e.g., taking impressions for dentures and fitting dentures

**Ulcer** – Mouth sore, blister or eroded area of tissue on any oral surface

## **OBJECTIVE OF DENTURE POLICY AND PROCEDURE**

The objective for this requirement is to establish a policy and procedure for the facility to assess resident with dentures, identify cleaning, storage and oral care and inspection to determine integrity of dentures and oral cavity for quality. In addition, in the event of loss or damage to dentures, the policy and procedure will identify referral requirements, financial responsibility and follow up to ensure quality, timely response.

## **PROCEDURE**

1. Upon admission, identify if resident has dentures. Mark dentures with identification per facility protocol.
2. Provide hand hygiene and don gloves. Inspect dentures to determine if full or partial dentures, how the dentures fit and when removed, examine dentures for any cracks, chips and cleanliness.
  - a. Full dentures-resident has no remaining teeth
  - b. Partial dentures – resident has some remaining teeth to connect the partial. The partial can either have plastic bases or may have a metal framework

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3. Inspect oral cavity with dentures removed to determine if there are any oral lesions, masses or ulcers. Use a light source to visualize the back of the mouth. Visually observe and with gloved hands, feel all oral surfaces. If resident is uncooperative or refused oral evaluation, refer for dental evaluation.
4. Ask resident if he/she has had any pain, chewing concerns or problems with fitting of the dentures.
5. If resident is wearing partial dentures, ask resident and/or resident representative if they wear the partial all the times
6. Denture Cleaning:
  - a. Perform hand hygiene and don gloves and explain the procedure to the resident.
    - i. Ask resident to remove (if able) or assist resident in removal of dentures.
    - ii. To remove the denture, grasp the denture with gauze.
    - iii. If resident has partial dentures, identify how it is secured in order to safely remove.
    - iv. Avoid lifting clasps as they can bend or break easily
  - b. Inspect dentures for any chips, cracks and cleanliness
  - c. Place folded wash cloth or paper towel in sink (ore emesis basin) and fill sink with 2-3 inches of water to protect dentures if accidentally dropped while cleaning
  - d. Use (identify denture cleaning product) and soft denture brush to clean dentures.
    - i. Do not use toothpaste for cleaning dentures.
    - ii. Clean and remove food deposits and plaque.
    - iii. Rinse with water
  - e. Place in labeled denture cup in (identify) soaking solution (identify and follow manufacturer's recommendations) or water at night if indicated (follow dentist recommendations and add to care plan).
    - i. Remove gloves and provide hand hygiene.
  - f. Don gloves after hand hygiene.
    - i. Provide oral care with soft toothbrush or sponge-tipped swab.
    - ii. Inspect oral surfaces for ulcers, redness or irritated areas.
    - iii. Remove gloves and perform hand hygiene.
  - g. Report any denture concerns or oral cavity concerns to the nurse
  - h. To replace dentures:
    - i. Perform hand hygiene and don gloves.
    - ii. Rinse dentures and provide oral care prior to replacing dentures in resident mouth.



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- iii. Ensure proper fit.
  - iv. Ask resident if dentures are comfortable or if there are any concerns.
  - v. Assist resident to wash face if needed
  - vi. Remove gloves and perform hand hygiene.
7. If dentures are broken or chipped or if there is a problem with fitting, report to nurse.
  - a) The nurse will refer to dental services within 3 days
    - a. For extenuating circumstances or a delay, the interdisciplinary team will assess and care plan interventions to be implemented for resident to eat and drink adequately while awaiting dental services. Documentation will include:
      - i. Reason for the delay
      - ii. Interventions implemented
      - iii. Resident response to interventions
      - iv. Follow up
    - b) Once appointment is made, the nurse will work with Social Services to arrange transportation to and from dental office
    - c) The nurse will assist the resident in obtaining both routine and 24-hour emergency dental care
8. The Interdisciplinary Team will include Dentures and Dental Services (Section L: Oral/Dental Status) in the MDS 3.0 RAI Process.
9. Social Services will assist residents who are eligible and wish to participate to apply for reimbursement of dental services as incurred medical expense under the State Plan if applicable
10. The facility will assume responsibility and will not charge resident for the repair or replacement of dentures that are the result of facility and/or staff action or accident:
  - a) Employee drops or damages dentures while performing care
  - b) Loss of dentures in the care of facility staff
  - c) Dentures in poor repair, needing replacement, poor fitting dentures or dropped/damaged by resident will be the financial responsibility of the resident for repair/replacement

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