

# HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Correction  
Division Of Prisons

SECTION: Clinical Practice Guidelines

POLICY # CP-37

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SUBJECT: Recommended Antibiotics for  
Dental Infections

EFFECTIVE DATE: September 2012  
SUPERCEDES DATE: None

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## **PURPOSE**

To ensure that all inmates receive appropriate antibiotic therapy for dental infections.

## **BACKGROUND**

Dental infections respond better to some antibiotics than others. This is due primarily to the specific types of bacteria responsible for these infections and the environments in which they thrive (anaerobic vs. aerobic). The most common bacteria isolated in dental infections are anaerobic gram-positive cocci.

## **POLICY**

All dentists, physicians and physician extenders shall follow these guidelines when initiating oral antibiotic therapy for a dental infection.

## **PROCEDURES**

1. An antibiotic should be considered when a patient presents with mild to moderate swelling associated with diseased teeth or gingival tissue. The patient may be afebrile.
2. An antibiotic should be prescribed in cases where there is moderate swelling, swelling under the tongue or in the neck region, difficulty in swallowing, ptosis, fever or rapid onset of infection symptoms associated with diseased teeth or gingival tissue. Clinical judgment is required.
3. Prescribe Penicillin VK 500 mg QID for 7-10 days.  
  
If the patient is allergic to Penicillin, prescribe Clindamycin 300 mg QID for 7-10 days.  
  
For infections with rapid onset manifestations, consider prescribing a stat dose of 1,000 mg Penicillin VK or 600 mg Clindamycin followed by the standard regimen.
4. If Penicillin VK is ineffective after 48 hours, add Metronidazole 500 mg TID to the Penicillin VK regimen or consider a change to Clindamycin 300 mg QID.
5. Use professional judgment when prescribing oral antibiotics less commonly used for dental infections, i.e., Cephalexin. Also, note that Amoxicillin rarely has an advantage over Penicillin and Erythromycins are generally less effective for dental infections. Augmentin (amoxicillin-clavulanic acid) requires UR approval and therefore is not a first-line choice.
6. Penicillin VK, Clindamycin, Metronidazole and Cephalexin are usually available on-site in Nursing Starters so that therapy can begin immediately.

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7. Refer the patient to the facility dentist for follow up treatment.

- References:
- (1) Brook I, Frazier EH, Gher ME. Aerobic and Anaerobic Microbiology of Periapical Abscess. Oral Microbiology Immunology. 1991; 6(2): 123-5.
  - (2) Hupp JR, Ellis E III, Tucker MR. Contemporary Oral and Maxillofacial Surgery. 5<sup>th</sup> ed. St. Louis: Mosby; 2008.
  - (3) Wynn RL, Meiller TF, Crossley HL. Drug Information Handbook for Dentistry. Lexi-Comp, 9<sup>th</sup> Edition, 2003.



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SOR: Dental Director