



IMPRINT OR ENTER DETAILS BY HAND

## Paediatric Emergency Medicine

**Facial Cellulitis with Associated Dental Abscess Order Set  
Day 1**

<b>ORDERS</b>	<b>RN Name &amp; Time</b>
<p><b>EMERGENCY DEPARTMENT:</b></p> <p><input type="checkbox"/> Start PIV and obtain blood work:    <input type="checkbox"/> CBC, diff, blood culture  <span style="margin-left: 200px;"><input type="checkbox"/> Na, K, Cl, glucose, urea, creatinine</span></p> <p><input type="checkbox"/> NPO until cleared by Dentistry</p> <p><input type="checkbox"/> IV fluids D5NS at _____ mL/hr (maintenance)</p> <p><input type="checkbox"/> <b>clindamycin _____ mg IV q8h</b> (13 mg/kg/dose, max 1200 mg/dose)</p> <p><input type="checkbox"/> <b>ibuprofen _____ mg PO q6h prn</b> (10 mg/kg/dose, max 400 mg/dose)</p> <p><input type="checkbox"/> <b>acetaminophen _____ mg PO q4h prn</b> (10-15 mg/kg/dose, max 75 mg/kg/day or 4 g/day)</p> <p><input type="checkbox"/> Dentistry &amp; Inpatient Paediatrics (MAP) consults    <i>**See algorithm on reverse</i></p> <p>MD/NP name: _____ Date: _____</p> <p>Signature: _____ Time: _____</p>	
<p><b>INPATIENT PAEDIATRICS (MAP):</b>    <i>**See algorithm on reverse</i></p> <p><input type="checkbox"/> Patient meets outpatient criteria (determined in collaboration with Dentistry):</p> <p style="margin-left: 20px;"><input type="checkbox"/> Enroll patient into the ACE Space, MRP: Dr. _____</p> <p style="margin-left: 20px;"><input type="checkbox"/> 1<sup>st</sup> dose of clindamycin given in ED before 1200 – transfer to ACE for 2<sup>nd</sup> dose;  MAP must enter pre-admit orders for ACE into KidCare and hand over to 7E</p> <p style="margin-left: 20px;"><input type="checkbox"/> 1<sup>st</sup> dose of clindamycin given in ED between 1200 &amp; 1800 – dispense:  <b>clindamycin _____ mg PO X 1 dose now, less than 2 hr (for home use)</b>  (7-10 mg/kg/dose X 1 dose; max 600 mg/dose)</p> <p style="margin-left: 20px;"><input type="checkbox"/> Discharge home from ED:</p> <p style="margin-left: 40px;"><input type="checkbox"/> Remove PIV</p> <p style="margin-left: 40px;"><input type="checkbox"/> Return to 7D at 0730 with child NPO after 2400</p> <p style="margin-left: 40px;"><input type="checkbox"/> Instructions to take oral clindamycin at _____ (time) if indicated</p> <p style="margin-left: 40px;"><input type="checkbox"/> Enter pre-admit orders for Day 2 in ACE and hand over to 7E</p> <p><input type="checkbox"/> Patient DOES NOT meet outpatient criteria:</p> <p style="margin-left: 20px;"><input type="checkbox"/> Admit to Paediatric Medicine</p> <p>MAP name: _____ Date: _____</p> <p>Signature: _____ Time: _____</p> <p>Paediatric Medicine Staff Physician: _____</p>	

# Facial Cellulitis with Dental Abscess Clinical Pathway

Patient identified in ED as facial cellulitis associated with dental abscess

ED notifies Dentistry and MAP of consultation and initiates care via Order Set.  
1st dose of **clindamycin** given in the ED while awaiting consultations.

Dentistry and MAP consults

### Criteria for ambulatory protocol:

- Systemically well
- No IV hydration required
- No IV analgesia required
- No immunodeficiency
- No metabolic condition

### Responsible team:

- ED
- MAP / Paeds
- 7E

Does patient meet criteria for the ambulatory protocol?

YES

NO

### MAP to enroll patient in the ACE Space

To enroll a patient in ACE (Paediatric Medicine Day Hospital):

1. Communicate with ACE team via email **AND** phone / in person\*\*
2. Fill out paper order set for Day 2 (available in ACE and 7E office) and leave with the ACE RN / 7E Team Lead
3. Handover to 7E medical team and review with 7E Staff MD

*If after 2400 and parental resistance re discharge, contact "7BCDE Bed Board" Taxi voucher and/or accommodations may be available. Otherwise, may be admitted for Day 1 (with plan to make arrangements for Days 2-3 in ACE)*

Admit for clindamycin IV q8h and supportive therapy

When was 1<sup>st</sup> dose of clindamycin given in the ED?

Before 1200

Transfer to ACE: Administer 2<sup>nd</sup> dose of IV clindamycin in ACE prior to going home (pre-admit orders to be entered in KidCare)

After 1200

Discharge home directly from the ED after 1 dose of IV clindamycin with oral clindamycin dose to take at home if IV dose was given between 1200-1800

### Prior to discharge (as per Order Set)

- ✓ Ensure family knows to return to ACE Space at 0730 sharp and directions given to 7D
- ✓ Discharge instructions given (NPO @ 2400, pain management) and ED RNs have taken out the IV
- ✓ Dispense **oral clindamycin dose** if IV dose was given between 1200-1800 (to be taken in 8 hours or not later than 2400)

Return NPO to ACE at 0730 on Day 2 (± Day 3). Continue IV antibiotics.  
*Patients admitted overnight for Day 1 that meet criteria are transferred to ACE for Days 2-3*

Dentistry to reassess patient at 0800 to determine if ready for extraction

Dental extraction under sedation on Day 2 or 3

### Discharged home by the 7E team from ACE

- ✓ Oral clindamycin x 7 day total course
- ✓ Instructions to follow-up with community dentist
- ✓ Discharge instructions and teaching given by Dentistry

### \*\*To book a patient into ACE:

1. Phone
  - 0730-1930, call x203978 for ACE RN
  - 1930-0730, call x227012 for 7E Team Lead
2. Email ACE.requests@sickkids.ca with the following info
  - ✓ name, MRN
  - ✓ time IV clindamycin was given in ED
  - ✓ pertinent history / concerns / social issues