



# DENTISTS: *BE ANTIBIOTICS AWARE*

## Treating Patients with Dental Pain and Swelling

**American Dental Association (ADA) treatment guidelines** state that antibiotics are not needed for the urgent management of most dental pain and intraoral swelling associated with pulpal and periapical infections in immunocompetent adult patients without additional comorbidities.<sup>1</sup>

Patients with dental pain and intraoral swelling should undergo **definitive, conservative dental treatment (DCDT)** and, if needed, use over-the-counter pain relievers such as acetaminophen and ibuprofen. The ADA expert panel recommends **NOT prescribing antibiotics** as an adjunct to most dental conditions when DCDT is available due to limited benefit and potential harm associated with antibiotic use.<sup>1</sup>

Patients should be referred for urgent evaluation if their condition worsens, they develop a deep space infection, or sepsis is suspected.

### ADA Treatment Recommendations<sup>1</sup>

Pulpal/Periapical Condition	DCDT Immediately Available		DCDT Not Immediately Available	
	Prescribe Antibiotics	Perform DCDT	Prescribe Antibiotics	Refer to DCDT
Symptomatic irreversible pulpitis with or without symptomatic apical periodontitis	X	✓	X	✓ Interim monitoring
Pulp necrosis and symptomatic apical periodontitis	X	✓	X*	✓ Interim monitoring
Pulp necrosis and localized acute apical abscess without systemic involvement	X	✓	✓	✓ Urgent referral
Pulp necrosis and localized acute apical abscess with systemic involvement	✓	✓	✓	✓ Urgent referral

\*If DCDT is not feasible, provide a delayed antibiotic prescription to be filled after a predetermined period if symptoms worsen or do not improve

### ✓ ADA Antibiotic Recommendations<sup>†</sup>

**Amoxicillin**  
(500mg, 3 times per day, 3-7 days)

OR

**Penicillin V potassium**  
(500mg, 4 times per day, 3-7 days)

Follow up after 3 days to assess for resolution of systemic signs and symptoms. Discontinue antibiotics 24 hours after complete resolution of systemic signs and symptoms.

<sup>†</sup> For patients with penicillin allergy, please refer to ADA guidelines for treatment recommendation<sup>1</sup>.

This document provides general guidance and does **not** apply to all clinical scenarios. Always assess the individual patient and use your clinical judgment. Refer to ADA guidelines for specific treatment recommendations, definitions, and resources<sup>1</sup>.

1. Lockhart PB, et al. JADA. 2019 Nov;150(11):906-21.

