

# SEATTLE/KING COUNTY CLINIC 2025

## Dental Clinic Overview

The information below is specific to questions we frequently receive from dental professionals. Information that is applicable to all volunteers including check-in and orientation times, a clinic map, as well as reference materials such as sample patient records and dental x-ray training videos, can be found at [seattlecenter.org/skcclinic/orientation](https://seattlecenter.org/skcclinic/orientation). **Please take time to review them!**

### Dental Services

Seattle/King County Clinic offers cleanings, restorative procedures including CEREC crowns, non-complicated extractions, anterior and bicuspid endodontics, limited oral medicine, temporary partial teeth, and x-rays. We will provide approximately one hour's worth of care for each patient. The primary goal is to address the patient's chief complaint to relieve pain and eliminate infection. The care provided should follow this basic principle. In most cases, we will not be able to provide all the care each patient needs.

Certificates for CE credits for dentists, hygienists, and EFDAs will be emailed following the Clinic.

### What is Provided & What to Bring

America's Dentists Care Foundation provides most of the equipment and instruments for the main floor including A-dec patient chairs and delivery units, Aseptico unit mount lights and operator stools, as well as extra chairs, lights and stools for Triage and Lab. In addition, we have secured Bien Air surgical handpieces, additional Cavitrons, lab equipment, a Panorex and Nomads. We have one dental van for part of Endo and/or Pedo.

Instruments:

- Hygiene: cassettes of standard hygiene instruments (mirror, perio probe, explorer 11/12, H5/L5, 204 SD, Columbia 4L/4R, Gracey 13/14 rigid, Gracey 11/12 rigid) as well as ultra-sonic scalers and sharpening stones
- Hand Pieces: slow speed, high speed, surgical hand pieces (W & H and Bien Air)
- Restorative: cassettes of standard restorative instruments as well as explorer, mirror, cotton plier, burnisher, hollenback, composite instrument, condenser, spoon, tanner carver, articulating forceps, tofflemire, amalgam carrier, dycal, mouth prop, spatula, curing light, amalgamator
- Surgical: cassettes of standard oral surgery instruments as well as minnesota, periosteal, large straight elevator, small straight elevator, needle holder, bone file, root tip pick, crane pick elevator, hemostat, tissue forceps, spoon curette, scissors, potts east/west, crown/bridge scissors, rongeur, cryers, syringes, 23 (cowhorn) forceps, 88L forceps, 88R forceps, root tip elevator, 53L forceps, 53R forceps, bird beaks, anterior forceps, 17 forceps, 151 forceps, 150 forceps, pedo 151s forceps, pedo 150s forceps

Anesthesia: lidocaine, marcaine, mepivacaine, septocaine

Onsite medications: amoxicillin 500mg, azithromycin 250mg (for use in lieu of clindamycin), acetaminophen 325mg, acetaminophen 500mg, ibuprofen 200mg, ibuprofen 600mg.

Personal protective equipment (PPE): gloves, ASTM procedure masks, KN95 masks, N95 masks, safety glasses, face shields, disposable coats. Please wear PPE correctly and **remove all but (potentially) your mask when leaving the treatment area.**

**Please bring:**

- Your own eye protection, loupes and/or headlamps, as desired. The lighting will not be as bright and focused as in your practice.
- Clamps, punch, forceps and frame, if you prefer to work with a dam. We'll provide dam materials.
- Sectional matrix system, if you prefer to work with one.
- Other preferred instruments, as desired.
- Your NPI#, as appropriate.

**Endo:** We have basic endo supplies, and the equipment listed below. Supplies and equipment are shared between the dental van (2 chairs) and 2 chairs on the dental floor. If you have preferred brands or specialized equipment, we encourage you to bring your own.

- Global Microscope (1) **\*\*Please plan to bring your own loupes/magnification as we only have 1 microscope available\*\***
- Backfill Obturation Units: Calamus (4) / Dentsply (1)
- Apex Locator (4)
- System B (1)
- Rotary Motors (4)
- Limited assortment of nickel titanium rotary files (Dentsply WaveOne, SS White DC Taper, Kerr ZenFlex)

**Dental Lab:** While the Clinic provides lab equipment and commonly used supplies, we are not able to procure some of the specialized or personalized equipment you might prefer. Our Lab Leads recommend you bring the following supplies and equipment, as possible: handpiece, electric waxer, bench light, hand tools, lab knife, burs for acrylic models (shaping teeth, etc.), polishing compounds (if specific), calipers, Boley gauge/mm ruler, wire cutters, wire benders/pliers, indicating spray.

We have a team of volunteers that will handle sterilization. If you bring personal instruments, write your name and chair number on a sterilization pouch so they can be returned to you after being sterilized.

Keep your belongings safe by labeling them with your name and keeping track of them throughout the day. We are not responsible for articles that are damaged, lost or stolen.

**What to Expect**

When patients arrive in the dental clinic, they will have been through Patient Registration and Patient Intake (vitals and medical history). Patients can be identified by a colored wristband with the date printed on it; patient companions will have a white wristband with the date printed on it.

**NO PATIENT IS TO RECEIVE SERVICES WITHOUT A PINK DENTAL RECORD** (a sample is available at [seattlecenter.org/skccclinic/orientation](http://seattlecenter.org/skccclinic/orientation)). If a patient is missing the form, please have them escorted to Dental Checkout so it can be resolved.

We use a colored card system to indicate when a clinical volunteer is ready for a new patient, for a patient to be retrieved by an escort, and for volunteers to help clean and reset the station. This increases efficiency because it minimizes the need to leave the treatment chair. **The dental floor is a busy space with a lot of moving bodies, when using these cards please raise them high in the air.**

Upon arrival in the dental clinic, patients will see a Triage dentist who will evaluate which service is most needed (one service per day – except in the case of interconnected services like Endo/CEREC, Temporary Partials/Surgery) and take x-rays, as appropriate. The treatment plan will be determined by Dental Leadership in Triage Review based the Triage dentist's assessment, conversation with the patient about their interests, as well as service area capacity. Afterward the patient will be directed to the waiting area for the appropriate service.

When you initially meet a patient, please review their health history on the **separate Patient Intake Record in the patient's green folder** to note allergies and any conditions that may require pre-medication before treatment.

**If you find a serious or threatening condition, please make the patient aware of it and notify the Dental Directors so the patient may be referred for follow-up care.**

Please don't hoard instruments and supplies. If you take more than what you require for one patient, other practitioners will not have what they need. It also causes problems in the sterilization area at the end of the day when a huge supply of instruments that were not used are brought back and need to be re-sterilized. Trust that you will have what you need when you need it. **If you don't find supplies you are looking for, please ask leadership in the dental supplies area.**

Clinical volunteers should focus on the designated treatment plan. If you discover additional care to adjacent teeth is required, use your professional judgment to determine whether there is sufficient time within a **one-hour service window** to address the issue or check with a Dental Director. **DO NOT** promise patients additional services or authorize them to come back on a subsequent day without receiving authorization from a Dental Director. If in your professional opinion there is more urgent care needed than what has been indicated in the treatment plan, contact a Dental Director to sort it out.

**EMT's will be onsite, near the dental floor, in the event of an emergency. After ensuring the person is attended to, please be sure the Dental Directors are aware that an emergency occurred.**

**Notify a dental leader in the event of any injury or accident.**

**Alert a dental leader if you need behavioral health support or security.**

Once you have completed a patient procedure, please be sure to **fill out all sections of the Dental Record relative to the treatment provided** (a sample is available at [seattlecenter.org/skcclinic/orientation](https://seattlecenter.org/skcclinic/orientation)). This is important for tracking services provided at the Clinic and for ensuring proper follow-up care. Any copies of printed x-rays should remain with the record.

To prescribe medication, fill out the pharmacy section of the patient Dental Record. If it is a prescription to be filled offsite, besides documenting it in the Dental Record, go to the Dental Director table to complete a written prescription and give it to the patient. Any patient who has been prescribed medication should be sent to see the pharmacists before going to Dental Checkout. Pharmacists will dispense onsite medications ordered in the Dental Record, review written prescriptions for legibility and completeness, as well as counsel patients on medication use.

**It is our policy not to prescribe opioids.** Volunteer practitioners are advised to use discretion when prescribing opioids and should only do so in extreme cases when absolutely necessary.

Remind patients it is important to turn in their pink Dental Record at Dental Checkout. Also **encourage them to visit the Healthcare Resources** table near Dental Checkout for information to support their continued care.

Dental Checkout volunteers will ensure the patient understands any post-care instructions and that their Dental Record is complete before releasing the patient. They will seek providers for clarification as required, please be responsive to their requests.

#### **STUDENT PARTICIPATION PARAMETERS:**

Seattle/King County Clinic is not an accredited educational program. We welcome health profession students however participation in a clinical capacity varies by discipline and student involvement in direct patient care is **limited to the parameters established by Clinic Leadership**. Students, clinical volunteers, and faculty are advised:

- Students should not extend beyond the scope of responsibilities of their registered Clinic assignment, whether clinical or non-clinical in nature.
- Students who are licensed/credentialed in a clinical field should not extend beyond the scope and limits of their current license/credential.
- Licensed/credentialed volunteers and faculty are not permitted to redirect students to any role or capacity beyond their registered Clinic assignment.
- Any questions about the parameters of student participation should be directed to Clinic Leadership.

#### **Additional Questions & Information**

This document cannot possibly cover all details about the Clinic. Please do not hesitate to direct additional questions to Clinic Leadership. Thank you again for your contributions and compassion!