

Placement of Temporary Restorations

All registrants may perform restorative procedures of a temporary nature as part of their scope of practice, in any setting. The performance of restorations of a temporary nature is dependent on the competence of the dental hygienist and the needs of the client. A dental hygienist must always inform the client that the restoration is temporary and must refer the client to a dentist for further examination and treatment.

The primary reasons that a dental hygienist would consider the insertion of a temporary restoration are to free the client from pain and to reduce the possibility of further damage to the tooth until the client is able to see a dentist.

The materials usually employed are zinc-oxide eugenol, glass ionomer or other medicated/ non-medicated temporary cements. Temporary restorations may be placed in either primary or permanent teeth as a preventive measure when:

- Access to a permanent restoration is not immediate or practical
- There is a reasonable risk of further damage to the tooth structure
- The pulp is not exposed
- The client is in discomfort or is experiencing difficulty in eating
- The discomfort is due to recent trauma, fracture or lost dental restoration
- The client has not received any medical/dental advice that would contra indicate placing a temporary restoration
- The client consents to the treatment and it is in the client's best interest to proceed
- There are no medical contraindications to the restorative material

The client record must indicate the tooth restored, the material used and the notification to the client that the restoration is temporary. The referral to a dentist must be noted.