# **BEST PRACTICES**

The Best Practices of the Royal College of Dental Surgeons of Ontario (RCDSO) contain practice parameters and best practices which should be considered by all Ontario dentists in the care of their patients. It is important to note that these Best Practices may be used by the College and its committees in determining whether appropriate standards of practice and professional responsibilities have been maintained.

## Orthognathic Surgery in Out-of-hospital Facilities

#### **INTRODUCTION**

The best practices outlined in this document are intended to support oral and maxillofacial surgeons ("OMFS") in meeting the standard of care when performing orthognathic surgical procedures in out-of-hospital facilities.

Oral and maxillofacial surgeons (OMFS) are expected to use good professional judgment in deciding where to provide care. The same standard of care applies whether care is provided in hospital or an out-of-hospital facility. The paramount consideration is patient care and safety.

### BEST PRACTICES FOR PERFORMING ORTHOGNATHIC SURGERY IN OUT-OF-HOSPITAL FACILITIES

- **1.** The OMFS complies with all legal, professional, and ethical obligations that apply to the practice of dentistry.
- 2. The OMFS has hospital admitting privileges at the closest critical care hospital to the out-of-hospital facility where the orthognathic surgery is being performed.
- **3.** Care is taken to only select the most appropriate patients, in light of the risk associated with orthognathic surgery.
  - a. Patients are ASA I or II. Patients who are ASA III are not typically suitable for orthognathic surgery in out-of-hospital facilities.
  - b. Patients are screened for their reliability and anticipated compliance with postoperative care.
  - c. Patients have adequate support at home for postoperative care.
  - d. Trauma and pathology related cases are not typically appropriate for orthognathic surgery in out-of-hospital facilities.

- **4.** The operatory and recovery area at the out-of-hospital facility are set up and equipped to provide the same standard of care as in hospitals where orthognathic surgery is performed.
  - a. The out-of-hospital facility operatory and recovery area has the same equipment, medications and drugs as a typical hospital facility where orthognathic surgery is performed.
- **5.** There are an adequate number of appropriately trained health care professionals and staff at the out-of-hospital facility to provide the same standard of care pre, intra, and post-operatively, as in hospitals where orthognathic surgery is performed.
  - a. The OMFS do not use the single anesthesia provider model, where they are responsible for performing the procedure and overseeing the anesthesia.
  - b. The general anesthesia is administered by a medical anesthesiologist and supported by an appropriate anesthetic care team. The knowledge, skills and judgment of the anesthetic team members supporting the orthognathic surgery are equivalent to a typical in hospital anesthetic care team
  - c. The knowledge, skills and judgment of the recovery team are equivalent to a typical in hospital recovery care team.
  - d. The OMFS and anesthesiologist remain available on-call until the patient is discharged from the out-of-hospital facility.

### **ADDITIONAL RESOURCES**

All dentists and physicians administering sedation or general anesthesia in a dental facility must also adhere to the <u>Standard of Practice</u> – <u>Use of Sedation and General Anesthesia in Dental Practice</u>.