

MOUTH CARE CAREPLAN

PROTOCOL ONE

DATE	PATIENT'S NAME		SIGNATURE/ COUNTER SIGNATURE
	Problem/Need: Predisposing factors: If the patient has a reduced level of consciousness and is unable to cooperate with this protocol, use protocol two. Consult the Mouthcare – Scores and Protocols policy for more detail.		
	Aim:		
Score	Description	Plan	Notes
1	Clean (Clean, moist mouth)	Maintain oral hygiene Aquagel for lip protection	For these scores, record on general nursing care plan. For scores of 4 and above, initiate care plan agreeing management with medical team
2	Dirty (Mouth generally dirty, debris)	As 1	
3	Dry (Dry mouth)	1+ Saliva management – ice/ gum/pilocarpine/oralbalance	
4	Coated (Coated tongue)	1+ Bicarb toothpaste/vit C	Increase frequency of mouthcare
5	Red (Erythematous candidosis)	1+ Nystatin/Oxford mixture	Scores 5-7 all indicate oral candida. Second line treatment is fluconazole. Consider Oxford mixture if painful
6	Cracked corners (Angular cheilitis)	5+ Topical miconazole	
7	Thrush (Pseudomembranous candidosis – white/yellow mucosal plaques)	As 5	
8	Ulcers (Abrasions, ulcers, herpes simplex, pain)	1+ Corlan/bonjela/ad cortyl (painful/barrier needed) Chlorhexidine (widespread) Oral acyclovir (herpes simplex)	For pain, topical or systemic analgesic (including opioid) or topical anaesthetic may be considered
9	Bleed (Swollen, inflamed or bleeding gums, pain)	8+ Sucralfate mouthwash	g:/drive.clinical.careplans.mouth care.Jan 2009