

# **ORAL HYGEINE**

## **Key Terms**

Dentures	Radiotherapy	Vaccu Suck
Chlorhexidine	Immunosuppression	Oralcavity

#### INTRODUCTION

Good oral hygiene involves cleanliness, comfort and the moisturizing of the mouth structure.

#### **DEFINITION:**

Oral hygiene means brushing or cleaning the oral cavity or the dentures using alcohol based mouth wash.

#### **INDICATION:**

- Patients whose diet is restricted or who have poor nutrition;
- Patients who are suffering from dehydration, nausea or vomiting;
- Patients on oxygen therapy;
- Patients who are receiving radiotherapy or cytotoxic therapy for malignant disease.
- Patient who are unable to perform oral hygiene on their own

#### **EQUIPMENTS**

- Tray containing
- 2 % Chlorhexidine Mouth wash
- Ounce glass
- Water for dilution
- Spatula
- Sterile tray containing artery forceps, thumb forceps, 1 bowl, gauze piece.
- Mackintosh
- Face towel



- Lubricant for lips (eg. Vaseline)
- Kidney tray

## ADDITIONAL EQUIPMENT FOR SPECIALISED MOUTH CARE AS REQUIRED

- Suction brush
- Hand care
- Suction equipment
- Vaccu Suck
- 100 ml NS for flush

#### ASSISTING THE CLIENT WITH ORAL CARE

S.NO	NURSING ACTION	RATIONALE
1.	Explain the procedures	Providing information, fosters cooperation,
		understanding and participation in care.
2.	Collect all equipments required	Organization of equipments facilitates accurate
		skill performance
3.	Close door and /or put screen	To maintain privacy
4.	Perform hand hygiene and wear	To prevent the spread of infection
	clean gloves	
5.	Prepare chlorhexidine solution	Solutions must be prepared each time before
	with water in 1:1 ratio.	use to maximize their efficacy
6.	Assist the client a comfortable	To promote his/her comfort and safety and
	upright position or sitting position	effectiveness of the care including oral
		inspection and assessment

7.	Inspect oral cavity	Comprehensive assessment is essential
	1) Inspect whole the oral cavity	to determine individual needs
	,such as teeth,gums, mucosa and	Some clients with anemia,
	tongue, with the aid of Spatula and	immunosuppression, diabetes, renal
	torch	impairment, epilepsy and taking
	2) Take notes if you find any	steroids should be paid attention to oral
	abnormalities, e.g.,	condition.
	bleeding, swelling, ulcers, sores,	They may have complication in oral
	etc.	cavity.
8.	Place face towel over the client	To prevent the clothing form wetting and not
	chest or on the thigh with	to give uncomfortable condition
	mackintosh	
9.	Put kidney tray in hand or assist the	To receive disposal surely
	patient holding a kidney tray	
10.	Instruct the client to brush teeth	
	Points of instruction	
	1) Patient places a soft toothbrush	Effective in dislodging debris and
	at a 45 °angle to the teeth.	dental plaque from teeth and gingival
	2) Patient brushes in direction of	margin
	the tips of the bristles under the	
	gum line with tooth paste.	

	Rotate the bristles using vibrating	Cleansing posterior direction of the
	or jiggling motion until all outer	tongue may cause the gag reflex
	and inner surfaces of the teeth and	
	gums are clean.	
	3) Patient brushes biting surfaces	
	of the teeth	
	4) Patient clean tongue from inner	
	to outer and avoid posterior	
	direction.	
11.	Rinse oral cavity	
	1) Ask the client to rinse with	To make comfort and not to remain any
	diluted chlorhexidine and void	fluid and debris
	contents into the kidney tray.	To reduce potential for infection
12.	Ask the client to wipe mouth and	To make comfort and provide the well-
	around it.	appearance
13.	Confirm the condition of client's	To moisturize lips and reduce risk for cracking
	teeth, gums and tongue. Apply	
	lubricant to lips.	
14.	Rinse and dry tooth brush	To prevent the growth of microorganisms
	thoroughly. Return the proper place	
	for personal belongings after drying	
	up.	

15.	Replace all instruments	To prepare equipments for the next procedure
16.	Discard dirt properly and safely	To maintain standard precautions
17.	Remove gloves and wash your	To prevent the spread of infection
	hands	
18.	Document the care and sign on the	Documentation provides ongoing data
	records.	collection and coordination of care
		Giving signature maintains professional
		accountability
19.	Report any findings to senior staffs	To provide continuity of care

## PROVIDING ORAL CARE FOR DEPENDENT CLIENT

S.NO	NURSING ACTION	RATIONALE
1.	Wash hand and apply clean gloves	Reduce transmission of microorganism
2.	Provide privacy	To maintain patient dignity
3.	Assess the need for oral hygiene	Determine status of oralcavity and extend
		of need for oral hygiene
4.	Remove the clean glove	Reduce transmission of microorganism
5.	Explain the procedure and need for the oral	For clients involvement with the
	hygiene	procedure and to minimize anxiety
6.	Prepare the equipment near the bed side	Provides accessible work area
7.	Raise the bed to comfortable	Proper position helps the patient from
	working position	chocking or aspirating

	Raise headend of the bed and lower	
	the side rails. Move patient closer	
	(side lying position can be used)	
8.	Place towel over clients chest	Prevent soiling
9.	Place the kidney tray near the headend	To receive disposal surely
10.	Open the sterile pack with the bowl facing upward	To pour solution in a sterile way.
11.	Prepare chlorhexidine and water with 1:1	Solutions must be prepared each time
	ratio	before use to maximize their efficacy
12.	Apply sterile gloves	To prevent cross infection
13.	Carefully separate upper and lower teeth	For exposure of the oral cavity
14.	Clean oral surfaces:	
	If the patient is on ventilator or absence of	
	gag reflux use specially designed brush	
	connected to vaccu suck to wall mounted	
	suction apparatus.	
15.	Ask the client to open the mouth and insert	The spatula assists in keeping the client's
	the padded spatula gently from the angle of	mouth open. As a reflex mechanism, the
	mouth toward the back molar area.	client may bite the fingers.



Never use your fingers to open the client's mouth.

16.	Clean the client's teeth from incisors to	Friction cleanses the teeth.
	molars using up and down movements	
	from gums to crown.	
17.	Clean oral cavity from proximal to distal,	Friction cleanses the teeth.
	outer to inner parts	
18.	Rinse and dry tooth brush thoroughly.	To prevent the growth of microorganisms
	Return the proper place for personal	
	belongings after drying up.	
19.	Clean tongue from inner to outer aspect	Microorganisms collect and grow on
		tongue surface and contribute to bad
		breath.
20.	Rinse oral cavity:	
	1) Provide the prepared chlorhexidine	
	solution and position kidney tray.	To remove debris and make
	2) If the client cannot gargle by	refresh
	him/herself,	Rinsing or suctioning removes
	a) rinse the areas using moistened gauze	cleaning solution and debris.
	3) Assist to void the contents into kidney	To avoid aspiration of the
	tray. If the client cannot spit up, especially	solution
	in the case of unconscious client, suction	
	any solution.	
21.	Confirm the condition of client's teeth,	To assess the efficacy of oral care and
	gums, mucosa and tongue.	determine any abnormalities

## **Clinical Nursing Manual**

#### Procedure

1	1
Wipe mouth and around it. Apply lubricant	Lubricant prevents lips from drying and
to lips by using foam swab or gauze piece	cracking
with artery forceps	
Reposition the client in comfortable	To provides for the client's comfort and
position.	safety
Replace all equipments in proper place.	To prepare equipments for the next care
Discard dirt properly and safety	To maintain standard precautions
Remove gloves and perform hand hygiene	To prevent the spread of infection
Document the care and sign on the records.	Documentation provides ongoing
	data collection and coordination
	of care.
	Giving signature maintains
	professional accountability
21. Report any findings to the senior staff	To provide continuity of care
	with artery forceps  Reposition the client in comfortable position.  Replace all equipments in proper place.  Discard dirt properly and safety  Remove gloves and perform hand hygiene  Document the care and sign on the records.



## FREQUENCY OF CARE

Oral care should be performed at least every four hours. Fourth hourly care will reduce the potential for infection from microorganisms.

#### **DOCUMENTATION**

- Document the care and sign on the records
- Document the condition of the oralcavity for any bleeding, swelling, halitosis



## PATIENT FAMILY EDUCATION:

- Instruct the patient not to swallow the solution
- Instruct the patient not to bite the brush during the procedure