OPEN TEXAS

TEXAS STATE BOARD OF DENTAL EXAMINERS GUIDANCE FOR MINIMIZING RISK OF COVID-19 TRANSMISSION



GOVERNOR ABBOTTS EXECUTIVE ORDER

Governor Abbott's Executive Order (GA-19) Beginning at 12:01 a.m. on May 1, 2020, all licensed health care professionals shall be limited in their practice by, and must comply with, any emergency rules promulgated by their respective licensing agencies dictating minimum standards for safe practice during the COVID- 19 disaster.

COVID-19 BACKGROUND

According to the CDC, COVID-19 is a new or novel disease and is thought to spread mainly between people who are in close contact with one another (within about 6 feet) through respiratory droplets produced when an infected person coughs or sneezes. Dental procedures that use dental instruments such as handpieces, ultrasonic scalers, and air-water syringes create a spray that can contain contaminated droplets and aerosols. Because the method of infection of COVID-19 is via droplets and aerosols, which challenge the <u>Standard Precautions</u> alone, <u>Transmission-Based Precautions</u> are also recommended.

We recommend that dental health care personnel (DHCP) take the following precautions before, during, and after patient care to minimize potential exposure of patients and staff to COVID-19.

BEFORE DENTAL CARE STARTS

Dentist and Dental Team Preparation

- Dental offices should create COVID-19 procedures and provide dental health care personnel (DHCP) training regarding the COVID-19 office procedures. These procedures should include the pre-schedule screening protocol, in office screening protocol for patients and DHCP, office's transmission-based infection control precautions, as well as protocol to be implemented if DHCP suspects an exposure to COVID-19.
- 2. Encourage that the dental health care personnel (DHCP) have received their seasonal fluvaccine.
- 3. DHCP experiencing influenza-like-illness (ILI) (fever with either cough or sore throat, muscle aches) should not report to work.
- 4. DHCP who are of older age, have a pre-existing, medically compromised condition, pregnant, etc., are perceived to be at a higher risk of contracting COVID-19 from contact with known or suspected COVID-19 patients. Dental offices "... should consider and address the level(s) of risk associated with various worksites and job tasks workers perform at those sites." It is suggested that providers who do not fall into these categories (older age; presence of chronic medical conditions, including immunocompromising conditions; pregnancy)" may be prioritized to provide care.
- 5. All DHCP should self-monitor by remaining alert to any respiratory symptoms (e.g., cough, shortness of breath, sore throat) and check their temperature twice a day, regardless of the presence of other symptoms consistent with a COVID-19 infection.
 - a. To prevent transmission to DHCP or other patients, contact your <u>local health department</u> immediately if you suspect a patient has COVID-19.
- 6. Remove magazines, reading materials, toys and other objects that may be touched by others and which are not easily disinfected.
- 7. Print and place signage (https://www.cdc.gov/coronavirus/2019-ncov/downloads/stop-the-spread-of-germs.pdf) in the dental office for instructing staff and patients on standard recommendations for respiratory hygiene/cough etiquette and social distancing.

Scheduling Considerations

- 1. Develop and utilize an office protocol to screen all patients by phone before scheduling and during patient confirmation prior to appointment.
- 2. If possible, schedule appointments apart enough to minimize possible contact with other patients in the waiting room.

3. If possible, prevent patients from bringing companions to their appointment, except for instances where the patient requires assistance (e.g., pediatric patients, people with special needs, elderly patients, etc.). If companions are allowed for patients receiving treatment, they should also be screened for signs and symptoms of COVID- 19 during patient check-in.

UPON PATIENT ARRIVAL

1. Please follow your dental office protocol for in person patient screenings, once patient arrives, perform a temperature check.

DURING DENTAL CARE

Standard and Transmission-based Precautions and Personal Protective Equipment (PPE)

- DHCP should adhere to Standard Precautions, which include: hand hygiene, use of PPE, respiratory hygiene/etiquette, sharps safety, safe injection practices, sterile instruments and devices, clean and disinfected environmental surfaces. https://www.cdc.gov/oralhealth/infectioncontrol/pdf/safe-care2.pdf
- 2. If possible, DHCP should implement Transmission-Based Precautions, including N-95 respirator masks for all DHCP who will be within 6 feet of any and all procedures likely to involve aerosols. https://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html)
- 3. If N-95 respirators are not available, a surgical mask and eye protection with a face shield to protect mucous membranes of the eyes, nose, and mouth during procedures likely to generate splashing or spattering of blood or other body fluids.
- 4. DHCP should adhere to the standard sequence of donning and doffing of PPE. (https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf).
 - a. Attempt to complete the full treatment of one patient before leaving the treatment area and on to another patient.

Clinical Technique (Handpieces, Equipment, etc.)

- 1. Recommend patient perform a pre procedure rinse.
- 2. Reduce aerosol production as much as possible, as the transmission of COVID-19 seems to occur via droplets or aerosols, and DHCP may prioritize the use of hand instrumentation.
- 3. DHCP should use dental isolation if an aerosol-producing procedure is being performed to help minimize aerosol or spatter.

AFTER DENTAL CARE IS PROVIDED

Post-op Patient Guidance

Instruct patient to contact the office if they experience COVID-19 symptoms within 14 days after the dental appointment.

DHCPs Going Home After a Workday

1. DHCPs should change from scrubs and PPE to personal clothing before returning home.