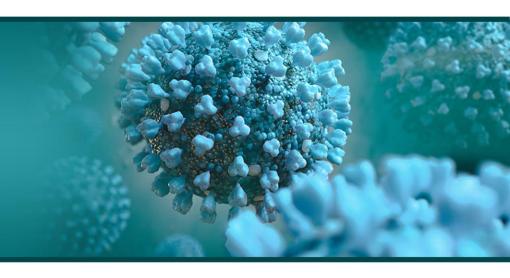




COVID-19 & DENTISTRY

Practice and Patient Safety During a Pandemic





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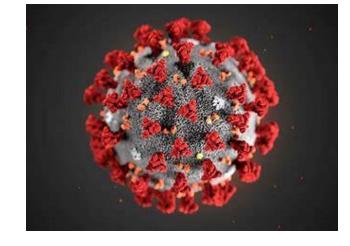




COVID-19: What is it?

 Pandemic – an outbreak of a disease that occurs over a wide geographic area and affects an exceptionally high proportion of the population.

- Known as:
 - COVID 19 (Coronavirus Disease, 2019)
 - SARS-CoV-2, 2019 (Severe Acute Respiratory Syndrome Coronavirus 2)
 - Novel Coronavirus
 - nCov



Initial outbreak was in Wuhan, China in December 2019





COVID-19: How are people affected?

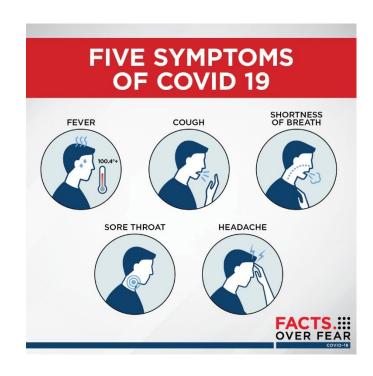
- COVID-19 is spread from person-to-person through small droplets from the nose or mouth when a person with the virus:
 - Coughs, sneezes, exhales
 - Touches something or someone
- Currently, the estimated incubation period is between 1 14 days, most commonly 5 days
- Older persons and persons with pre-existing medical conditions appear to develop serious illness more often than others





COVID-19: What are the symptoms?

- Fever temperature 100.4° F or greater
- Dry cough
- Shortness of breath or difficulty in breathing
- Less common symptoms may include:
 - Diarrhea
 - Aches and pains
 - Runny nose







COVID-19: What protective measures should be taken?

- Wash hands frequently
- Maintain social/physical distancing
- Avoid touching: eye, nose, mouth
- Practice respiratory hygiene



If you have primary symptoms, seek medical care early. Stay informed and follow advice given by your healthcare provider.





CORONAVIRUS DISEASE 2019

(COVID-19)





Social distancing means putting space between yourself and others.

cdc.gov/COVID19

COVID-19: How do I keep my dental office safe?

- Clean and disinfect frequently touched objects and surfaces:
 - Doorknobs
 - Light switches
 - Cabinet handles
 - Front desk areas
- Time to toss those waiting room magazines!
 - Wipe down all hard surfaces in the waiting area regularly
- Offer hand sanitizer to patients at the front desk
- Screen patients on the phone: fever, cough, shortness of breath, etc...







Follow all CDC Infection Control Recommendations!

- Dentistry has been at the forefront of addressing infectious diseases due to the lessons learned with the other ongoing pandemic: HIV
- Good sterilization practices are now more important than ever!
- Always wear your PPE
- Protect your dental labs by disinfecting your impressions and cases





COVID-19: Infection Control

- Minimize chances for exposures
 - Instruct patients to call ahead/reschedule appointments
 - Adhere to Standard and Transmission-based Precautions
 - Take precautions when performing aerosol-generating procedures (AGPs)
 - Use N95 respirators in addition to normal PPE, including: eye protection, gloves, and a gown
 - > Protect your N95 by wearing a regular surgical mask over it so you can reuse





American Dental Association Recommendations

- "In order for dentistry to do its part to mitigate the spread of COVID-19, the ADA recommends dentists nationwide postpone elective procedures for the next three weeks.
- Concentrating on emergency dental care will allow us to care for our emergency patients and alleviate the burden that dental emergencies would place on hospital emergency departments."





American Dental Association Recommendations

"The guidance may change as the COVID-19 pandemic progresses," according to the Association. "Dentists should use their professional judgment in determining a patient's need for urgent or emergency care ... which focuses on the management of conditions that require immediate attention to relieve severe pain and/or risk of infection and to alleviate the burden on hospital emergency departments."





American Dental Association Recommendations: Emergency Procedures

Examples of urgent dental care treatments, which should be treated as minimally invasive as possible, include:

- Severe dental pain from pulpal inflammation
- Pericoronitis or third-molar pain
- Surgical postoperative osteitis or dry socket dressing changes
- Abscess or localized bacterial infection resulting in localized pain and swelling
- Tooth fracture resulting in pain or causing soft tissue trauma
- Dental trauma with avulsion/luxation
- Dental treatment cementation if the temporary restoration is lost, broken or causing gingival irritation

Other emergency dental care includes extensive caries or defective restorations causing pain; suture removal; denture adjustments on radiation/oncology patients; denture adjustments or repairs when function impeded; replacing temporary filling on endo access openings in patients experiencing pain; and snipping or adjustments of an orthodontic wire or appliances piercing or ulcerating the oral mucosa.





American Dental Association Recommendations: Non-emergency Procedures

Include but are not limited to:

- Initial or periodic oral examinations and recall visits, including routine radiographs
- Routine dental cleaning and other preventive therapies
- Orthodontic procedures other than those to address acute issues (e.g., pain, infection, trauma)
- Extraction of asymptomatic teeth
- Restorative dentistry including treatment of asymptomatic carious lesions
- Aesthetic dental procedures





Centers for Medicare & Medicaid Services Recommendations

CMS Adult Elective Surgery and Procedures Recommendations: Limit all nonessential planned surgeries and procedures, including dental, until further notice

To aggressively address COVID-19, CMS recognizes that conservation of critical resources such as ventilators and Personal Protective Equipment (PPE) is essential, as well as limiting exposure of patients and staff to the SARS-CoV-2 virus. Attached is guidance to limit non-essential adult elective surgery and medical and surgical procedures, including all dental procedures. These considerations will assist in the management of vital healthcare resources during this public health emergency.

Dental procedures use PPE and have one of the highest risks of transmission due to the close proximity of the healthcare provider to the patient. To reduce the risk of spread and to preserve PPE, we are recommending that all non-essential dental exams and procedures be postponed until further notice.





Canadian Dental Association Recommendations

While the World Health Organization (WHO) declared COVID-19 a pandemic, the degree to which this pandemic affects each region in Canada varies immensely; in all circumstances, dentists take infection prevention and control practices seriously and understand their social responsibility to contain the spread of COVID-19.

While science provides solid recommendations about what dentists should do, advice needs to reflect provincial, as well as local contexts. Therefore, the Canadian Dental Association suggests:

"Dentists: Given the rapidly evolving COVID-19 situation, dentists licensed to practise in Canada are asked to consult the website and communiqués of the dental regulatory body in their province/territory, as well as the website and communiqués of their provincial/territory dental association."





What's the latest?

This is an ever-changing pandemic – it's important for all members of the dental team to stay informed to protect each other and all of those we provide service to.





COVID-19: New Coronavirus Stable for Hours on Surfaces

- The virus that causes Coronavirus disease 2019 (COVID-19) is stable for several hours – days in aerosols and on surfaces
 - ❖ National Institutes of Health → The New England Journal of Medicine
- People may acquire the virus through the air and after touching contaminated objects
 - Detectable in aerosols for up to 3 hours
 - Detectable on cardboard for up to 24 hours
 - ❖ Detectable on plastic & stainless steel for up to 2 3 days





COVID-19: Thank You!

Have topics you'd like us to cover in next week's webinar on COVID-19 & Dentistry? Let us know in the post-webinar survey when you exit today's webinar.

For more information and a full list of references, please visit the Henry Schein COVID-19 resource center:

www.henryschein.com/COVID19update



