ISDA Addendum to ADA Return to Work Interim Guidance Toolkit

The ADA Return to Work Interim Guidance Toolkit is an excellent document that should serve as the blueprint for all practices as they begin to expand the services they provide.

This addendum was created by the ISDA ad-hoc committee on dental practice reopening. Using the ADA toolkit as a foundation, this guide contains the following:

- Sample implementation plan for Orthodontics
- Sample implementation plan for Pediatric Dentists
- Sample implementation plan for Prosthodontics
- PPE Resources
- Highlights of ADA / OSAP Live Webinar: Respiratory Protection in the Era of COVID-19
- Update on Infection Control. This is a straightforward tutorial on managing infection control in the dental office.
- Pictures of Simple Modifications

We will update this guide as more information becomes available. Please contact the ISDA (info@theisda.org or 208 343 7543) with questions.
Sample implementation plan for Orthodontics

Scheduling:

- Schedule such that only every other chair has a patient until further notice.
- Schedule staggered appointments.
- There will no longer be “Debond” days.
  - No treats will be given out.
  - No pictures will be taken w/doctor or assistants.
  - Schedule only one debond at a time and schedule patient in the laser room so that door can be closed.
  - A second assistant will be scheduled to assist with debonds and use HVE.
- Add 10 additional minutes between every patient for extra cleaning of units/chairs.
  - Assistants need to stay on time to keep this extra time open. Watch your out time and perform treatment accordingly.

Morning Meeting:

- **Scheduling coordinator**: Review patient flow and areas that there may be concern of any possible office congestion.
- **Doctor**: Review any new recommendations in PPE and review ADA and AAO recommendations daily and check to see that everyone is in clean scrubs and lab coats on.
- **Lab assistant**: Ensure that all doors are propped open; check that signage is still intact on doors and windows.
- **Lead Clinical Assistant**: Review inventory of supplies, masks, gloves, gowns, etc. and any potential issues with re-stocking.

Pre-Appointment:

- **Wellness Screening Form**:
  - Patient will receive a screening form through Weave to be filled out and submitted prior to the appointment. If it is not received by our office prior to the appointment, the Scheduling Coordinator will call and reschedule the appointment.
  - If patient reports any symptoms
- **Curbside Waiting**:
  - Patient will wait in their car until an assistant is ready for them.
  - An hour prior to their appointment Weave will automatically send a text message to remind them to stay in their cars when they arrive.
  - Curbside waiting area is designated with signs in windows.
  - Patients will text message the office back to let them know that they have arrived.
  - Front desk will check in the patient to alert the assistant that their patient has arrived.
  - Front desk will text them when the assistant is ready to see their patient. Assistants will be standing in the doorway next to the front desk anticipating arrival of their patient.
  - Only the patient will enter the building.
    - New child patients will be accompanied by one parent only, no siblings.
**Patient Flow:**

- After patient is texted that it is time for their appointment, the will enter through the open front doors. Front desk will instruct the patient to use hand sanitizer as they enter. The assistant will be waiting for their patient in gloves, mask and face shield. Patients will be taken back to the clinic through the main hallway.
- Assistants will schedule the next appointment chairside and will give each patient an appointment card with the date and time. Instruct the patient to tell parent that if the next appointment slot will not work to call us to reschedule.
- Assistants will walk the patient through the back hallway and out the back door. Walk the patient to the sidewalk, watch them get into the car and give parent a “thumbs up”.
- Patients should never pass another patient due to the circular shape of our office and use of the back door.

**PPE:**

- Universal precautions will be adhered to at all times.
- All staff will wear scrubs and provided jackets (fully buttoned up), including front desk staff.
- All staff are to wear Level 3 disposable masks and safety goggles for procedures:
  - Retainer checks
  - Appliance checks
  - Invisalign checks
  - Recall appointments
  - Adjustments
- Level 3 masks, goggles and face shields will be worn for:
  - Debonds
  - Rebonds/repositions,
  - Indirect bonding/starts
  - Bandings and impressions
- Disposable masks will be removed after each patient and replaced prior to the next patient.
- Face shields will be wiped with alcohol after each patient.
- Hands need to be washed before and after each patient thoroughly for 20 seconds with soap and water.
- Anticipate your appointment and have everything available that you need. IF you have to get up for something you forgot, use hand sanitizer before re-gloving.
- After each patient continue with sterilization procedures- Wipe down all surfaces and replace barriers.

**Disinfection of all surfaces:**

- Every hour the sterilization assistant is to spray and wipe down all public areas of the office.
- Treatment coordinator will disinfect her desk between all patients and hourly.
- Scheduling coordinator will disinfect the front desk area hourly.
Staff:

- If you are sick, do not report to work. If you have any symptoms of COVID-19, call your doctor or Central District Health immediately for further instruction.
  - Please take your temperature daily before leaving your home.
  - CDH 208-375-5211
- Refrain from wearing wedding rings or any other type of jewelry on your hands.
- Nails should be kept short and free of acrylic/gel, etc.
- Bring an extra pair of shoes to be left at the office in your locker. Street clothes should be worn to work. Change into scrubs and office shoes, and then leave those shoes at the office at the end of the day.

All Scrubs and labcoats must be removed at the end of the day and placed in the washing machine. At any time if you leave the office you must change out of your scrubs.

Miscellaneous:

- Patient restrooms are to remain closed until further notice.
- Drinking fountain is to remain wrapped in saran wrap and closed until further notice.
- No magazines, signage, etc. should be in the waiting room or entry area.
- Check in computer is off and covered.
- Waiting room chairs are to remain facing the wall until further notice.
- Ice cream machine is to remain off and covered until further notice.
- No coffee in waiting room until further notice.
- Door to staff lounge should remain closed at all times.
- Tooth brushing station to remain closed until further notice. Patients are being instructed to brush before they come to their appointment.
Sample Implementation Plan for Pediatric Dentistry

- A health questionnaire, when we confirm the day prior to their appointment
- Screening patient when they arrive for treatment.
  - Take patient temperature
  - Confirm no illness with themselves or anyone in the household
  - Reschedule when needed – temperature is elevated or risk of exposure
- Using the highest level of PPE that we can get at this time.
  - Right now because of limited supplies: level 3 surgical masks with face shields
- Use Isolite where possible even for cleanings if the patient will tolerate them.
  - Study shows Isolite helps reduce aerosolized particles
- Waiting rooms have been reconfigured with less chairs to provide 6 ft space between patients waiting to be seen.
  - Consider closing waiting room and just having patients wait in car until we are ready for them.
- Magazines and books have been removed from our waiting rooms to reduce the potential of infection from shared materials.
- A clean desk/workstation policy has been implemented to allow for proper cleaning and disinfection.
- Public areas, such as, bathrooms, check-in/check-outs will be cleaned and wiped down every 2 hours.
- All staff will be required to follow proper hand sanitizer, soap, and proper hand washing techniques.
- We are limiting the number of people allowed at an appointment.
  - Limit one guardian per child per appointment.
  - Additional family members will be asked to stay at home or remain in their cars.
- Staff must change clothes upon arriving to the office.
  - Anytime they leave the office they have to change out of scrubs, including lunch break.
- Limit the exchange of paperwork between parents and staff as much as possible.
Sample Implementation Plan for Prosthodontics

The ADA guidelines are an excellent blueprint. We offer the following suggestions as enhancements to the guidelines:

When using ultrasonic cleaners use an Isolite or dryshield and extraoral suction to minimize aerosols.

Maintain social distancing in operatories:
   If possible do not have a patient set up in an op next to the one in which aerosols are generated.

Post aerosol producing procedure disinfecting:
   In addition to sanitizing the operatory where the procedure was performed, wipe down adjacent operatory just prior to any patient appointment and barriers applied just prior to seating a patient.
PPE Resources:

Sourcing PPE from your regular dental supply company should be your first course of action and is the best way to guarantee fit for use and authenticity of products.

Should your supply company be unable to deliver necessary PPE below are some options that have come to our attention for extending the life of PPE, ordering from the State of Idaho, and other non-traditional companies who are producing PPE.

THE ISDA HAS NOT IN ANY WAY VALIDATED THESE SOURCES, and we make no claims on product suitability for use or performance, or on the ability of the company to deliver advertised products.

Idaho PPE Exchange: connects Idaho buyers and sellers of PPE.

https://www.idahoppeexchange.com/

Website Disclaimer
Idaho PPE Exchange makes no assertion or warranty as to the quality of any listed products, any seller's representations, or the effectiveness of any products. This exchange is merely a forum to facilitate a conversation between buyers and sellers.

Idahoppeexchange.com is not a state sponsored website and the vendors and products offered through Idahoppeexchange.com have not been vetted by the State. Please exercise due diligence when coordinating purchases through Idahoppeexchange.com. If you choose to purchase PPE with vendors listed on Idahoppeexchang.com, you do so at your own risk.

CDC strategies to optimize the supply of PPE and Equipment


Ordering PPE from the State of Idaho:

The process for requesting PPE through the state is driven by each regional health district. Contacts for each along with the processes for reporting PPE utilization can be found here:

Idaho EOC PPE Ordering Guidance Contacts for your region specific health district are on the last page of this guidance document.

All requestors must BOTH utilize the 123 tracking system AND complete the request form for your health district.

Link to 123 Survey:

https://survey123.arcgis.com/share/9c50dac7187848d19b3a11bad25b61a8

Public Health District 2:
Complete this form and mail to php@phd2.idaho.gov

Central District Health: CDH PPE Prioritization Tier Guidelines

Central District Health PPE Requisition Process Questions: Zack Ward ZWard@cdh.idaho.gov
Training and Exercise Coordinator
Community & Environmental Health
Public Health Preparedness

P. 208-327-8597 | M. 208-995-5532
F. 208-327-8610

Idaho is getting an N95 decontamination unit in early May. This information bulletin gives the details

Source for reusable gowns – an Idaho based manufacturer of reusable surgical gowns. These gowns are being used in hospital settings, made from level 4 surgical cloth. They can do either over the head or tie at neck. Dentists can order direct from the manufacturer at:

Mary Beth Meyers
Customer Service/Sales
Idaho Sewing For Sports
7 Poplar Dr.
Grangeville, ID 83530-5347
208-983-0988
marybeth@idsewing.com
http://idsewing.com/digital-online-catalog/

Other potential sources for masks / face shields: There are a wide variety of sources emerging for 3D printed masks / face shields. Here are a few that have come to our attention. THE ISDA HAS NOT IN ANY WAY VALIDATED THESE SOURCES, and we make no claims on product suitability for use or performance, or on the ability of the company to deliver advertised products.

https://www.intermountain3d.com/covid-respirators.html
https://www.verena.solutions/masks
https://www.roedentallab.com/product-category/ppe/
Highlights of the ADA and OSAP (Organization for Safety Asepsis and Prevention)

Live Webinar: Respiratory Protection in the Era of COVID-19

A link to this webinar will be added as soon as it is posted on ADA.Org/Virus

Treating known or suspected COVID-19 Patients:
- No dental practices should be treating patients with diagnosed and active COVID-19, or who are under investigation for having COVID-19.
- If these patients have a dental emergency, they should be treated in a facility (hospital) where they are able to implement airborne precautions (ie. isolation rooms with negative pressure airflow, etc.)
- Dental practices are not required nor expected to implement the CDC’s airborne precautions in dental practices to treat non-COVID patients.
  - It is not practical, nor is it possible in most dental offices.

Treating non-COVID patients in a regular dental setting:
- Current recommendations from the CDC for treatment of non-COVID patients are to use a properly fitted N-95 mask/respirator if available.
  - If that is not available, then a Level 3 Surgical mask and Faceshield can be used.
  - If N-95 masks/respirators are re-used due to limited supply, a specific plan and protocol should be followed to prevent cross contamination.
- If routine use of N-95 masks/respirators in a dental practice (or any work environment) is implemented, OSHA requires implementation of a Respiratory Protection Program. These Protection Programs ensure that the masks/respirators are being used properly to provide actual protection from respiratory risks, and they also ensure that the inherent health risks that come from using the masks are minimized. Some requirements that are involved in using N-95 masks are:
  - Fitness test: a medical clearance from a physician that says that a person is healthy enough to use the mask, due to the reduction in oxygen intake.
  - Fit test: performed with a specific fit test kit to ensure adequate seal of the mask/respirator to the face.
  - Annual fit tests must be performed (although the annual fit test requirement is currently waived, but NOT the initial fit test).
- Level 3 surgical masks DO provide protection from aerosols, but not to the level of a properly fitted N-95 mask/respirator because they do not completely seal around the face.
  - An N-95 mask/respirator that is not properly fitted has not been shown to provide more protection, because they have not been proven to be adequately sealed.
- All aerosols are not equal.
  - COVID patients create RESPIRATORY aerosols when they cough. These are aerosols that come from the lungs and bronchial airways and would be heavily laden with virus in an infected patient.
  - Aerosols created in a dental setting on non-COVID patients are primarily SALIVARY aerosols.
  - In the hypothetical situation where a patient was a non-symptomatic COVID carrier, if a salivary aerosol were created, it is important to remember that while the virus CAN be in saliva, it is MUCH less prevalent.
• It is also important to remember that it is currently unknown whether the disease can be transmitted by aerosol. If a procedure causes a patient to cough, the cough would produce a RESPIRATORY aerosol.

• The use of rubber dams or other isolation devices where possible could help reduce patient coughing and would reduce the amount of respiratory and salivary aerosols.

• PPE besides masks –
  o Knee length gowns should be used and removed if they become wet or soiled. The gowns can be disposable or re-useable. This is not different from the current OSHA guidelines, but has been widely ignored in the dental community in the past.
  o If re-usable gowns are used they must NOT be laundered at employees’ homes. They must be laundered onsite or by a laundering service.
  o Hair coverings and shoe coverings are not required, but may be implemented if desired.

• There are no requirements for air filtration units to be installed in operatories or dental offices.
Pictures of Simple Modifications

**High Volume Evacuation Modification:**
This modification is a simple way to provide continuous extra-oral evacuation of aerosols.
Patient holds the unit during the procedure, effectively providing an extra set of hands.

Smaller funnels did not require modification to fit HVE unit.

**Pre-procedural mouth rinse**

While studies have not proven the efficacy of rinses in decreasing the risk of spreading coronavirus, they won’t hurt, and can provide other benefits if you’ve eliminated brushing stations. In addition to your standard rinses, this product is 1% hydrogen peroxide...
Click [here](#) to see Infection Control Updates. This is a straightforward tutorial on managing infection control in the dental office.