



AGD MEMBER RETURN TO WORK GUIDANCE

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How To Use This Tool

The Academy of General Dentistry (AGD) is providing guidance as general dentists resume elective procedures. This tool focuses on three areas: employee safety and pre-appointment, intra-appointment, and post-appointment. You should use this planning document as one of many guiding resources to engage your team and identify approaches to your strategy.

Disclaimers

- While much attention has been given to COVID-19-specific recommendations for healthcare worker protection and infection control in hospital-based settings, to date, there are no clear recommendations for personal protective equipment (PPE) or safety recommendations in the field of dentistry outside of emergencies. As information becomes available, AGD will continue to post updates.
- AGD members are advised to seek out and comply with evolving state laws, regulations, guidance and rules.
- Members should avoid purchasing or using gray market products, as many of these fail to meet federal quality standards. (The U.S. Centers for Disease Control and Prevention (CDC) has provided information on how to identify counterfeit masks. [Check out the warning.](#))

Employee Safety and Pre-appointment

Communications to Patients

Continue to communicate with your patients as if you were back in practice. There are many ways to reach out to your patients, such as phone calls, texts, emails or social media. For some patients, a personal phone call from either a member of the dental team or a dentist is the best method of interaction. The global COVID-19 pandemic may have affected your patients financially, physically and psychologically. Patients will want to be reassured that it's safe to come back to the dentist.

Be vigilant about documenting all patient interactions for risk management, regardless of the method of communication. It is important that you obtain a specific COVID-19-focused informed consent from each patient before they come to the office. An example of a supplemental informed consent form can be found in the **Resources section**.

Screening

Each dental facility should develop a universal screening process for all dental team members, patients and visitors. Upon arrival, temperatures should be taken and documented. Screening should include asking for recent history of fever, cough, shortness of breath, sore throat, muscle aches, chills, loss of taste or smell, or gastrointestinal changes. Screening should also include social contacts with known or suspected COVID-19-positive individuals as well as travel locations within the previous 14 days. A sample screening tool can be found in the **Resource section** of this document. Again, it is critical to include all of the documentation in the dental record.

Patients, team members or visitors reporting any of the symptoms above or demonstrating a temperature of 100.4 F or higher should be referred to their primary care practitioner with postponement of any dental treatment.

As the pandemic continues and patients return to dental practices for treatment, dentists' access to a database for COVID-19 status or a COVID-19 vaccine (when available) would benefit public health. Dentists could serve as sources of point-of-care testing to relieve some of the burden on other testing and health-care facilities. AGD has been advocating for expansion of the prescription drug monitoring program (PDMP) to include COVID-19 status.

Infection Control

- Enhanced facility infection control should include nontreatment areas. Training on new infection control protocols may be provided. Documentation of these sessions and protocols can be included in Occupational Safety and Health Administration (OSHA) and Statewide Program for Infection Control and Epidemiology (SPICE) training manuals.
- To avoid crowded waiting areas and to allow for disinfection of these nontreatment areas between appointments, patients should anticipate that appointment availability may be limited during the first few months as dentistry reopens.
- Whenever possible, dental team members should maintain social distancing of at least six (6) feet apart from one another. Masks should be worn by dental team members at all times within the dental office.
- As dentistry gets back to work, a team review of hand hygiene protocols will set the tone for a positive work environment ([video resource](#)).

Scheduling

The dental facility may consider adapting scheduling protocols for patients so that providers have sufficient time to change personal protective equipment (PPE) and ensure rooms and equipment can be cleaned and disinfected between each patient, as well as to allow aerosolized particles time to settle to minimize aerosol contamination.

Check-in/Waiting Rooms

The dental facility may consider a virtual check-in/waiting room or request that patients remain outside the building until called in via text/phone. Patients should remain in their cars or outside the building until the treatment room is ready. Companions of patients, unless deemed necessary, should not enter the facility. Only a parent or guardian of a minor or a special needs adult may accompany a patient into the facility.

The dental facility may consider establishing social distancing protocols of maintaining at least a six-foot distance between individuals wherever possible, such as in waiting rooms and other small spaces. Plexiglass or other clear barriers may be considered for use in the waiting area and/or check-out area in order to decrease potential disease transmission.

The dental facility should require all patients and their companions to wear a mask when entering any healthcare building. The dental team and patients should adhere to hand hygiene protocols.

The following are recommended tools to assist you:

Occupational Safety and Health Administration

[Guidance on Preparing Workplaces for COVID-19](#)

Environmental Protection Agency

[Disinfectants for Use Against SARS-CoV-2](#)

New England Journal of Medicine

[Aerosol and Surface Stability of SARS-CoV-2 as Compared with SARS-CoV-1](#)

[Stability and Viability of SARS-CoV-2](#)

Coronavirus Testing

At every regulatory level, AGD is aggressively advocating for dentists' ability to purchase and administer COVID-19 point-of-care testing. Testing availability is increasing, and tests should currently have at least an FDA Emergency Use Authorization (EUA) status.

The following are recommended tools to assist you:

Centers for Disease Control and Prevention

[Centers for Disease Control and Prevention State and Territorial Health Department Websites](#)

Federal Drug Administration

[FDA Emergency Use Authorizations](#)

Use and Reuse of PPE

Currently, there is no conclusive research regarding the optimal PPE for different tasks in dentistry to prevent the transmission of SARS-CoV-2.¹ It is generally agreed that the highest level or equivalent of PPE protection should be used for aerosol-generating procedures (AGPs). There are no data concerning the risk of SARS-CoV-2 transmission in dental practice or a defined list of procedures in dentistry that produce AGPs. Moreover, recommendations for PPE have largely been influenced by the availability of adequate masks, gloves, gowns and goggles rather than the science behind their use.

Dental facility PPE may include a face shield or goggles, a level 3 procedural mask (N95 or equivalent), gloves, and an isolation gown. Dentists should assess the PPE needed for the patient encounter based on the responses to the patient screening form, guidance from regulatory agencies and professional judgment.

Alternatively, a face shield or goggles and a surgical mask are considered an acceptable alternative if an N95 or equivalent mask is not available. If the workforce uses N95 respirators for direct patient care, fitting and appropriate training of donning and doffing of the respirator and other PPE is recommended but not required at this time.

If N95 respirators are not required but deemed appropriate for direct patient care, an initial fit test is not required. If the use of the N95 respirator is required, an initial fit test is required, the annual fit test is waived. Appropriate seal testing of N95 respirators is recommended when utilizing these respirators. Training in the donning and doffing of appropriate PPE utilized in patient care is recommended.

The CDC has provided guidance for extending the use of PPE. Dentists should consider strategies to conserve PPE among their dental team members.

The following are recommended tools to assist you:

Donning and Doffing of PPE

[Sequences for Donning and Removing Personal Protective Equipment \(PPE\)](#)

PPE

[Strategies for Optimizing the Supply of N95 Respirators](#)

[Decontamination and Reuse of Filtering Facepiece Respirators](#)

1. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/dental-settings.html>

Intra-Appointment

Infection Control Practices

- The dental facility will seek viable options for eliminating, reducing or containing aerosol production during dental care.
- When possible, dentists should use a rubber dam or other established approaches to decrease aerosol particles. Dental team members may want to consider using alternate techniques that may decrease aerosol production.
- Dental offices should extend infection control protocols beyond the operatory to nontreatment areas and implement appropriate infection protocols as soon as reasonably possible.
- The science behind the efficacy of a surgical pre-rinse for COVID-19 is inconclusive. Therefore, dentists should use their professional judgment.
- Hand hygiene protocols should be enhanced for both members of the dental team and patients (and necessary companions).

Post-Appointment

Reservoir surfaces that may serve as potential transmission vectors at patient checkout should be minimized using existing technology. When offices do not have such technology, steps should be taken to minimize touch points.

Enhanced infection control cleaning should occur in every dental office. Dentists recommend that patients should contact the dental office if they become symptomatic following a dental visit. Some offices may elect to contact a patient up to 14 days after the dental visit to check on the medical status of the patient.

Resources

AGD-Provided Forms (see samples on following page of view online)

- [Patient Consent Supplemental Consent For for COVID-19](#)
- [COVID-19 Patient Screening Form](#)
- [COVID-19 Back-to-Work Informed Consent Form](#)
- [Employee COVID-19 Screening Tool](#)

American Dental Association (ADA)

- [ADA OSHA Guidance Summary](#)
- [ADA Return to Work Interim Guidance Toolkit](#)
- [Interim Mask and Face Shield Guidelines](#)
- [Understanding Mask Types](#)

Centers for Disease Control and Prevention

- [Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 \(COVID-19\)](#)
- [CDC Guidelines for Infection Control in Dental Health-Care Settings 2003](#)

Centers for Medicare and Medicaid Services (CMS)

- [OPENING UP AMERICA AGAIN: Centers for Medicare & Medicaid Services \(CMS\) Recommendations: Re-opening Facilities to Provide Non-emergent Non-COVID-19 Healthcare: Phase I - April 19, 2020](#)

Federal Drug Administration

- [FAQs on Diagnostic Testing for SARS-CoV-2](#)

Occupational Safety and Health Administration

- [Guidance on Preparing Workplaces for COVID-19](#)

Organization for Safety Asepsis and Prevention (OSAP)

- [Coronavirus Disease \(COVID-19\) Toolkit](#)

White House

- [Opening Up America Again](#)

Other

- [DOCS Education:
The Pandemic and the Dentist](#)

SAMPLE

Patient Consent

Supplemental Informed Consent:
Dental Treatment in the Era of COVID-19

Thank you for your continued trust in our practice. As with the transmission of any communicable disease like a cold or the flu, you may be exposed to COVID-19, also known as “coronavirus,” at any time or in any place. Be assured that we continue to follow state and federal regulations as well as recommended universal personal protective equipment (PPE) and disinfection protocols to limit transmission of all diseases in our office.

Despite our careful attention to sterilization, disinfection and the use of personal barriers, there is still a chance that you could be exposed to an illness in our office, just as you might be exposed at your gym, grocery store or favorite restaurant. Nationwide social distancing has reduced the transmission of the coronavirus. Although we have taken measures to enable social distancing in our practice, due to the nature of the procedures we provide, it is not possible to maintain social distancing between the patient, dental healthcare team members and sometimes other patients at all times.

Although exposure is unlikely, do you accept the risk and consent to treatment?

Yes _____ No _____

Patient/Parent’s Signature

Date

Legal Disclaimer: This form is for sample purposes only. Consult with your attorney and your professional liability carrier to ensure that all of the dental practice’s informed consent forms comply with state law.

Source: West Virginia COVID-19 Task Force, West Virginia Dental Board Guidance

(This document should be customized for your office.)

SAMPLE

COVID-19 Patient Screening Form

Patient Name	Before Appointment	In-Office Appointment
Are you over 60 years of age?	YES/NO	YES/NO
Do you have a preexisting condition such as lung disease, heart disease, diabetes, kidney disease or an autoimmune disorder?	YES/NO	YES/NO
Are you experiencing shortness of breath or trouble breathing?	YES/NO	YES/NO
Do you have a temperature of 100.4° F or higher?	YES/NO	YES/NO
Are you experiencing a sore throat?	YES/NO	YES/NO
Are you coughing?	YES/NO	YES/NO
Are you experiencing repeated shaking with chills?	YES/NO	YES/NO
Do you have muscle aches?	YES/NO	YES/NO
Are you experiencing gastrointestinal changes?	YES/NO	YES/NO
Have you noticed a loss of smell or taste?	YES/NO	YES/NO
Have you had contact with a known or suspected COVID-19-positive person?	YES/NO	YES/NO
In the last 14 days, have you traveled to an area that has a high incidence of COVID-19?	YES/NO	YES/NO
<i>If yes to the question above, please specify:</i>		

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(This document should be customized for your office.)

SAMPLE

COVID-19 Back-to-Work Informed Consent

Team Member _____

I understand that COVID-19 has a long incubation period and that carriers who do not show signs or symptoms may still be contagious. _____ (initial)

I understand that dental procedures create an aerosol, which is one way that COVID-19 can be spread. _____ (initial)

I understand that, due to the characteristics of dental procedures, there is an inherent risk of potential COVID-19 contraction simply by being present in a dental office. _____ (initial)

_____ (sign/date)

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(This document should be customized for your office.)

SAMPLE

Employee COVID-19 Screening Tool

Date: _____

Employee Name	Before Starting Shift				After Completing Shift				Additional Notes
	Temp	Cough	Shortness of Breath	Other Symptoms	Temp	Cough	Shortness of Breath	Other Symptoms	
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		
		Y/N	Y/N			Y/N	Y/N		

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