

NOVEL CORONAVIRUS DISEASE 2019 (COVID-19)

In light of the recent outbreak of Novel Coronavirus Disease 2019 (COVID-19), the West Virginia Board of Dentistry would like to share with its licensees the following recommended guidelines and information for use during this public health crisis.

PRE-SCREEN PATIENTS

If possible, have a staff member make a personal call to each patient the day before their scheduled appointment to prescreen patients with some of these suggested questions:

Within the last 30 days, have you traveled to an area with widespread and ongoing transmission of the Coronavirus (Covid-19)? (CDC travel precautions can be found at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/after-travel-precautions.html>)

Within the last 30 days, have you been in personal contact with a person infected with the Coronavirus (Covid-19) or who has traveled to an area with widespread and ongoing transmission of the Coronavirus (Covid-19)?

Are you experiencing a fever, cough, sore throat, muscle aches, stomach pain, or shortness of breath?

If the answer to any of these questions is yes, the patient should be rescheduled for a period of 14 to 30 days, absent the need for emergency treatment.

PATIENT ARRIVAL

If possible, patients should have hand sanitizer made available to them at check-in.

Patients should be asked to complete a written questionnaire regarding any current illnesses and recent travel. Should the patient be symptomatic or have traveled within the last 30 days to an area with widespread and ongoing transmission of the Coronavirus (Covid-19), the patient should be rescheduled for a period of 14 to 30 days, absent the need for emergency treatment.

Patients should have their temperature taken at check-in. Any patient with a temperature of 99.5 degrees or higher, or who otherwise shows signs of possible infection with Coronavirus, should be rescheduled for a period of 14 to 30 days, absent the need for emergency treatment.

ELECTIVE PROCEDURES

If necessary based on patient screening, an elective procedure, that if delayed would not harm the oral health or overall health of the patient, should be rescheduled for a period of at least 14 days and up to 30 days.

EMERGENCY TREATMENT

If a patient with a suspected or confirmed case of COVID-19 requires emergency dental treatment, the dentist and the patient's medical providers should work together to determine the appropriate precautions on a case-by-case basis. This coordinated approach is critical in order to ensure that the risk of potential spread of disease among patients, visitors, and staff is kept as low as possible. It may be necessary for treatment to be performed in a healthcare setting that offers the additional protections that should be maintained in these cases.

RECEPTION AREA

Front desk receptionists and other staff members should have masks on hand for their personal protection.

Staff members should stay at least six feet away from symptomatic patients.

EQUIPMENT

The Board requires compliance with the CDC Guidelines for Infection Control as the standard of care. Use equipment you would use every day such as gowns, gloves, goggles, masks, and face shields. Single-use and disposable items are to be disposed of after one use.

Masks are single-use and disposable. They should be changed between patients or during patient treatment if the mask becomes wet. According to the American Dental Association (ADA), the American Society of Testing Materials (ASTM) has established levels of masks to account for the varying levels of materials with which an individual may come into contact. The following information may be helpful when determining what kind of mask to use for different dental procedures:

ASTM Level 1: Recommended for procedures where there may be low exposure to fluid, spray and/or aerosol is produced. Level 1 masks would be recommended for activities such as exams, evaluations, orthodontic visits, operatory cleaning or similar procedures.

ASTM Level 2: Recommended for procedures where there may be a low to moderate exposure to fluid, spray and/or aerosols are produced. Level 2 masks would be recommended for sealant placement, simple restorative or composite procedures, endodontics or similar procedures.

ASTM Level 3: Recommended for procedures where there may be exposure to moderate to heavy amounts of fluid, spray and/or aerosols are produced. Level 3 masks would be recommended for the use of ultrasonic scalers and other similar equipment, crown and bridge preparation, complex oral surgery, implant placement and similar procedures.

Please [visit the ADA's website](#) for more information and frequently asked questions.

It is the Board's understanding that many dental supply companies are limiting the quantities of masks and gloves based on the averages of previous orders. As a result, attention should be paid to the types of masks used to ensure sufficient access to the appropriate type of mask when needed. The use of a rubber dam in restorative procedures could also be utilized as additional protection.

GOOD HAND WASHING HABITS

The CDC recommends following these five steps every time you wash your hands:

1. **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
3. **Scrub** your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice. We prefer the chorus to Country Roads.
4. **Rinse** your hands well under clean, running water.
5. **Dry** your hands using a clean towel or air dry them.

OTHER THINGS TO CONSIDER

Do not touch your face! And take care not to touch your face when removing masks, goggles, and face shields.

Continue infection control practices as usual. Sterilize instruments and devices, as well as proper waste disposal and utilization of sharps containers. Clean all surfaces, throughout the office, with appropriate sanitizing cleansers.

PROFESSIONAL JUDGMENT

These recommendations are provided in an effort to assist our licensees in finding the guidance and information needed to protect their patients, staff, and themselves. Ultimately, it is the dentist's professional judgment to determine the level of risk a patient poses, whether the treatment is on an urgent or non-urgent basis, and whether to treat or reschedule the patient. In addition, the dentist may want to consider his/her own health and any underlying health conditions the dentist or his/her staff may have when considering whether to treat or not treat patients, or which staff members should or should not treat patients, during this public health crisis.

As you are aware, this situation is fluid and the Board may revisit these recommendations should it be deemed necessary.

Lastly, the Board would like to share the following links to guidance and information from the West Virginia Department of Health and Human Resources; the Centers for Disease Control; US Department of Labor – Occupational Safety and Health Administration (OSHA); and the American Dental Association regarding the recent outbreak of the Novel Coronavirus Disease 2019 (Covid-19).

<https://dhhr.wv.gov/COVID-19/Pages/default.aspx>

<https://dhhr.wv.gov/News/2020/Pages/COVID-19-Testing-Criteria-Explained-for-West-Virginia.aspx>

<https://emergency.cdc.gov/han/2020/han00429.asp>

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>

<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>

<https://www.osha.gov/SLTC/covid-19/>

<https://www.ada.org/en/publications/ada-news/2020-archive/february/ada-releases-coronavirus-handout-for-dentists-based-on-cdc-guidelines>

<https://www.ada.org/en/publications/ada-news/2020-archive/march/ada-adds-frequently-asked-questions-from-dentists-to-coronavirus-resources>

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