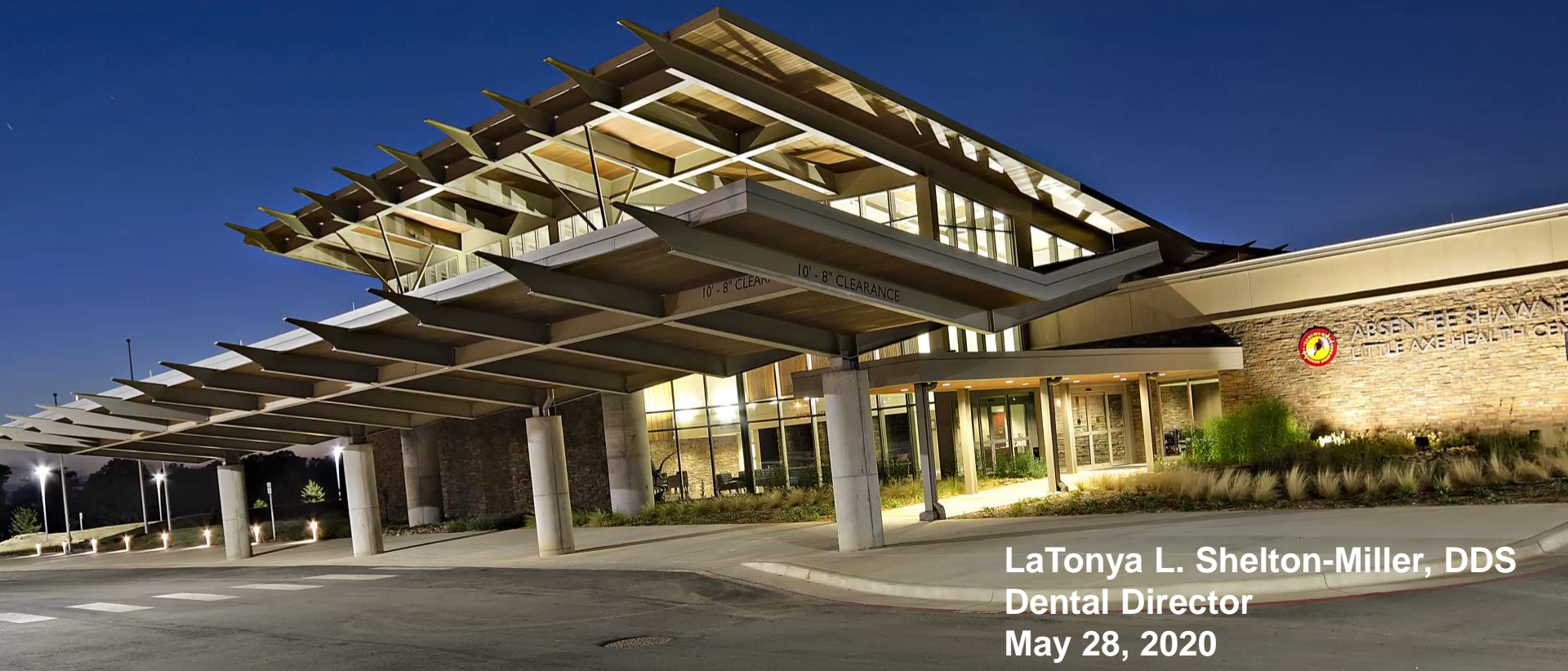


AST HEALTH SYSTEM

Protocols and Best Practices to Safely “Re-Open” Dental Clinics



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Re-Opening Questions and Considerations

- Where to start/Are you ready to re-open
- Patient management
- Patient screening and scheduling
- Infection control and workflow protocols
- Appropriate and available PPE
- Aerosol mitigation
- Scope of services
- Equipment maintenance
- Guidelines and recommendations



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COVID-19 Reopening - Where to Start/Are You Ready?

Assemble a COVID 19 Dental Reopening Team

Consist mainly of dental staff (3-4 people)

Goal of Team

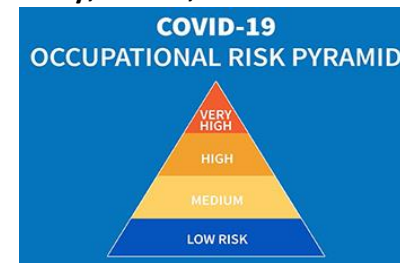
- Review guidelines/recommendations for dentistry
- Determine infection control and workflow protocols
- Determine PPE need and availability
- Make a plan and develop a protocol packet
- Institute safety measures for patients and staff
- Develop a patient triage and scheduling workflow



Complete Risk Assessment for Dental Clinic

Goal of Assessment

- Impact of COVID 19 on patient services, facility, staff, community
- Are you at high risk for transmission
- PPE burn rate and equipment needs



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Patient Management and Pretreatment Protocols

- All patients asked COVID-19 screening questions and receive temperature check prior to entering building
- Advise all patients they must wear mask to enter facility and while in the health center to reduce potential spread of respiratory droplets
- Only allow patient and one guardian, if patient is a minor, elderly, physically or mentally disabled in the clinic for treatment
- Patient asked to wait in car until ready for treatment
- Patients are escorted to the dental clinic
- Patients asked to practice hand hygiene before and after treatment
“No germs in, no germs out philosophy”
- Recommend patient brush teeth prior to appointment



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Patient Screening and Scheduling Considerations

- Telephonic screening of all scheduled patients prior to appointment
- Teledentistry visit as alternative to in-office care and as a triage tool
- Soft Opening – limit number of scheduled patients
- Stagger appointment start times
- Consider two columns for scheduling (AGPs and Non-AGPs) and scheduling the AGPs closer to lunch time
- Early morning priority appointment for patients with compromised health
- Assign one provider to do hygiene checks



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Preventative and Infection Control Measures in Clinical Area

OSHA Universal Precautions and Handwashing Protocols Followed

- Start of each day and after lunch flush dental unit waterlines for minimum of 15 seconds
- Use surgical bays for extractions and AGPs
- Social distance patients in clinic area (use every other operator)
- Utilize runner/rover dental assistant (when available)
- Patient entry and exit of clinical area controlled
- Donning and doffing in designated areas
- No PPE zone established
- Only use EPA approved disinfectants for COVID-19
- Wait 15 minutes after treatment is complete to clean room
- Allow 30 minutes to 1 hour to pass after disinfecting operatory before reusing



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Personal Protective Equipment (PPE) Considerations

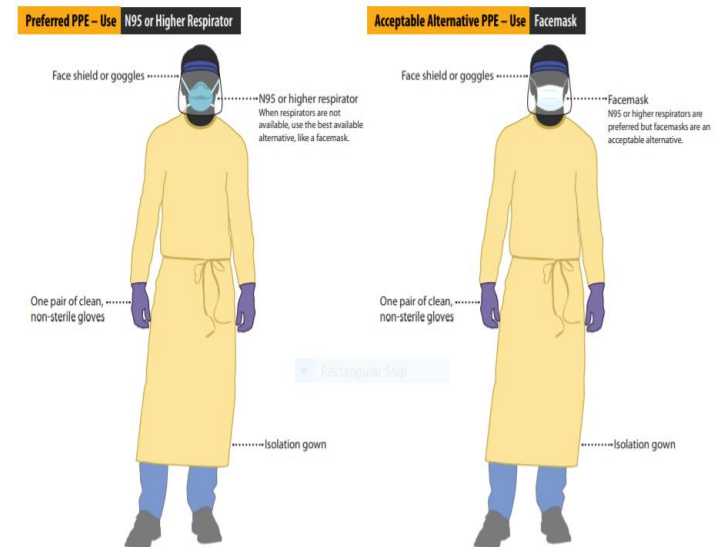
**PPE requirement same for both AGPs
and Non-AGPs (Preferred PPE image on left)**

N95 mask

- Limited reuse of N95
- Will cover with surgical mask to reduce aerosol and droplet contact with N95
- After 5 high aerosol procedures will be replaced
- Will replace if damaged
- Store our in restaurant to go container or paper bags

Gowns

- Single use
- Fluid resistant



www.cdc.gov/coronavirus



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Aerosol Mitigation/Control

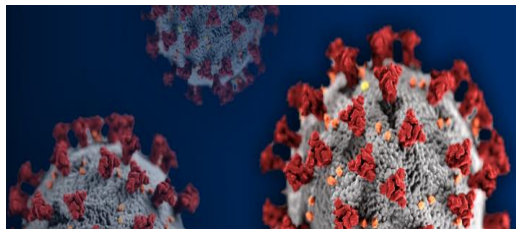
- Pre-procedure rinse (Peroxyl, Optic White mouthwash, 1% Hydrogen peroxide mixture (made by diluting 1 part 3% hydrogen peroxide to 2 parts sterile water) <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7054527/>)
- Rubber dam utilization
- HVE Isolation Systems (Dry Shield, Isodry, ReLeaf)
- Extraoral suction units (ADS, extra oral device by Tree dental, Pax 2000 by pH Dental, Octodent)
- Portable germicidal UV-C air purifier (OSO air disinfecting purifier,
- UV light cabinet and wand
- Microcab (reduce solid airborne particles when adjusting dentures, partials and crowns)
- No Ultrasonic scalers or air polisher use until further notice by CDC



Scope of Dental Services (Phases)

Phase I

- Emergency patients only
- Simple extractions
- Avoid AGPs
- No hygiene appointments



Phase II

- Emergency patients
- Simple extractions
- Surgical extractions
- Routine dentistry
- Deliver lab cases
- Child and teen prophylaxes
- Family appointments
- Limit high risk patients



Scope of Dental Services (Phases)

Phase III

- All procedures in Phase II
- Simple restorative
- 6 MRC, Perio, Prioritize SRP (hand scaling-only)

Phase IV

- All procedures in Phase III
- Increase high risk patients
- Complex restorative
- Full Hygiene



All Phases are contingent on any new CDC , ADA or State guidelines/recommendations



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Additional Best Practice Suggestions

- Surgical mask worn at all times in clinic (all employees)
- Place chairs 6 feet apart in reception area and remove all magazines, TV remotes, toys and any other objects typically handled by patients
- Place Plexiglas barriers at check-in and check out areas and provide keyboard covers
- Disinfected high touch items twice daily on a schedule (e.g. door handles)
- Front reception staff wear mask & gloves
- Use electronic consent and health history forms when possible
- Limit Nitrous oxide use
- Consider SDF for patients with multiple areas of decay
- Allow additional set-up and breakdown time between patients
- Do a mock patient appointment walk through with staff



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Equipment Maintenance Re-opening Checklist



Water Bottles

Shock all lines several days before opening. Flush all handpieces and syringes until shock begins flowing out. Let them rest for 24 hours, then flush with clean water. If using straws, please shock with Citrisil Tablets following the same procedure.



Computer Systems

Power up the router, switches, server, and workstations. Ensure access to and functionality of schedule and charting modules. Verify sensors and cameras are working and operational in all your operatories



Ultrasonics

Refill and tinfoil test each unit.



Cassette Sterilizers

Refill water tanks and place recommended water level in the discard tank.



Plaster Traps

Replace plaster trap (if not previously discarded).



Air Compressor

Power on, pressure up. Ensure there is pressure to all operatories. Verify compressor comes up to pressure and shuts off once full.



Vac Lines and Pumps

Start vacuum and ensure all SE and VE lines function correctly in the on and off modes and nothing has seized.



Wet Vacs

Ensure the water is turned on before starting it. Let it run for several minutes and ensure there are no leaks.



Model Trimmers

Turn water on and ensure each unit drains properly with no leaks.



Hydrims

Fill soap and salt dispensers, then run for one full cycle to prime the soap and salt lines.



Distillers

Refill and start the distillation process to ensure you are prepared with a full container of fresh distilled water.



Water Purification Systems

Run all systems for a minimum of two (2) minutes to flush the lines. If any water was left in the system, shock each operatory line individually before proceeding



Chairs

Power up and run a full test the full range of motion and functionality.



Autoclaves

Fill reservoir with distilled water. Run a cycle to confirm there are no errors or steam leaks.



Mills

Refill coolant tanks.



3D Printers

Refill resin tanks.



Nitrous Tanks

Turn tanks on. Test alarm system. Ensure zone valves are on.



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Helpful Re-opening Resources

- CDC : Guidance for Dental settings

www.cdc.gov/coronavirus/2019-ncov/hcp/dental-settings.html)

- ADA: Interim Tool kit

<https://www.ada.org/>

- OSHA website:

<https://www.osha.gov/>

- CMS

<https://www.cms.gov/>

- NNOHA: Join NNOHA Listserv

<http://www.nnoha.org/>

- NOHN Network Facebook page

<https://www.facebook.com/NOHNOklahoma/>

- IHS

<https://www.ihs.gov/>

- SPHB

<https://www.spthb.org/>



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Thank You





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