The EASY Button to ... Reopen Your Pediatric Dental Office

What were your immediate feelings when we received the news that we can reopen our offices to see all patients? Are you ready to return to work? Do you need to fully return to work right now; or, can you do it in stages over time? How confident are you in providing a safe place to work? How confident are you about being able to protect your patients and your team?

It seems that information keeps changing causing recommendations to evolve daily. Does it feel as if no one really seems to know what to recommend in this large "gray area"? Only you know when the right time to reopen is. Evaluate your health and that of your team. How many of them are ready to return? Are there issues around finding childcare? There are many factors to consider when evaluating when to reopen your office.

Don't forget that we dentists know infection control better than other healthcare personnel. We have always treated every patient as though they were infectious. The safety of our patients and their families has always been, and remains, our highest priority. The safety of our team is also paramount. Our patients and their families are understandably nervous and concerned about protecting their safety. I encourage you to post a video on social media showing your readiness to welcome patients back and letting them know the changes you and your team have made to ensure their safety. Sending out an email to all your patient families sharing these changes will assuage their concerns and increase their feelings of confidence in you and your staff. These steps will ease their fears; and will, hopefully, motivate them to schedule an appointment.



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GENERAL INFORMATION ON REOPENING

BASIC IDEAS

- Employ strict disinfection protocols throughout the entire office. Follow known guidelines from the AAPD, ADA, and/or CDC. The California Dental Association has great downloadable information on various topics briefly discussed below.
- Remove all magazines, books, toys and clutter in the office.
- Reduce the number of patients in the office at a given time. Avoid having more than one patient and family standing at the reception desk or check-out areas. Keep patients and their family member outside the office in their car until you are ready for them.
- Minimize contact between people try to keep patients in separate treatment rooms.
- Actively screen for COVID-19 using temperature checks and a COVID-19 questionnaire for: entire dental team, patients, parents/ caregivers and any other member of the public working in the facility.

DO YOU NEED TO PURCHASE ANY NEW EQUIPMENT?

- Provide appropriate personal protective equipment (PPE) for the entire dental team.
- Sneeze guards should be installed at the front desk/check out area to avoid direct contact with patients.
- If using an open bay, provide separation of patients with some type of physical barrier.
- N95 respirator masks for all clinical team members.
- Air filtration/purifying systems.
- Ultraviolet lights for disinfection.
- May need to order more autoclavable Nitrous oxide tubing and autoclavable nasal hoods or procure disposable tubing and nasal hoods.

DENTAL TEAM TRAINING RECOMMENDATIONS

- Develop new safety and protective procedures for entire staff and patients/families.
- Provide training on respiratory protection and conduct drills to ensure all staff members know the right way to put on and remove PPE. This training should be mandatory and documented.
- Document training on all new procedures for clinical and non-clinical dental team members.
- Critical to providing a safe environment for both your team members and your patients are establishing an infection control protocol and training staff in that protocol.
- Training dental team members to minimize contact amongst themselves and patients/families is vitally important.
- Establishing an infection control protocol and training staff are critical to providing a safe environment for everyone (dental team, patients and families).

PERSONAL PROTECTIVE EQUIPMENT RECOMMENDATIONS

Front desk personnel should wear washable scrub jackets and surgical masks. Gloves should be worn when doing any transactions with the patients, such as taking their insurance card, cash, or credit card. Provide method for gathering updated insurance information before the actual dental appointment. If possible, avoid handling payment and use online methods such as PayPal, Venmo, Zelle.

All clinical staff are at high risk: including dental assistants, dental hygienists and dentists. All dental members in close contact with the patients must wear N95 masks, surgical gowns (water-resistant disposable or washable), and face shields. N95 respirator masks require a fit test to be an effective barrier to COVID-19.

RECOMMENDATIONS FOR DENTISTS AND TEAMS

DENTIST ·····

Recommendations for deciding who needs to be seen and when

- Appointments must be prioritized based on need. During the period of isolation, only emergency patients were being seen. Patients with current treatment needs may turn into dental emergency patients over time.
- Patients with the most serious issues should be treated first.
- Review the recall/recare list and make appointments for high-caries risk patients first. Try to prioritize based on known caries risk at their
 previous appointment.

Clinical Procedure Recommendations:

- Do as much treatment possible in one visit.
- Reduce/contain aerosols using rubber dams, rubber isolation systems, intraoral suction, possible additional suction, and air purification systems.
- Apply silver diamine fluoride treatment on children who cannot be treated in the office setting and need to be taken to a hospital setting for treatment
 to slow the progression of their disease.
- Always use an N95 mask with level 1 (or level 3 mask for aerosol-producing procedures) over it. Keep the N95 mask on and dispose of the top mask after every operative patient, especially after aerosol-producing procedures.
- Protect yourself by using surgical gowns and protective eye wear. Use a face shield with N95 respirator masks while performing aerosol-producing procedures.
- Remember that your clinical dental team members must have the same equipment you do.
- Wash hands frequently between patients and avoid touching your eyes or face.

Consider using Teledentistry

Investigate the possibility of utilizing Teledentistry when the parent's question or concern may not warrant an in-person appointment. Patients with complaints such as a tooth erupting crookedly, ectopic eruption of permanent tooth without exfoliation of primary tooth, etc, can be addressed through Teledentistry video calls, leaving your schedule open for patients with real emergencies and those needing urgent treatment. Teledentistry can be used to reduce the number of non-urgent appointments. Investigate payment coverage of these Teledentistry visits through your patient's insurance providers.

BUSINESS ADMINISTRATION TEAM

Items to gather before the patient's scheduled appointment:

- Parents should fill out a COVID-19 questionnaire about any recent sickness history for the patient and contact with a COVID-19-positive
 individual prior to their child's appointment, if possible. Have it submitted via email or your office's online portal at-least one day prior to their
 scheduled appointment.
- Gather updated insurance information and payment information at the same time. Request payment for planned treatment services in advance
 using an online payment portal on the website to reduce amount of time spent in the office.
- Email addresses should be confirmed and updated for each patient/family prior to their appointment.

What to do when patients arrive:

- Post a note on the main entrance door reminding patients/parents to call the office on arrival to check in.
- Patients must remain in their car until called in.
- Inform parents/caregivers that only one adult is allowed to accompany the pediatric patient.
- All paperwork, especially the COVID-19 questionnaire, must be reviewed by the front desk staff before calling the patient in.
- Have a staff member open all doors for patients entering and exiting the office to prevent patients from touching them.
- All dental team members must always wear their masks properly with the nose and mouth covered, even while talking to patients or parents/caregivers.
- Any suspected cases must be asked to show proof of no infection or simply reschedule the appointment.
- If using the credit card machine in office, do not take the card from the patient. Ask the parent/caregiver to insert and remove it.

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BUSINESS ADMINISTRATION TEAM

Admin Team Protection Recommendations:

- While taking insurance cards, credit cards, health history updates, etc. staff should wear gloves and sanitize hands after handling. If possible, send an
 email receipt of payment made.
- Wipe the countertops, scanner, printer, cabinet door handles, doorknobs, etc. after every patient.
- Encourage staff and patients to use their own pens for signing. Provide giveaway pens with the practice's logo.

CLINICAL DENTAL TEAM

Clinical team members:

- Are at high risk due to close patient contact.
- Are responsible for turning over the treatment rooms and disinfecting them meticulously before bringing in the next patient.
- Should have as little contact with the patient as possible. Use air high fives and elbow touches instead.

RECOMMENDATIONS TO REDUCE EVERYONE'S EXPOSURE TO INFECTIOUS DISEASES

- Ask patients to sanitize their hands before entering the treatment area and record temperature, if not already gathered at front door, using a no-contact thermometer. Document in chart notes.
- The ADA is now <u>recommending a pre-</u> <u>treatment patient rinse</u> with at least 1.5% hydrogen peroxide.
- All patients must always wear face coverings while inside the facility.
 Provide masks if they do not have one.
- All dental team members must always wear their masks properly with the nose and mouth covered, even while talking to patients or parents/caregivers.
- Reorganize the treatment rooms.
 Place all equipment, instruments, boxes of gloves, masks, etc into drawers or cabinets. This will help allow disinfectant

procedures in the room to be completed quickly and efficiently.

- Nitrous tubing and nasal hoods should be autoclaved between every patient or use disposable tubing and nasal hoods.
- To reduce contact with patients and parents/caregivers, take verbal consent for procedures. Check to see in your state if a dental assistant, dental hygienist or dentist can sign the consent for nitrous, extraction, RCT, crown etc, on the patient's/parent's behalf. Do not forget to document this on the patient's chart.
- After the treatment plan is confirmed, the dental assistant can set the room up with the equipment and materials required to perform the procedure, minimizing the need to open drawers/ cabinets for additional items while the procedure is in progress, thus reducing

the possibility of cross contamination.

- Thorough and safe disinfection of the treatment room between patients will help avoid disease transmission. Gloves should be changed frequently after handling used instruments and before disinfecting the room and surfaces. Make sure to wipe the companion/parent chair, knobs, and handles throughout the room.
- Protective coverings/barriers for lights, switches, dental chairs, and drawer/cabinet handles must be changed between patients. Consider using disposable shower caps as a covering for computer keyboards. They can be discarded between patients.
- Clinical staff must wash their hands after every patient, and all dental team members need to wash hands frequently.



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