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LIMITLESS

# COVID-19 and Oral Health Care: Implications for Provider and Public Health Literacy

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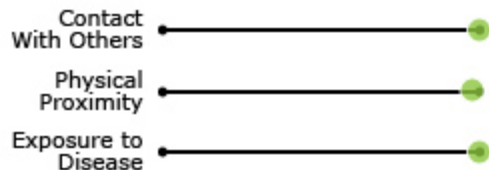
# Elements of Dental Practice

- Dentists are small business owners in solo or group practice and not affiliated with a health system
- Most are employers
- Revenue mostly dependent upon a payer mix of commercial/public insurance/cash
- Fee for service reimbursement structure
- Must comply with all CDC infection control standards, CalOSHA and CA dental board requirements

# Relative risk profile



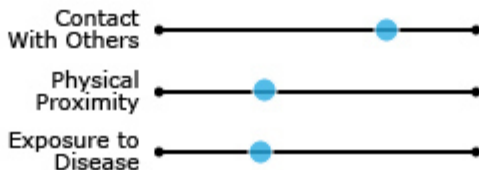
## HIGH RISK JOB Dental Hygienists



**Dental Hygienists** have one of the riskiest non-hospital jobs during a pandemic, scoring close to 100 in all three categories.



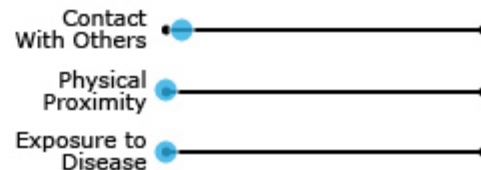
## MEDIUM RISK JOB Bus Driver (Transit)



**Bus drivers** have a lower score on physical proximity and exposure to disease, but their constant contact with the general public puts them at risk.

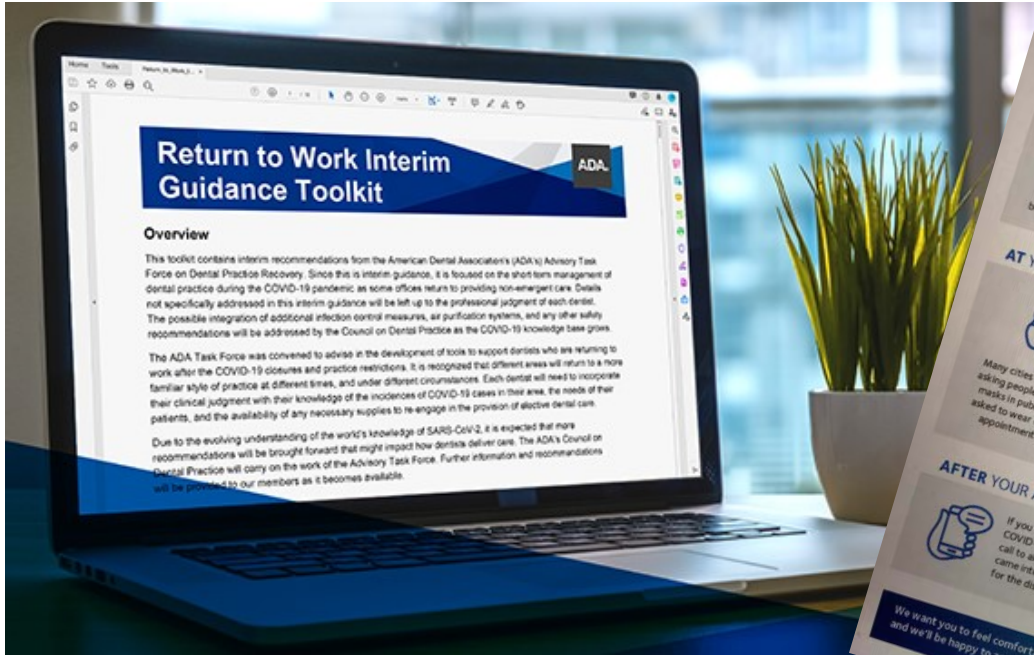


## LOW RISK JOB Economists



**Economists** have one of the safest jobs during a pandemic, scoring a perfect zero in two categories.

# ADA developed resources



# CDA COVID-19 Clinical Care Workgroup

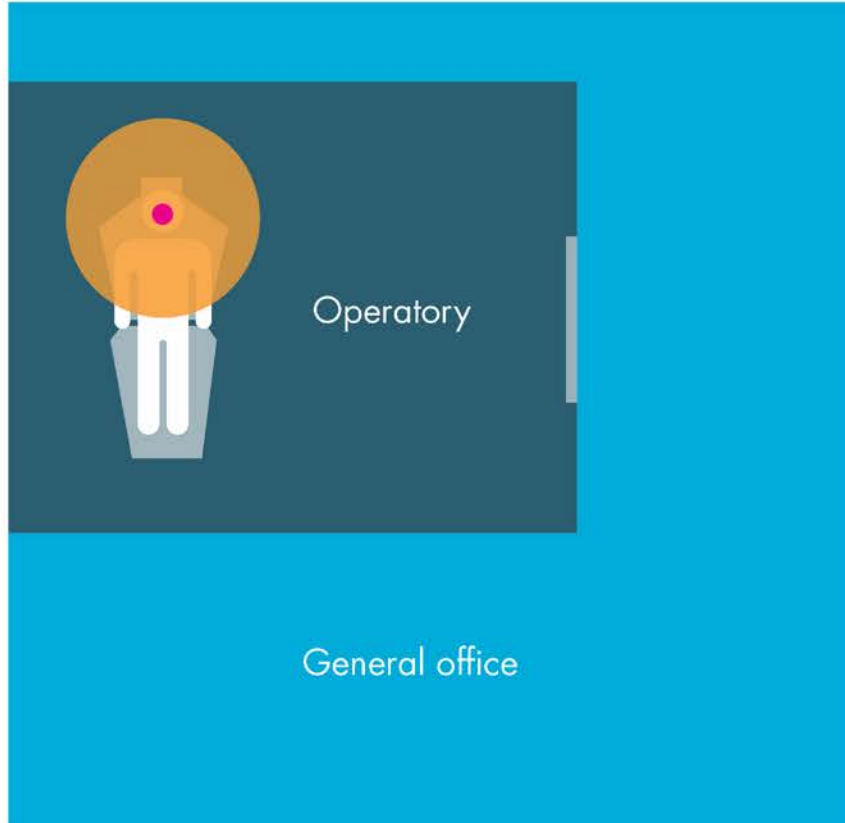
- Public/Private Partnership
- Multiple stakeholder input
- Identify existing evidence-base as foundation
- Three groups: PPE, Aerosol Management, Protocols
- End-user testing to inform improvements
- Identify gaps in knowledge and take action to fill them

# Resources

- Simple
- Clear
- Easy to follow



# Four zones of clinical infection control



**ZONE 1**  
Intraoral

**ZONE 2**  
3' radius  
beyond the  
oral cavity

**ZONE 3**  
Operator

**ZONE 4**  
General  
office




# Recommended PPE Based on Aerosol Exposure

## Example




Using a handpiece with water spray to do a filling  
PPE required:


- Fit-tested N95 or **\*L3 mask**
- Face Shield
- Gloves
- Gown, head/shoe covers



BACK TO PRACTICE  
PREPARING YOUR  
PRACTICE



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### PPE Recommendations for Dental Practices

Dental Practice Scenarios	Surgical Mask	N95/KN95	Face Shield	Eye Protection & Side Shield	Gloves	Clinical Attire**	Gown	Head Cover	Dedicated Shoes/Covers
Administrative	Level 1		=						
Pre-Visit Patient Temperature Screening	Level 1								
Lab/Instrument Processing *	Level 2		Choose one						
No Fluid ^	Level 1		Choose one						
Low Fluid ^	Level 2		Choose one						
Moderate-Heavy Spray/ Aerosol Generating Procedures #	L3 if N95 unavailable	*							

Recommended
  Optional
  Not Recommended

While it is understood that aerosols are produced in various ways, both organically by the patient and through various dental procedures, it is still unknown how exactly the virus is transmitted. Based on current studies and guidelines, these recommendations reflect what levels of adequate PPE will protect patients and dental team members.

\* During PPE shortage, surgical masks should be prioritized for dental team members providing direct patient care and may be an acceptable alternative in addition to a full-face shield when N95/KN95 or higher masks are not available. The use of a Level 3 mask instead of an N95/KN95 mask may carry a higher risk for transmission due to the lack of a respirator seal, without which limits the mask's protection primarily to splatter and droplets.

\*\* If consistent with office uniform policy, dental team members should change out of street clothes into clinical attire upon arrival to the office. Although clinical attire is not considered PPE under the dental practice act, lab coats worn as the outermost garment that provide adequate protection for the employee may be considered PPE. A gown may be a more appropriate choice of protective attire for most dental procedures.

- Alternatives to a face shield may include the installation of a sneeze guard or the mandate that patients wear masks in the reception area. If such a policy is implemented, dental practices should consider providing Level 1 masks to patients who arrive without a mask.

^ PPE in these scenarios should be changed between patients when visibly wet or soiled.

# PPE, including gowns, should be changed between patients. Follow CDC guidelines for mask extended use, reuse, and decontamination.

+ For staff performing in-office bandaging duties, it is recommended that a Level 1 or 2 surgical mask, face shield or eye protection, gloves, clinical attire, and gown are worn. Follow established protocols for donning and doffing for cleaning patient care areas.

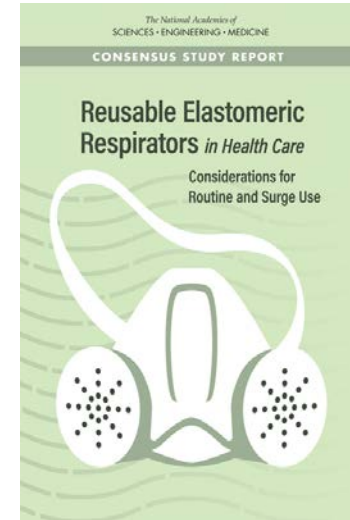
**Resources**  
[NIOSH-Approved N95 Manufacturers](#)  
[Authorized Reported Non-NIOSH Approved Respirator Manufacturers](#)  
[CDC Recommended Guidance for Extended Use and Limited Reuse of N95 Masks](#)  
[CDC Crisis Standards of Care Decontamination Recommendations for Respirators](#)  
[CDC Strategies for Optimizing PPE Supply](#)

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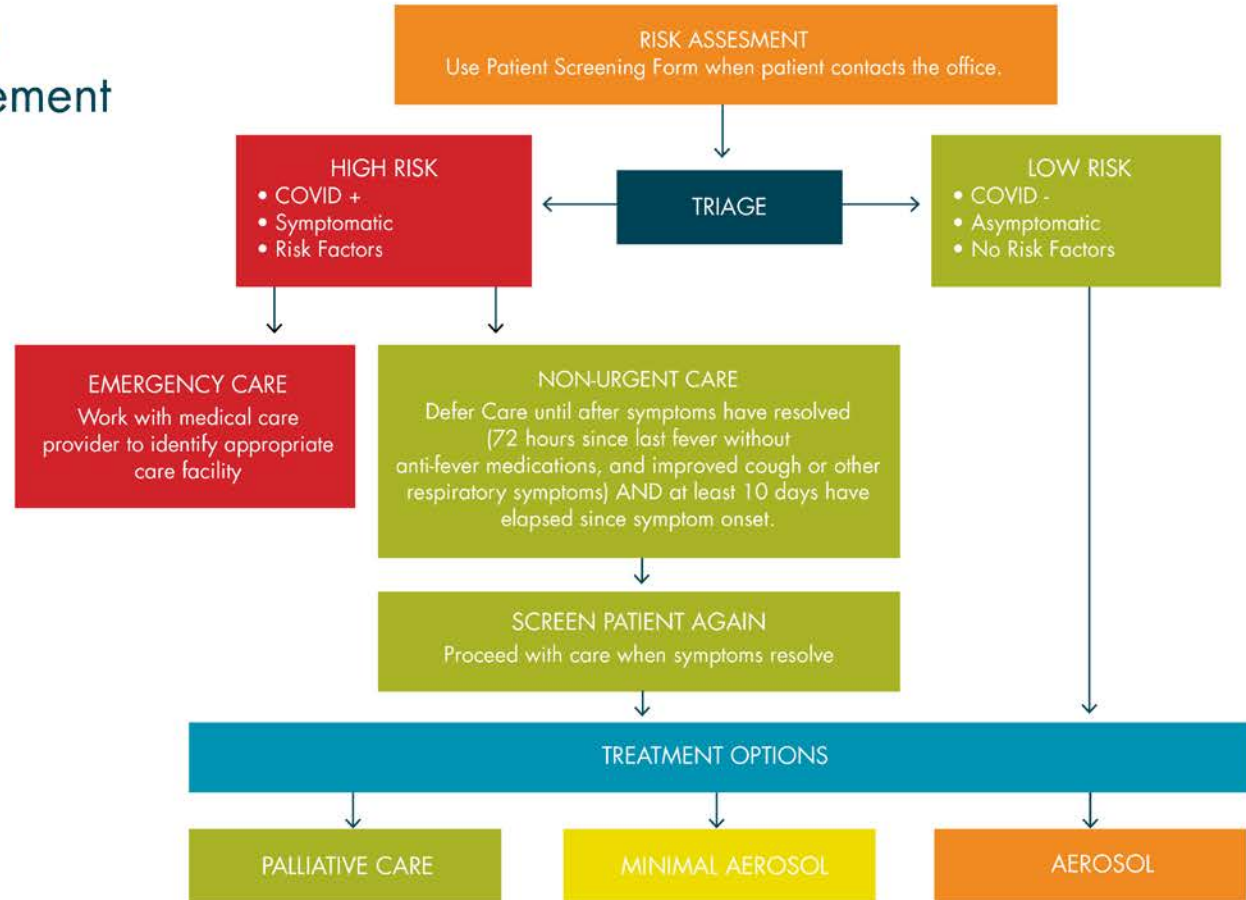
# When N95s are in short supply...



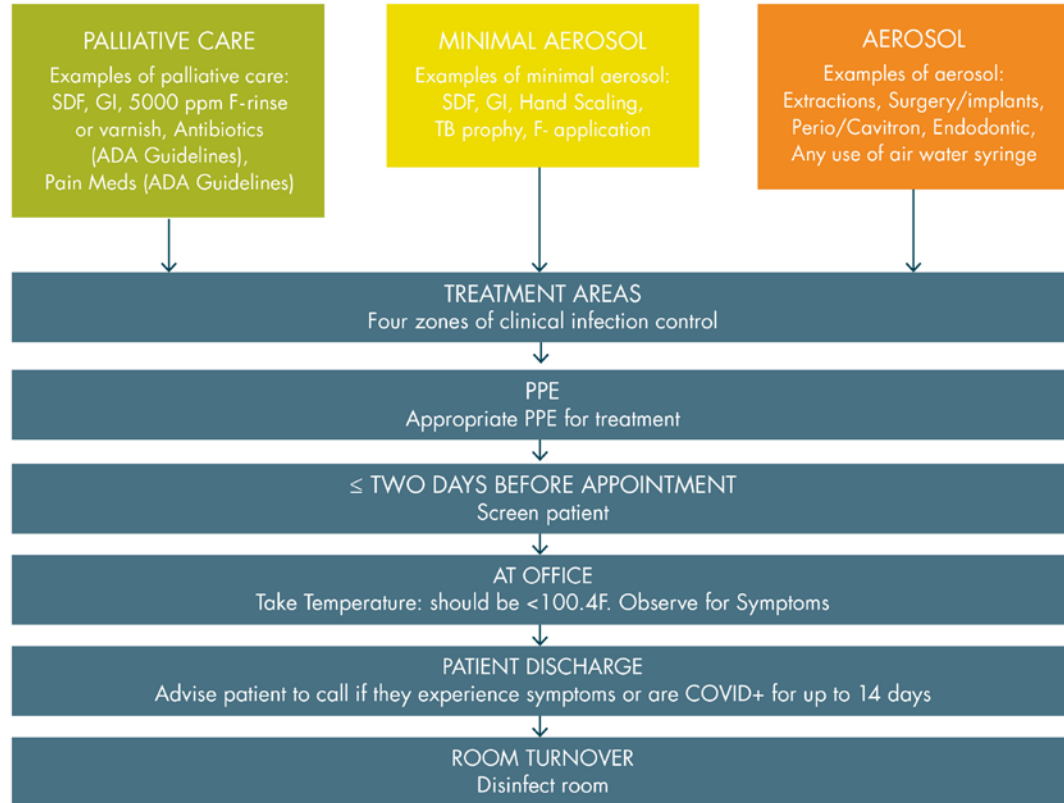
## National Academies' Consensus Report on Reusable Elastomers (2019)



# Patient Screening and Risk Management Workflow



# Patient Screening and Risk Management Workflow



# Public Health Literacy

- “the degree to which individuals and groups can obtain, process, understand, evaluate, and act on information needed to make public health decisions that benefit the community”

# Oral Health Equity in the Era of COVID-19

- Impact on dental offices/clinics who treat Medicaid patients
- Affects on CA state budget – advocacy to maintain adult dental benefits/provider reimbursement
- Eliminated expansion of benefits to undocumented
- Compliance difficulty with airborne transmission standards relative to high disease burden



**CDA Journal**  
**April, 2012**  
**More to come, August 2020**

***Thank you!***

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