

March 27, 2020

On March 25th, Governor Ralph Northam and State Health Commissioner M. Norman Oliver, MD, MA today directed all hospitals to **stop performing elective surgeries or procedures** to help conserve supplies of personal protective equipment (PPE). The full text of [Order of Public Health Emergency Two is available here](#).

Important points of clarification

- Restricts dental offices to emergency-only care as discussed in the [ADA guidance](#)
 - Virginia Health Catalyst has patient-friendly emergency resources on their [COVID-19 Hub](#)
- Restrictions end in 30 days (on 24 April 2020)
- Considers safety of clinical staff and patients
- Does not mandate other restrictions (e.g., treatment in negative pressure isolation rooms)

Further discussion of this order can be found [here](#) on the VDA's COVID-19 Hub.

The CDC has released updated [interim guidelines](#) for infection prevention and control in dental settings during the COVID-19 response.

Important points include:

- Dental settings have unique characteristics that warrant additional infection control considerations
- Postpone elective procedures, surgeries, and non-urgent dental visits and contact patients prior to emergency procedures
- Stay home if you are sick and know the steps to take if a patient with COVID-19 symptoms enters your office
- No additional restrictions (e.g., treatment in a negative pressure isolation room) at this time

Additional resources can be found on Virginia Health Catalyst's NEW [COVID-19 page](#).

Opportunities to engage beyond dental care during the pandemic

- Virginia Medical Reserve Corp is looking for volunteers to help support communities during this public health emergency; Sign up [HERE](#)
 - Duties include: staffing call banks, helping with drive-thru testing sites, counting and distributing supplies, etc.
 - Inactive *and* active medical professionals can volunteer
- Review the national policies and plans that were put in place before the COVID-19 pandemic and that are still applicable *now*
 - [Pandemic and All-Hazards Preparedness Reauthorization Act \(PAHPA\) Law](#)
 - [USPHS Policy: PPM 2005-014](#): -- Vaccine Administration in Emergencies
 - [Dentistry's Role in Responding to Bioterrorism and Other Catastrophic Events](#)
- PPE donation locations can be found [here](#)
 - Please contact Barbara Rollins, rollins@vadental.org, at the VDA with any questions

FREE Online Continuing Education Opportunities

- [Elevate Oral Care](#)
- [Colgate Oral Health Network](#)
- [P&G / Crest + Oral-B](#)
- [Dentsply Sirona](#)
- [Tokuyama](#)

Upcoming Webinars

NNOHA Teledentistry Listening Session: Responding to COVID-19

Wednesday, April 1, 2020 01:00 PM EST

Register [here](#)

[Infection Control and Preventive Care During a National Health Care Crisis](#)

Wednesday, April 1, 2020 at 01:00 pm EST

Register [here](#)

[Teledentistry: Providing Alternative Care During a Public Health Crisis](#)

Monday, April 6, 2020 at 01:00 pm EST

Register [here](#)

Teledentistry

- Dr. Scott Wolpin along with Virginia Health Catalyst developed a useful [workflow](#) for dental emergencies
- **Mouthwatch: Teledentistry and COVID-19** Recording can be viewed [here](#)
 - For state specific guidance on legislation re: teledentistry *prior* to COVID-19 contact info@mouthwatch.com
- We are waiting on Virginia specific guidance for coding and billing for teledentistry

Clinical updates and recommendations

- The VDA has provided a [summary](#) of ADA guidance during the COVID-19 pandemic
- The EPA has [expanded the list of disinfectants](#) for use against COVID-19
- **REVIEW:** [properly putting on and removing PPE](#)
 - How to properly put on and take off a [disposable respirator](#)
 - [Hand hygiene](#) in the healthcare setting
 - Medical glove conservation strategies: [letter](#) to health care providers
- [OSHA COVID-19 standards](#)
- COVID-19: Nitrous Oxide use during dental treatment
 - In a [message](#) from Dr. Norman Tinaoff, the Chair of the International Association of Pediatric Dentistry Science Committee, the recommended the following:
 - “The use of **air/water spray, nitrous oxide equipment, ultrasonic instruments, and high-speed handpieces produce aerosols that increase the chance of COVID -19 transmission and therefore **should be limited****. One also should evaluate if dental emergency care can be addressed with antibiotics, pain medication, and temporary fillings.”
 - There was an excellent discussion on the NNOHA Listserv in regards to this topic
 - A majority of offices have elected to *stop* the utilization of nitrous oxide during emergency appointments citing the need for efficiency, short appointment length, sterility concerns of nitrous oxide tubing, and the nature of the appointment (e.g., single tooth extraction)
 - **Remember:** you can subscribe to the *free* NNOHA listserv [here](#) and click “subscribe” on the LEFT column
 - You can access the archive of all previous discussions on the listserv as well once you are a subscriber
- With the governor’s mandate to limit dental care to emergencies only there are other important steps to take to efficiently care for patients in a clinical setting when necessary
 - [ADA Recommendations](#) for emergency dental treatment
 - Prop open as many doors as possible in the office to minimize contact with surfaces
 - Minimize your patient’s time in the office
 - Request patient’s wait in their car until treatment time is ready
 - Focus on getting patient in and out of your clinic as efficiently as possible this means *avoid patient bathroom breaks as much as possible*
 - Consider designation of one operatory for expected surgical extractions during the day
 - If a surgical extraction is performed, clean the room following treatment using EPA recommend COVID-19 disinfectants, and allow it to stand unused for 24 hours
 - Many clinics are limiting the number of patients seen during the day already in an effort to minimize person-to-person contact
 - GOAL: manage and treat dental emergencies appropriately, keep your patients, yourself, and your team safe and healthy, minimize aerosol generation
 - Utilization barriers on surfaces that are difficult to clean / sterilize (e.g., buttons, switches, handles) following patient treatment