<u>Slate</u>: What Going to the Dentist Is Like Now - It's time to get familiar with "four-handed dentistry."

- This article is part of "Reopenings", a series about how businesses are operating during the pandemic
- Well written article that may be beneficial to share with your non-clinical community members that
 provides insight to many of the changes dental offices are undergoing include PPE worn by the staff,
 waiting room appearance, and even what to expect during your dental treatment

Online Continuing Education

D4 Practice Solutions: Continuing Education Webinar Series FQHC Dental Operations in a Time of Crisis

- Webinar I: Maximizing Dental Staff and Patient Safety
 - Wednesday, June 3rd at 12:00 PM
 - o Register <u>here</u>
- Webinar II: Creating a New Paradigm: New Approaches to Care
 - O Wednesday, June 10th at 12:00 PM
 - o Register here
- Webinar III: Keeping the Lights On: Survival Strategies to Ensure Dental Program Viability
 - Wednesday, June 17th at 12:00 PM
 - Register here

Upcoming Webinars

DentaQuest: Saliva & COVID-19 Testing in Dental Practices

Tuesday, May 26th at 1:00 PM EST Register here

ADA HPI: Positive Signs in Third Week of "Reopening" of Dentistry

Thursday, May 28th at 12:00 PM EST

Register <u>here</u>

Clinical Guidance

Virginia Dental Safety Net Clinic Status

CDC: Guidance for Dental Settings (updated 05/19/2020)

Please read through the *entire* updated guidelines! Below are a few key points I selected, but there is a lot of good information and details in this update. Remember, each clinic's experience of return to care will be different and you should use these guidelines to inform your decisions!

- Recommendations are provided for resuming non-emergency dental care during the COVID-19 pandemic
 - Follow <u>Framework for Healthcare Systems Providing Non-COVID-19 Clinical Care During the</u> <u>COVID-19 Pandemic</u>, which includes, but is not limited to
 - Be prepared to rapidly detect and respond to an increase of COVID-19 cases in the community
 - Provide care in the safest way possible
 - Consider that services may need to expand gradually
 - Avoid aerosol-generating procedures whenever possible

- Avoid the use of dental handpieces and the air/water syringe
- When possible, treat one patient at a time in the building and minimize the number of individuals in the building and dental operatory whenever possible
- New information is included regarding facility and equipment considerations, sterilization and disinfection, and considerations for the use of test-based strategies to inform patient care
 - Continue standard maintenance and monitoring of DUWL according to the IFUs of the dental operatory unit and the DUWL treatment products
 - Pre-procedure mouth rinses with an antimicrobial product (chlorhexidine gluconate, essential
 oils, povidone-iodine or cetylpyridinium chloride) may reduce the level of oral microorganisms in
 aerosols and spatter generated during dental procedures
 - NOTE: COVID-19 has not been studied specifically and there is no evidence based research that indicates these mouth rinses will reduce SARS-cov-2 viral load and transmission
 - Consult a HVAC specialist to determine building specific upgrades including, but not limited to, ability to safely increase the percentage of outdoor air supplied through the HVAC system and increasing filtration efficiency to the highest level compatible with the HVAC system without significant deviation from designed airflow
 - o Consider use of portable HEPA filtration and/or UVGI
- Expanded recommendations for provision of dental care to both patients with COVID-19 and patients without COVID-19.
 - Consider using a tiered approach to universal PPE based on the level of transmission in the community
 - To clean and disinfect the dental operatory after a patient without suspected or confirmed
 COVID-19, wait 15 minutes after completion of clinical care and exit of each patient to begin to clean and disinfect room surfaces
 - Additionally, consider waiting <u>sufficient time depending on ACH</u> before utilizing the room again following cleaning and disinfection
 - To <u>clean and disinfect</u> the dental operatory after a patient with COVID-19, DHCP should delay entry into the operatory until a <u>sufficient time has elapsed</u> for enough air changes to remove potentially infectious particles

Community

Virginia Health Center COVID-19 Survey Summary Report

- Almost 65% of CHCs with testing are receiving results in 2-3 days
 - Approximately 12% receive results in 24 hours
 - o 23.5% receive results in 4-5 days
- Gowns followed by surgical masks and respirators continue to be a challenge to obtain

Mullan Institute for Health Workforce Equity: Ensuring Access to Oral Health Care (approximately 40 min)

- This Webinar examines the implications of COVID-19 for the oral health workforce
- Speakers address the impact of COVID-19 on dental practices, share innovations including teledentistry
 and integrated oral health, primary care, and public health and discuss implications and policy needs for
 future practice to ensure oral health care access

DentaQuest Leads Learning Community to Safely Reopen FQHC Dental Practices

•	The DentaQuest Partnership's improvement experts will lead a learning community to test a phased
	reopening plan for dental services at Federally Qualified Health Centers in Massachusetts using infection
	control guidelines and advancing telehealth as part of a new collaboration with Community Care
	Cooperative (C3)
_	More information can be found here

More information can be found <u>here</u>

Childhood vaccine rates	plummet amid	coronavirus	pandemic,	risking new	health crisis