

COVID-19 OPERATIONAL PLAN FOR THE PRACTICE OF DENTISTRY IN THE PROVINCE OF NEW BRUNSWICK (NBDS Operational Plan)

Introduction

On March 17, 2020 the New Brunswick Dental Society advised its members, public, government and malpractice insurer of a strong recommendation that dentistry be restricted to emergency care.

On March 19, 2020 the Province of New Brunswick (PNB) declared a state of emergency under section 12 of the *Emergency Measures Act* to enhance measures to help contain the spread of COVID-19 (the novel coronavirus).

All Regulated Health Professionals, including dentists, were ordered to only provide “services they deem essential for the health and wellbeing of their clients”. New Brunswick Dentists, following PNB’s Order, restricted practice to emergency care for patients. This restriction was lifted on May 8, 2020 on condition of an Operational Plan.

This NBDS Operational Plan has been adopted by the Board of Directors and provides mandatory regulatory requirements (**must**) and recommended best practices (**should**).

This NBDS Operational Plan respects the minimum statutory requirements of the Office of the Chief Medical Officer of Health (CMOH) in its “**Guidance Document of General Public Health Measures During COVID-19 Recovery.**” (PNB Guidance Appendix A) and contemplates measures for dentistry until the end of this State of Emergency. **NBDS requires each Clinic to maintain a printed copy of the Operational Plan signed by each Dentist and staff which must be accompanied with fit tested respiratory mask certifications.**

NBDS’ Operational Plan WILL change as the risk-assessment changes and members must remain knowledgeable and compliant with the Operational Plan.

Objectives

- Confirm the obligations of dentists with respect to PNB’s Guidance; and
- Confirm the NBDS Guidance until the Green Phase of New Brunswick’s Reopening.

PNB’s Guidance

PNB’s Guidance document includes the minimum public health measures that must be observed during any return to practice, including:

- Physical distancing (2 meter / 6 feet);
- Frequent hand washing;
- Cleaning surfaces properly;
- Respiratory etiquette;
- The mandatory use of community masks when unable to maintain physical distancing; and
- **A Written Operational Plan.**

NBDS OPERATIONAL PLAN

NBDS' Operational Plan is based on PNB's Guidance and recognizes that government and public confidence will be paramount throughout this State of Emergency and that enhanced procedures are required for us to do our part to prevent further outbreaks.

PRIOR TO REOPENING CLINIC

- **Dentists must adhere to a scheduling protocol to address backlogs of emergency and urgent care prior to scheduling elective treatment. Note: Until June 1, 2020, preventive maintenance dental hygiene therapy by dental hygienists is not permitted.**
- **Dentists must meet with staff and thoroughly review and explain NBDS' Operational Plan.**
- Dentists **must** confirm posting of signage relating to proper hand hygiene, respiratory hygiene, and physical distancing in common areas such as waiting rooms and washrooms.
 - Screening Questionnaire
 - Hand Washing Poster
 - Hand Sanitizer Poster
 - Protect Yourself and Others from Getting Sick Poster
 - Physical Distancing Poster**(Appendix A)**
- Dentists **must** place hand sanitizer at entryway.
- Dentists **must**, where possible, ensure physical distancing for patients and staff including arrange furniture in waiting areas to allow for physical distancing between chairs.
- Dentists **must** conduct an inventory of available personal protective equipment (PPE) supplies and assign one staff member to be responsible for maintaining an appropriate inventory of PPE.
- Dentists **should** remove magazines, pamphlets, toys, plants, and any other non-essential items from waiting areas and operatories and **should** wherever possible, use disposable beverage cups.
- Dentists **should**, where possible, place markers throughout the clinic and reception area to indicate where patients are to stand to interact with administrative staff to maintain physical distancing.
- If physical distancing cannot be maintained in a reception area, Dentists:
 - **Should** place a transparent barrier at the reception desk to ensure separation between staff and patients during transactions; **or**
 - **Must** ensure reception staff wear mask, eye protection and gloves.
- When physical distancing between patients and staff is not possible throughout the clinic, staff and Dentists **must** wear mask, eye protection and gloves.
- Clinics **should** provide closed laundry/waste bins for disposal of used PPE

- Clinics **should** arrange for laundry service or provide facilities to launder scrubs on-site.
- Operatories **should** be inspected to remove all non-essential contents to facilitate enhanced infection control following aerosol-generating procedures.

GENERAL STAFF REQUIREMENTS AND PHYSICAL DISTANCING

- Clinics **should** limit the number of staff in the clinic. Staggering of shifts and lunch/coffee breaks is recommended, and during breaks in treatment physical distancing should be observed by staff.
- All staff **must** self-monitor for COVID-19 symptoms before reporting to work each day, and refrain from attending the clinic if symptoms are present. Staff with mild symptoms may see their family doctor and return to work after 48 non-symptomatic hours.
- Staff **must** be pre-screened at the beginning of each shift using the *Dental Office Staff Daily Screening Form (Appendix B)*.
- Staff **must** not wear scrubs to/from work.
- Staff who are required to wear PPE **must** follow prescribed sequence re: donning and removing PPE (educational video available on the NBDS website, **Appendix C**).
- When receiving deliveries, staff **must** wear gloves when collecting and/or accepting parcels and disinfect the parcels and surfaces they contact.
- Staff **must** wash or disinfect hands thoroughly; before and after any contact with patients; after contact with contaminated surfaces or equipment; after removing PPE; following established PPE protocols.

INITIAL PATIENT CONTACT (PRE-APPOINTMENT)

- Dentists **must** pre-screen patients for vulnerability and pre-existing conditions (i.e. over age 65, co-morbidities, pulmonary disease, cardiac disease, diabetes, or immunosuppressed or immunocompromised) and when possible **should** schedule these patients at the beginning of the day.
- Clinics **must** interview patients the day prior to booking re:
 - Exhibiting COVID-19 symptoms in past two weeks using *Screening Questionnaire for COVID-19 (Appendix A)*; and
 - A *Patient Screening Form* **must** also be completed (**Appendix D**) and patients may be advised of protocols they can expect on arrival.
- Patients who report symptoms and/or have been advised by Public Health to self-isolate, **must** not be booked for treatment until they have been asymptomatic for 14 days.
- Patients with suspected or proven COVID-19 that have a dental emergency **must** be referred for treatment in a hospital setting.

- Appointments **must be** scheduled with sufficient time between appointments to minimize the potential for contact with other patients.

PATIENT ARRIVAL PROTOCOL

- Patients **should** be advised to telephone the clinic from outside upon arrival.
- Patients **should** wait in their vehicle or outside the clinic until called upon to enter the premises.
- Patients **must** attend their appointments alone unless circumstances require assistance (e.g. child) at which point one other guest may attend.
- All patients and guests **must** enter the clinic wearing a community mask and / or **must** be provided same on entry by staff who are wearing a mask, eye protection and gloves.
- Patients and guests **must** sanitize/wash hands immediately upon entering the clinic.
- Staff **should** accompany patient throughout the clinic to minimize touching of surfaces.
- Patients and any accompanying guests **must** be screened for signs and symptoms of COVID-19 during patient check-in and shall not be allowed further entry if signs and symptoms are present. Temperatures **must** be taken and recorded, and patients with temperatures exceeding 38C **must** not be seen unless the patient's fever can reasonably be attributed to a dental issue (pulpal/periapical dental pain and intraoral swelling).
- If screening reveals signs or symptoms of Covid-19, the appointment **must** be deferred for a minimum of 14 days, and the patient **must** be advised to call Tele-Care 811.
- After check-in, patient should be seated in operatory and patient traffic flow **must** be reduced to a capacity that ensures strict adherence to physical distancing guidelines.

During Dental Care

In addition to NBDS infection control guidelines, the following transmission-based precautions are to be implemented into usual clinical protocols during the COVID-19 crisis:

GENERAL PRECAUTIONS

- Patients **should** rinse with antiseptic mouthwash (1-1.5% hydrogen peroxide) for 30-60 seconds before any procedure.
- Extraoral radiographs **should** be used wherever possible in lieu of intraoral radiographs.
- Use of air/water syringe **should** be minimized.
- The use of high-volume evacuators **should** be used primarily.

PROTOCOL FOR HIGH RISK AEROSOL GENERATING PROCEDURES (air turbine handpiece, ultrasonic and sonic scaler, air polishing, air-water syringe, and air abrasion)

- PPE: fitted N95 respirator (or equivalent **Appendix F**), eye protection, face shields, lab coats or gowns, head bonnets and gloves in accordance with Donning & Doffing procedures (**Appendix C**).
- Four handed dentistry is required.

Note: Certification for fit tested respirators for staff and dentist must be affixed with the Clinic's Operational Plan.

MITIGATION OF HIGH RISK AEROSOL GENERATING PROCEDURES WITH DENTAL DAM

- PPE: surgical masks ASTM level 3 (minimum) or fitted N95 respirator (or equivalent), eye protection, face shield, and gloves **must** be worn
- Four handed dentistry and high-volume evacuation are required
- Hydrogen peroxide pre-rinse **must** be used.

NOTE: Clearing the Air (of Aerosol and Operatories)

- Air changes per hour can be impacted by many factors, including physical layout of clinic, ventilation systems, height of ceiling, and the presence of windows etc. This Operational Plan specifically does not address the clearing of air or ventilation systems or time in between aerosol generating procedures. Dentists **should** consult with their HVAC ventilation professionals to determine optimal settings and best practices. (**Appendix E** – Standard Reference “air changes per hour” CDC).

LOW RISK NON-AEROSOL GENERATING PROCEDURES

- PPE: surgical masks ASTM level 3 (minimum), eye protection and gloves **must** be worn.

PATIENT DISMISSAL

- Patients **must** put on their community mask.
- Patients **should** make payments using debit or credit cards.
- Promotional items such as toothbrushes, floss, appointment cards, etc. **should** not be provided.
- Patients and guests **must** sanitize/wash hands immediately before exiting the clinic.

SANITIZATION

- Appoint a staff person responsible for Infection Control (Covid-19) per PNB Guidance document.
- Disinfect debit machines after each use.
- Clean and disinfect touch surfaces and common areas throughout the office frequently.
- Regularly disinfect reception desk, including transparent barrier if present.

END OF DAY

- Thoroughly clean and disinfect all surfaces, including floors.
- Dispose of all used PPE using standard waste procedure.
- Staff must change from scrubs and work shoes into personal clothing before leaving the clinic.

EXPOSURE TO COVID-19

In the event of suspected exposure to COVID-19 staff should immediately self-isolate, advise employer and call Tele-Care 811 for further direction. **In all instances of suspected exposure to Covid-19, clinics will follow the advice of Public Health.**

Acknowledged by Dentist and Office Staff below that this is the Operational Plan for this clinic.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Appendix A

Screening Questionnaire for COVID-19

PLEASE DO NOT ENTER THE FACILITY WITHOUT ANSWERING THE FOLLOWING QUESTIONS

1. Do you have any of following symptoms: fever/feverish, cough, sore throat, headache or runny nose? If you answered YES, and have only one symptom, then stay home and do not return until you are fully recovered. If you answered YES, and have 2 or more of the symptoms, then self-isolate at home, and call 811.

2. If you have entered YES to any of the following below, then you must stay home and self-isolate for 14 days. If you develop symptoms, please refer to the self- assessment link on the Government of New Brunswick webpage.

- a. Have you had close contact within the last 14 days with a confirmed case of COVID19?
- b. Have you had close contact within the last 14 days with a person being tested for COVID-19?
- c. You have been diagnosed with COVID-19 or are waiting to hear the results of a lab test for COVID-19.
- d. Have you returned from travel outside of New Brunswick within the last 14 days?
- e. You have been told by public health that you may have been exposed to COVID-19.

Posters and Signs:

Mandatory signage <https://www.nbdscentral.ca/Apps/Central/Home/Dashboard/5953>

Self-Monitor <https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/Self-Monitor.pdf>

How to self-isolate <https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/Self-Isolate.pdf>

Hand washing <https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/diseases-conditions/coronavirus/covid-19-handwashing/covid-19-handwashing-eng.pdf>

Hand sanitizer <https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/SanitizerDesinfectant.pdf>

Protect self & others <https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/en/CDC/PosterBW.pdf>

Physical distancing <https://www.canada.ca/content/dam/phac-aspc/images/services/publications/diseases-conditions/physical-distancing/physical-distancing-en.pdf>

Cleaning & disinfecting <https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/CDCOVIDE.pdf>

Public Health posters <https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/en/CDC/PosterCL.pdf>

PNB Guidance Document:

https://www2.gnb.ca/content/dam/gnb/Departments/h-s/pdf/COVID19_recovery_phase-1_guidance_document-e.pdf.

WorkSafeNB Guidelines <https://www.worksafenb.ca/media/60996/embracing-the-new-normal.pdf>

Appendix B

Dental Office Staff Daily Screening Form

All dental office staff must confirm their absence of symptoms and have temperature taken each day. If symptoms are present, further investigation is needed by the managing dentist.

Name:			Signature:				
• Fever > 38° C	YES	NO	• Difficulty breathing	YES	NO	AM Temperature _____	
• Cough	YES	NO	• Flu-like symptoms	YES	NO	PM Temperature _____	
• Sore throat	YES	NO	• Runny nose	YES	NO		
• Shortness of breath	YES	NO					

Name:			Signature:				
• Fever > 38° C	YES	NO	• Difficulty breathing	YES	NO	AM Temperature _____	
• Cough	YES	NO	• Flu-like symptoms	YES	NO	PM Temperature _____	
• Sore throat	YES	NO	• Runny nose	YES	NO		
• Shortness of breath	YES	NO					

Name:			Signature:				
• Fever > 38° C	YES	NO	• Difficulty breathing	YES	NO	AM Temperature _____	
• Cough	YES	NO	• Flu-like symptoms	YES	NO	PM Temperature _____	
• Sore throat	YES	NO	• Runny nose	YES	NO		
• Shortness of breath	YES	NO					

Name:			Signature:				
• Fever > 38° C	YES	NO	• Difficulty breathing	YES	NO	AM Temperature _____	
• Cough	YES	NO	• Flu-like symptoms	YES	NO	PM Temperature _____	
• Sore throat	YES	NO	• Runny nose	YES	NO		
• Shortness of breath	YES	NO					

Name:			Signature:				
• Fever > 38° C	YES	NO	• Difficulty breathing	YES	NO	AM Temperature _____	
• Cough	YES	NO	• Flu-like symptoms	YES	NO	PM Temperature _____	
• Sore throat	YES	NO	• Runny nose	YES	NO		
• Shortness of breath	YES	NO					

Name:			Signature:				
• Fever > 38° C	YES	NO	• Difficulty breathing	YES	NO	AM Temperature _____	
• Cough	YES	NO	• Flu-like symptoms	YES	NO	PM Temperature _____	
• Sore throat	YES	NO	• Runny nose	YES	NO		
• Shortness of breath	YES	NO					

Name:			Signature:				
• Fever > 38° C	YES	NO	• Difficulty breathing	YES	NO	AM Temperature _____	
• Cough	YES	NO	• Flu-like symptoms	YES	NO	PM Temperature _____	
• Sore throat	YES	NO	• Runny nose	YES	NO		
• Shortness of breath	YES	NO					

Appendix C

Donning & Doffing of PPE

Donning of PPE:

If at anytime you feel you have made an error, please use hand hygiene techniques and wash areas you feel may have been exposed

Begin by checking which procedures are being done on this patient to see which PPE is required.

Hair should be pulled back and jewellery should be removed or minimized.

Perform hand hygiene for at least 20 seconds, rubbing palms, wrists, in between fingers, back of hands and along the nail beds.

Don gown by first closing the back of the neck. Tie waist ensuring all clothing is covered.

Donning N95 mask:

Place fit-tested N95 mask over nose and under chin. Place top strap at crown of head. Stretch bottom strap to back of neck. Mould the nose strip to ensure fit and tight seal. Perform a seal test by putting hands at top and bottom of mask while breathing out to feel if any air escapes.

For droplet contact precautions, secure eye protection and face shield.

Put on gloves one at a time, making sure they are snug over the sleeve of the gown, ensuring no skin is exposed.

Doffing of PPE

Remove the first glove by pulling it up and away from middle of your palm turning the glove inside out.

Hold the entire glove in the other hand. To remove other glove place a finger inside the glove pushing it off wrapping it inside out, balling up both gloves together and throwing into garbage. Remove the gown by opening at the neck and then untying at the waist. From the back of the neck, pull the gown away from you. Only touch the inside of the gown and roll it into a ball. Throw it into garbage. Perform hand hygiene for 15 – 20 seconds. Remove face shield by pulling strap and shield away from you. Remove N95 mask by pulling straps away from you and pulling mask off dropping into garbage. Perform hand hygiene again for 15 – 20 seconds.

When doffing a procedure mask, pull elastics away from ears, release from chin and drop into garbage.

- Disposable PPE should be disposed of within the operatory.
- Reusable PPE should be left in the operatory and be disinfected along with the operatory or sterilized.
- Glasses and face shields are to be cleaned and disinfected between each patient.

For teaching videos please visit this site from Vitalité Health Network

English

<https://www.youtube.com/playlist?list=PL7ApdZUkX0i1FvICbDTNI9UviDYP2xTJK>

French <https://www.youtube.com/playlist?list=PL7ApdZUkX0i0rAuVFOVc2UCeTaPANNFTd>

Appendix D

Patient Screening Form

Use this form to screen patients before their appointment and when they arrive for their appointment.

Staff screener: _____

Patient Name: _____ Patient age: _____

Who answered: Patient Other (specify) _____

Contact Method: Phone email Other _____

Identify yourself and explain the purpose of the call, which is to determine whether there are any special considerations for their dental appointment. Have the patient answer the following questions.

Screening Questions	Pre-Screen	In-Office
1. Do you have a fever or have felt hot or feverish anytime in the last two weeks? Patient temperature at appointment: _____. If elevated, provide mask to patient.	YES NO	YES NO
2. Do you have any of these symptoms: Dry cough? Shortness of breath? Difficulty breathing? Sore throat? Runny nose?	YES NO	YES NO
3. Have you experienced a recent loss of smell or taste?	YES NO	YES NO
4. Have you been in contact with any confirmed COVID-19 positive patients, or persons self-isolating because of a determined risk for COVID-19?	YES NO	YES NO
5. Have you returned from travel within Canada from a location known affected with COVID-19?	YES NO	YES NO
6. Are you over the age of 65?	YES NO	YES NO
7. Do you have any of the following? Heart disease, lung disease, kidney disease, diabetes or any auto-immune disorder?	YES NO	YES NO

Appendix E

Air Changes / hour (ACH) and time required for airborne contaminant removal by efficiency

ACH	Time (mins.) required for removal 99% efficiency	Time (mins.) required for removal 99.9% efficiency
2	138	207
4	69	104
6 ⁺	46	69
8	35	52
10 ⁺	28	41
12 ⁺	23	35
15 ⁺	18	28
20	14	21
50	6	8

+ Denotes frequently cited ACH for patient-care areas.

<https://www.cdc.gov/infectioncontrol/guidelines/environmental/appendix/air.html#tableb1>

Appendix F

List of equivalent N-95 mask respirators:

From the US Center for Disease Control:

There are ten classes of NIOSH-approved particulate filtering respirators available at this time. 95% is the minimal level of filtration approved by NIOSH. The N, R, and P designations refer to the filter's oil resistance as described in the table below.

Ten classes of NIOSH-approved particulate filtering respirators available

Filter Class	Description
N95, N99, N100	Filters at least 95%, 99%, 99.97% of airborne particles. Not resistant to oil.
R95, R99, R100	Filters at least 95%, 99%, 99.97% of airborne particles. Somewhat resistant to oil.
P95, P99, P100	Filters at least 95%, 99%, 99.97% of airborne particles. Strongly resistant to oil.
HE (High Efficiency Particulate Air)	Filters at least 99.97% of airborne particles. For use on PAPRs only. PAPRs use only HE filters.

For more information visit the CDC website:

https://www.cdc.gov/niosh/nppt/topics/respirators/disp_part/respsource1quest2.html

Strategies for Optimizing the Supply of N95 Respirators

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html>