

Welcome Back to Work – The Covid -19 Fighting Plan.

We are all excited to head back to work after this unprecedented experience albeit with a bit of nervousness. I know it has been a challenging time for all of us, but we are looking forward to returning to work with our work family.

It will not be a smooth transition back to our normal working operations and we still do not know how long it will be until we can practice in a manner like the past. Change can be overwhelming, but we are in this together and will come out stronger as a result.

One thing that has changed forever is the way our patients view viruses and infections. Patients are now more well-versed than ever about the risks of transmitting viruses and diseases, and it is our responsibility to provide them with the knowledge and comfort that West Coast Oral Surgery is a safe and sterile environment. Creating a sense of comfort and security will be increasingly important as we look to fill schedules in the coming months.

Patients likely do not know the pre-COVID-19 standards that our dental office adhered to, so it is important to highlight both the basics as well as the improvements we have made. Appropriate communication with patients will be an important tool in ensuring our practice ramps back up.

Please take the time to read and learn more about these guidelines for reopening of our practice.

Welcome Back to Work – The Covid -19 Fighting Plan.

The causative agent of COVID-19 is severe acute respiratory syndrome coronavirus 2 (SARS –CoV-2).

- The incubation period, the time between exposure and potentially becoming infected, is on average 5-6 days, but can be up to 14 days with or without symptoms.
- During the asymptomatic period (pre-symptomatic period) some infected persons may be contagious. Transmission from a pre-symptomatic person can occur before the onset of symptoms.

The virus can spread in several ways, including through **droplets** when a person coughs or sneezes, and from **touching a contaminated surface** before touching the face.

- The risk of **person-to-person transmission** is increased the closer you come to other people, the amount of time you spend near them, and the number of people you come near. Physical distancing measures help mitigate this risk.
- The risk of **surface transmission** is increased when many people contact same surface, and when those contacts happen in short intervals of time. Effective cleaning and hygiene practices help mitigate this risk.

Welcome Back to Work – The Covid -19 Fighting Plan.

1 **The Patient Visit:**

The main goal continues to be health and safety of our patients and staff. Taking a few additional steps to prepare for patient visit will add many layers of protection to the office.

- Our downtown office is approximately 152 square meters. Our Port Coquitlam office is approximately 180 square meters. Based on Work Safe BC Guidelines (5 sq m/person), the maximum capacity is 30 and 36 people respectively.
- To accommodate physical distancing, appointment times need to be staggered.
- When speaking with patients during scheduling and appointment reminders, advise the patients to:
 - Reschedule if they become sick, are placed on self-isolation, or have travelled out of the country within the last 14 days.
 - Attend appointments alone, and not bring friends or children.
- Make sure to email the patients any forms that need to be filled out so patients can complete them prior to arriving at the clinic.
- Inform patients that punctuality would be greatly appreciated. If they are late, we may have to reschedule their appointment to ensure that our 'social distancing protocols' remain functioning successfully. Appointments are being staggered to keep patients separated. Timing is critical to this system.
- We have made every attempt to ensure that at any one time no more than one patient is seen and treated in the office.

Pre-appointment Screening (One day before patient visit)

The best way to avoid exposure to COVID-19 is to prevent sick individuals from entering the office. The day before a scheduled appointment, reach out to the patient to discuss the following with them:

Welcome Back to Work – The Covid -19 Fighting Plan.

Each patient is required to be screened prior to their appointment, with responses documented either by email or by staff member confirming the appointment.

- Patient Pre-Screening Form for COVID-19
- Patient Dental treatment Consent form
- If you need to leave a voicemail or are sending an email, ask the patient to call the office prior to the appointment for confirmation and pre-appointment screening.
- Patients who previously tested positive may still attend the appointment only if:
Resolution of fever and /or symptoms without the use of medications for at least 14 days prior to appointment date booked.
- **Ensure that all responses are well documented.**
- Remind patients/guardians to limit extra companions on their trip to your office to only essential people to reduce the number of people in the reception area and encourage others to wait in their personal vehicles or outside the dental office.
- If patients/parents/guardians seem reluctant in anyway, try to reassure them that this is all being done out of an abundance of caution for their health, as well as that of the other patients being seen in the office, the surgeons and the staff, and public with whom they might come in contact. Request the patient to use the public washroom in the office building before coming to the office when we confirm the appointment or at the pre-screening call.
- At this time, we are not providing blankets to our patients in the recovery area and patients are instructed to bring warm clothing.
- Ask patient to call the clinic once they arrive outside the clinic and wait until the staff calls them to come into the dental office.
- Inform patients that the “Patient Pre-screening “questions will be repeated, and their temperature will be taken when they arrive at the office to ensure that nothing has changed since the phone conversation confirming their appointment.

Welcome Back to Work – The Covid -19 Fighting Plan.

- Ask patient to wear a mask to the office if they have access to a fresh one, otherwise we will provide them with a mask.

□ **Day of the Dental Appointment:**

Ask patients to use hand sanitizer at the door before entering practice

- Patients and staff are to maintain a minimum of 2 meters (6 feet) distance from each other wherever possible unless there is Plexiglas shield/ barrier present.
- Speaking should be kept to a minimum and the patients made aware of this new norm. Our pre-screening and online form filling will cut down the need for this considerably.
- One staff member will be designated as a “greeter”.
- The “greeter” will ask the patient to use the hand sanitizer and offer them a mask if they do not have one.
- The “greeter” will go over the “Patient Pre-screening” questions and do a temperature check filling in the information on the “Patient Pre-screening” sheet.
- The “greeter” will then direct the patient to a closed operatory in which treatment will be carried out.
- Post-op instructions should include a reminder to report any signs or symptoms of COVID-19 within the next 14 days.
- If we are seeing a high-risk patient which includes, but is not limited to, over age 65, immune-compromised, every effort should be made to schedule them for the first appointment of the day.
- We are limiting patient flow in our office to one patient at a time with no family members, friends or rides permitted in the waiting area.

Welcome Back to Work – The Covid -19 Fighting Plan.

2- Reception Area Preparation Checklist:

Emphasis is placed on hand hygiene and cough etiquette for everyone.

The following are provided for hand sanitation in the waiting area/washroom

- Touchless dispensers where possible
- Tissues
- Alcohol-based hand sanitizer
- Soap at sinks
- Trash cans with open lid
- We do not allow multiple patients entering our office and at any one time only one patient is allowed to be seated in the reception area. If more than one patient is to be allowed in the office, they will be instructed to sit at least 6 feet apart with chairs spaced out to accommodate this.
- All reading materials will be removed.
- On a regular schedule (every 2 hours), wipe all touchable surface areas with an approved surface cleaner. Remember to include tables, chair arms, doorknobs, light switches, and anything else with which people come in contact.
- All external service providers are logged at entry to the facility
- During transactions, if possible, limit the exchange of papers such as receipts. Please email receipts.
- Payments should be accepted through contactless methods like credit/debit card. No cash. If you had to collect cash – have the patient place it in an envelope.

Welcome Back to Work – The Covid -19 Fighting Plan.

3 – Chairside Checklist: 2 pages

- Limit paperwork in the operatory as much as possible.
- No food, drink, personal electronics allowed in the operatory. NO CELL PHONE at any cost. All of them should be kept in the designated box outside the room or wherever we deem fit.
- Reduce all clutter in the operatory and everything should be placed in cabinets or drawers.
- Cover keyboard of computer with disposable, flexible, clear barrier (e.g. plastic wrap) and change/wipe between patients.
- Mask pre-entry (for chairside staff also) as virus-containing aerosol particles may exist.
- No hand shaking, or physical contact.
- Review overall health history, confirming that the screening questions were asked during the check-in procedure, and review if necessary. Speaking to be kept to a minimum. No more chatting like we are used to.
- Wash hands and glove in room.
- Pre-procedural rinse using 1% Hydrogen Peroxide mouth rinse. Give to patient 5 cc in a Dixie cup and ask them to swish for 60 seconds before spitting back into the cup.
- Once the patient is seated, it is recommended not to go out of the operatory till the visit is over. Please have everything setup/available in the operatory for Aerosol Generating Procedures (AGP).
- For AGP, every team member in operatory should be wearing all PPE upon entering and should remove soiled PPE before exiting the operatory.
- Clean the operatory while wearing gloves, a mask, and face shield or goggles.

Welcome Back to Work – The Covid -19 Fighting Plan.

- **We clean the operatory twice.** Once right after the procedure and prior to the doffing of PPE. We will allow for proper air exchange in the operatory and perform a second cleaning after 20 mins. This second clean up involves surface disinfection. This to take care of any aerosolized particles that may have fallen on the surfaces in that time. After this, the room is ready for the next patient.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- Operatory floors (for operatories in use) should be mopped/cleaned/disinfected mid day and end of day. We will all take turns doing this.
- Flush water lines for 30 seconds in between patients.
- Impressions, prostheses, or appliances must be cleaned and disinfected before transport to the lab. Finished devices, prostheses and appliances delivered to the patient must be free of contamination.
- All instrument cassettes will be wrapped and all extra instruments including handpieces, surgical instruments, etc. should be bagged before placing in the autoclave.
- When cycle is complete, sterile instruments in bags/ wrapped cassettes will be removed with clean gloves and transferred to “clean” area.
- Clean instruments will be stored in the “clean-area” of the sterilization unit.
- Prior to any surgical procedure, any instrument that is anticipated to be used will then be brought to the operatory to minimize any need to open and close the operatory door during the procedure.
- Any open areas with supplies need to be covered during dental procedures.
- All operatories in our office are closed operatories.
- No more blankets for the patients. We will advise them to bring their own if they think they would like to have them during long appointments or in the post operative recovery area.

Welcome Back to Work – The Covid -19 Fighting Plan.

➤ **Patient Washroom Use:**

- Avoid having patient use the washroom during the procedure. Request the patient to use the washroom before coming to the office when we confirm the appointment or at the pre-screening call.
- Our office does not have a washroom and the only available washrooms are the public washrooms in the building that are routinely cleaned and disinfected as per building/strata rules.

4 – Staff Protection Strategies

- Plexiglas shields will be installed at the reception desk.
- All staff upon entering the office will have their temperatures checked and recorded in a log book. Temperature check will also be done and recorded prior to the staff leaving the office for the day.
- All staff should wear masks for the full duration of their shift:
 - Perform hand hygiene before putting on the mask
 - Wear a mask securely over the mouth and nose and adjust the nose piece to fit snugly
 - DO NOT touch the front of mask while wearing or removing it (and immediately perform hand hygiene if this occurs)
 - DO NOT dangle the mask under your chin, around your neck, off the ear, under the nose or place on top of head
 - Remove the mask just prior to breaks or when leaving the clinic, while in an area where no patients or other staff are present, and discard them in the nearest no- touch waste receptacle, or store for reuse. **Reception masks can be reused after one week safely. Store if you need to.
 - ALWAYS perform hand hygiene after mask removal.

Welcome Back to Work – The Covid -19 Fighting Plan.

- Signs to offer patients/staff instructions on standard recommendations for reducing the spread of COVID-19, respiratory hygiene/cough etiquette and social distancing will be posted.
- Front desk staff should use a specific phone set and wipe it frequently esp. before lunch and at the end of their shift.
- Strict attention should be paid to staff hand hygiene
 - Upon entry into the workplace.
 - Before and after any contact with patients.
 - After contact with contaminated surfaces or equipment.
 - After removing PPE
- Scrubs are to be worn, change between street clothes and scrubs upon entry and exit. Shoe covers are provided to the CDAs and changed in between patients.
- All our CDAs have been fit tested to the available N95 respirators and a copy of the fit test record is kept in their employment binder. If new N95 respirators are to be ordered, then the staff will be re-tested to these new respirators.
- Upon arriving home, staff members should launder work clothes and shower immediately. The scrubs are perfectly fine to wash with the rest of the cloths with warm water. They need not be separated. Soap kills any and all the virus.
- **Personal Protective Equipment as per the latest guidelines:**

Minimum PPE Required	
Non-Aerosol Generating Procedure	Aerosol Generating Procedure
<ul style="list-style-type: none"> • Surgical mask (Level 2 or above) • Eye protection: <ul style="list-style-type: none"> o Safety glasses or o Goggles, or o Prescription glasses • Gloves 	<ul style="list-style-type: none"> • Fit-tested N95/KN95 mask with surgical mask over top <u>OR</u> • Level 3 surgical mask with Full face shield • Eye protection – Full face shield/visor over any of the following: <ul style="list-style-type: none"> o Safety glasses or o Goggles, or o Prescription glasses • Gloves • Long sleeve gowns

Welcome Back to Work – The Covid -19 Fighting Plan.

- Disposable foot cover, head cover and gowns are available at the office for AGPs.
- Disposable gowns are available for use and reusable gowns will soon be provided once available and all gowns will be washed through Canadian Linen or using the office washer/dryer unit. This virus just needs regular detergent to be killed. No need for panic.
- NOTE: In the event our guidelines change to (N95 and KN95) only, we will be reusing them because of the shortage. Staff must remove their mask by the ear loops or elastics taking care not to touch front of mask, and carefully store the mask in a labelled (name and day of week) brown bag in a clean dry area, taking care to avoid contamination of the inner surface of the mask, and perform hand hygiene before and after mask removal and before putting it on again. This mask can be reused one week later, on the same day. Masks should be disposed of and replaced when they become damaged, wet, damp, or soiled (from the wearer's breathing or external splash), or when they come in direct contact with a patient.
- Masks do not necessarily need to be replaced after seeing a patient on droplet and contact precautions if a full-face shield is worn over this.
- Pregnant staff members and immune-compromised staff members should seek and follow medical guidance from their physician regarding work.
- Team members should self-monitor for any influenza-like symptoms (fever with either cough or sore throat, or muscle aches) they may experience and stay home in the event they are ill.
- There will be a daily health screening check point and log for all employees entering the workplace.
- If any direct family member displays sign of any kind of respiratory infection and/or fever, staff member is asked to stay at home.
- Lunch breaks will be staggered to promote physical distancing.

Welcome Back to Work – The Covid -19 Fighting Plan.

5—If someone on the team or a patient test positive:

We need to immediately bring this to the attention of our surgeons Dr. Ali Sadeghi and Dr. Torin Barr as well as our office manager Ms. Ursula Pauwels. We will then inform our local Public Health Authority and follow their direction. For privacy reasons, only follow the guidance provided by the public health agency.

Information on donning and doffing procedures:

Donning (putting on PPE): Illustrations are posted in the office and we are encouraged to go over them until the process becomes 2nd nature to us.

Doffing (taking off PPE): Illustrations are posted in the office and we are encouraged to go over them until the process becomes 2nd nature to us.

Please refer to our own donning and doffing videos that are also posted on the BCDA website and BCAOMS website.

EMERGENCY ORAL SURGICAL PROCEDURES

- Emergency dental treatment includes treatment of oral-facial trauma, significant infection, prolonged bleeding, pain which cannot be managed by over the counter medications, or management of known/high risk malignancy.

Welcome Back to Work – The Covid -19 Fighting Plan.

URGENT ORAL SURGICAL PROCEDURES

- Urgent dental care focuses on the management of conditions that require immediate attention to relieve pain and if left untreated may significantly compromise patient dental health, such as:
 - Severe dental pain from pulpal inflammation.
 - Pericoronitis or third-molar pain.
 - Surgical post-operative osteitis, dry socket dressing changes.
 - Abscess, or localized bacterial infection resulting in localized pain and swelling.
 - Tooth fracture resulting in pain or causing soft tissue trauma.
 - Dental trauma with avulsion/luxation.
 - Dental treatment required prior to critical medical procedures.
 - Suture removal.
 - Pre-surgical clearance for medical procedures.

NON-EMERGENCY ORAL SURGICAL PROCEDURES

Below are examples of non-emergency dental procedures. This list includes, but is not limited to the following:

- Routine consultations for third molar extractions, orthognathic surgery or implant surgery
- Extraction of asymptomatic teeth
- Non-painful chronic periapical lesions
- Ridge augmentation/bone grafting procedures
- Dental implants
- Botox and facial fillers