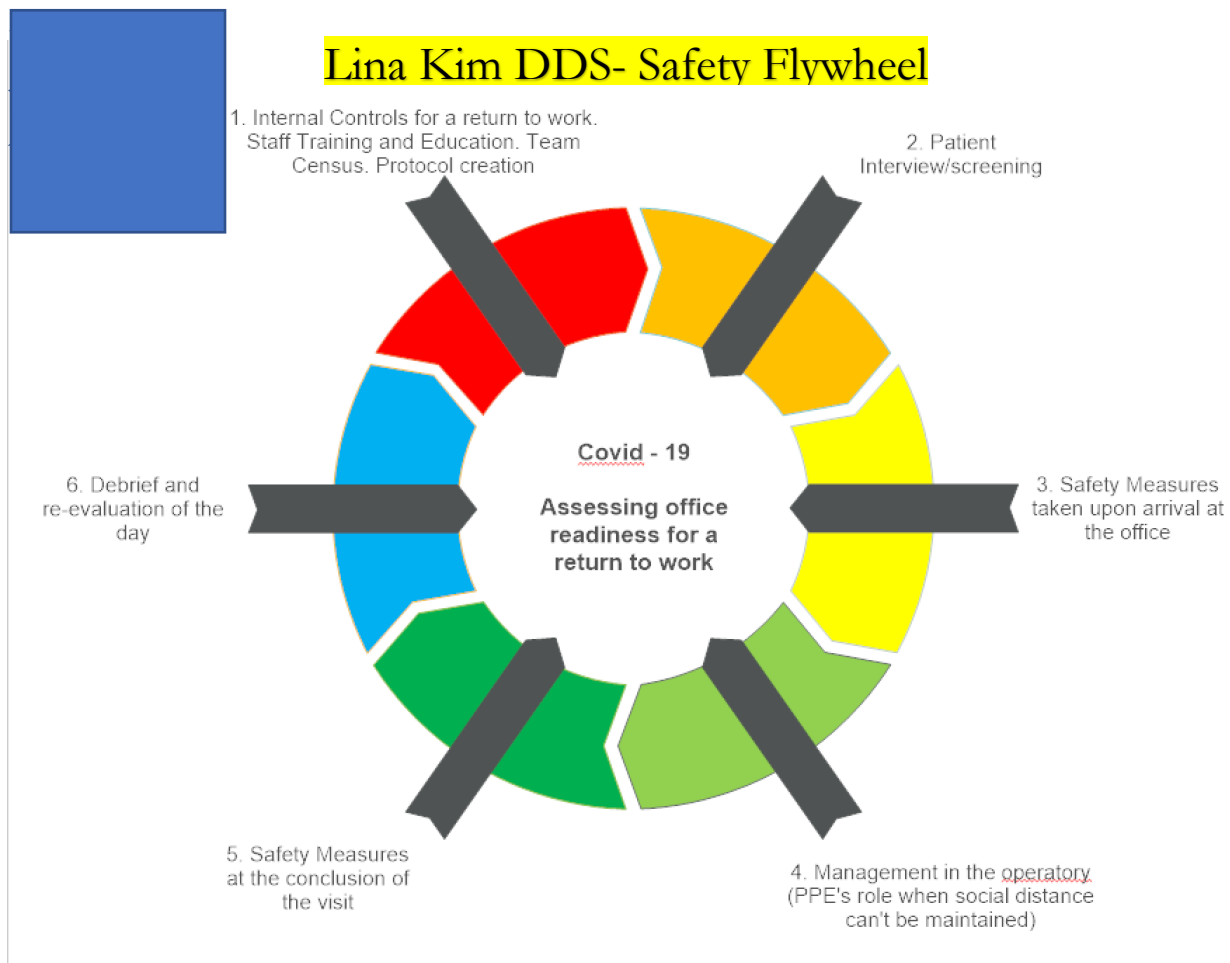


5/01/2020

Dear Team,

As we prepare for a return to work, a six-step approach has been developed to create the safest environment possible for us to treat our patients while we await a vaccine for the SARS CoV-2 virus to be developed and implemented globally. By nature, most medical/dental procedures create risk due to the proximity of the providers and the patients to one another during the physical interaction required for visits. For this reason, a number of steps will take place to ensure the safety of our team and our patients. The safety flywheel below will describe these steps in great detail, so we are able to provide care in a low-risk environment where you have the comfort of knowing that everything that can be done, is being done to protect our patients and our team.



1) Internal Controls in preparation for a return to work.

- a. Team Census
 - i. As we prepare to return to work, will return in phases to meet the needs of our patients. Our goal is to maintain social distancing to the highest degree possible

which will require that a reduced number of office personnel will be in the office at any one time.

- ii. We will have designated Super Hygiene and Super Restorative days to recover the number of patients needed to be rescheduled from March, April, and May. We will open several Mondays and Saturdays in both offices.
- iii. Our initial goal will be to schedule our first month of treatment with the patients that were cancelled as a result of our office closure or those that specified urgency.
- iv. We will introduce remote/virtual consultation when appropriate and applicable for limited exams/emergencies that call into the office.

b. Personal Protective Equipment Use and Availability

- a. Our office has always utilized PPE that exceeds all governmental requirements, however in light of the Covid-19 pandemic we have enhanced these in office PPE requirements as follows.

2. Business Team Personnel will use the following forms of PPE in your interactions.

- a. Plastic shield at front desk
- b. Masks
- c. Gloves when handling documents that will be passed from person to patient
- d. Hand sanitizers and wipes will be readily available.

3. Clinical Personnel (in addition to what is listed above and our normal PPE procedures, will also wear)

- a. Hair bonnet
- b. ASTM level III mask for non-aerosol creating procedure
- c. N95 or equivalent respirator for aerosol creating procedure
- d. Eye protection and Face shield
- e. Shoe covers if shoes cannot be appropriately disinfected

4. Clinical Personnel should bring work clothes in a washable or disposable bag.

- a. Once arriving at work, they should change into their office gear.
- b. Before leaving, clothing worn during the day should be removed and taken home to be laundered immediately using hot water and detergent. Bleach is not necessary.
 - i. Because our gowns have adequate coverage of the legs and all clothing is covered it is okay to self-launder scrubs at home.

5. Business Personnel (those not in treatment operatories) may wear the same clothes to and from the office as long as appropriate PPE is worn during the day.

c. Team Screening and acknowledgement of voluntary presence at work

- i. As team members you will be asked to complete a COVID-19 screening form once per week before returning

to work in our office. To this date, those of you who have been screened on a regular basis have not tested positive for the COVID-19 virus.

d. Staff Training/refreshers

- i. We have always practiced Universal Precautions in the care of our patients
- ii. In addition to this we have and will continue to review the following:
 - 1. Proper handwashing technique (video below)
 - a. <https://www.youtube.com/watch?v=lisgnbMfKvI>
 - 2. Appropriate use of PPE (graphic in link below)
 - a. <https://utswim.files.wordpress.com/2014/10/ppe1.png>
 - 3. Education on how infectious respiratory viruses are spread and why disinfection protocols are so important
 - a. <https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf>
 - 4. Disinfection protocols for high contact points in the circle of care
 - 5. Review of ADA interim guidance on types of masks
 - a. N95
 - b. KN95
 - c. ASTM Level III – surgical mask
 - d. Mask comparison (graphic in link below)
 - e. https://success.ada.org/~media/CPS/Files/COVID/ADA_COVID19_UnderstandingMasks.pdf?_ga=2.177440677.1429947115.1587681999-735327276.1584883172
 - i. Once used N95 or equivalent should be stored, if not visibly soiled in a brown paper bag and can be re-used after three days (virus will perish during that time)
 - ii. Use of an additional ASTM Level III mask worn over the n95 will prevent soilage and prolong life of the n95 masks.
- e. Evaluation of existing protocols
 - i. In addition to our existing protocols each team member will be required to complete the following
 - 1. Complete regular at home temperature monitoring
 - 2. If you are feeling unwell, stay home and report to management
 - 3. Leave unnecessary fashion accessories at home
 - 4. Be trained on proper operation of Air Purifications systems
 - 5. Make sure common areas are free of magazines, coffee stations or other high touch, non-essentials.
 - 6. Make sure all patient treatment and waiting areas are appropriately stocked with tissues and hand sanitizer.
 - 7. Trained in use of infrared thermometers

2. Patient Interview/Screening prior to arriving at our office

- a. All patients prior to receiving an appointment in our office will be asked to complete a detailed COVID-19 treatment consent screening questionnaire.
 - i. It will be meant to inform patients of the risks of having care completed in a dental/medical setting at this time.
 - ii. It will serve to provide consent to be seen at this time.
 - iii. Depending on patients answers to the screening questions, they may be disqualified from treatment at this time.

- iv. We will introduce remote/virtual consultation when appropriate and applicable.

3. Safety Measures taken upon arrival at the office to promote social distancing

- a. Please note completion of the COVID-19 treatment consent form must be completed by the patient and received in order for a patient to have an appointment. No drop-in appointments will be admitted:
- b. Upon arrival patients will be greeted by our business personnel.
 - i. Temperature to be taken. Under 100.1 okay, over stop appointment and we will reschedule.
 - 1. At this time, we will give a Colgate rinse to the patient
 - a. The patient will be asked to rinse with this solution for 20 seconds and also asked to wash their hands at this time.
 - b. If the patient is not wearing a mask of their own, one will be provided to them.
 - i. Ask the patient to keep this mask for the duration of your appointment.
- c. Hand sanitizer will be positioned throughout the office as will appropriate personal hygiene tissues as needed.
- d. The patients companion will be asked to wait outside of the office during the duration of their visit. For those patients 5 and under, we will have one parent with them.
- e. Patient scheduling will be modified to reduce the overlap of patients in the office at any one time.
 - 1. Appointment times will be protracted to allow for appropriate social distancing
 - a. For this reason, it is extremely important you understand we must be on time and patients must be on time.
 - i. Patients should be reminded, please do not be late, and do not be early.
 - ii. We will contact patients if their arrival time needs to be adjusted for any reason.
 - 2. Individuals that are not patients will be asked to remain in their vehicles while their companions' treatment is being completed.
 - 3. In some cases, we may request that patients remain in their vehicle until the office is ready to receive them.
- ii. Please note, the posted signs indicate what appropriate cough etiquette is at this time.

4. Management in the Operatory – PPE's role when social distancing cannot be maintained

- a. Hand Hygiene
 - i. Proper hand hygiene must be completed prior to donning PPE and immediately after removal of PPE
- b. Appropriate PPE for Clinical Personnel
 - i. Disposable gown (or laundered gown)
 - ii. Eye protection

- iii. ASTM Level III or N95 (or equivalent) respirator
 - iv. Shoe coverings
 - v. Hair covering
 - vi. Face Shield
 - vii. Gloves
- c. Appropriate PPE for Business Personnel
 - i. Plastic shield
 - ii. ASTM level III mask as needed
 - iii. Gloves as needed
- d. Appropriate PPE for the Patient
 - 1. In Aerosol producing procedures
 - a. Patient should have a RD placed and Purevac suction used
- e. Appropriate use of HVE and adjunct materials available
 - i. In two handed procedures (child prophies, adult polishing)
 - 1. *Dentsply Sirona HVE Mirror
 - 2. Rubber Dam
 - ii. In four handed procedures
 - 1. Use HVE consistently to capture aerosol created during the procedure
- f. Use of HEPA13 air purifiers in operatories and common areas
 - i. One MA40 unit per lobby area
 - ii. One MA25 unit in hallway
 - 1. Filters changed as recommended every five months

5. Safety Measures following treatment

- a. Following completion of treatment
 - i. Utilize clover payment solution and wipe down after (pre-collect to avoid this step when possible).
 - ii. Ask them to place mask back over the face once final x-rays, intra-oral steps have been completed.
 - iii. Notify companion that patient is ready to depart the office
 - iv. Ensure appropriate post-operative instructions and medications have been provided to the patient
 - v. Complete normal end of visit protocols
 - 1. Chart notes
 - 2. Appropriate image management
 - 3. Completion of correspondence with co-provider office
 - 4. Doctors as per normal should contact and do after visit checks on patients

6. Debrief and Re-evaluation of the day

- a. Evaluate the “flow of the day” and whether appointment templating needs to be modified further.
 - i. Was patient spacing appropriate to allow for appropriate time for office disinfection procedures to be completed appropriately?

1. Did the office seem “crowded” at any point?
 2. Did the front office and back office work hand in hand to minimize patient overlap during the course of the day?
- ii. Discuss patient comments or feedback
- b. Re-evaluate inventory of PPE
- c. Discuss safety protocols again with the team
 - i. Did anyone feel that improvements in protocol need to be made or changed?
 1. Transparency and truth are needed during this discussion.
 - ii. Present solutions if any issues from the day were noted
- d. Celebrate any small victories
 - i. Patient compliment
 - ii. Excellent treatment outcome
 - iii. Daily Goals met