



## COVID-19 OPERATIONAL PLAN FOR DENTISTRY IN NEW BRUNSWICK

### Introduction

The Province of New Brunswick is again in a State of Emergency with respect to COVID-19.

On advice of the Peer Review Committee, in accordance with the Dental Act, in the spirit of best practice in a State of Emergency, the Board of Directors **mandates all members to be bound by this Operational Plan as a regulatory requirement for the practice of dentistry.**

This Operational Plan is informed by current best practices and the best available evidence. Where professional consensus is lacking or the available evidence is unclear, the NBDS' guidance takes a precautionary approach that prioritizes the safety and well-being of patients, staff, the broader public, and dentists.

Contained below are the mandatory regulatory requirements (**must**) and recommended best practices (**should**). **This plan supplements the Infection Prevention and Control Guidelines of the NBDS and is a practice standard until advised differently.**

**NBDS requires each Clinic to maintain a printed copy of this Operational Plan signed by each dentist and staff.**

# NBDS OPERATIONAL PLAN

## **GENERAL REQUIREMENTS**

- **Dentists must thoroughly review and explain the current NBDS Operational Plan, and the Infection Prevention and Control Guidelines with all staff.**
- Dentists **must** confirm posting of signage relating to proper hand hygiene and respiratory hygiene (see links in resources):
  - Hand Washing Poster
  - Hand Sanitizer Poster
  - Mandatory Mask Poster
- Masks **must** be worn in the office.
- Dentists **must** place hand sanitizer at entryway.
- Dentists **should** conduct an inventory of available personal protective equipment (PPE) supplies.
- Dentists **should** remove any other non-essential items from waiting areas and operatories.
- 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.
- Clinics **should** place a transparent barrier at the reception desk to enhance separation between staff and patients during transactions.
- 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.

## **GENERAL STAFF REQUIREMENTS**

- Staff **must** self-monitor for COVID-19 symptoms before reporting to work each day (**See: Appendix A**).
- Staff **must** be pre-screened at the beginning of each shift (**See: Appendix A**).
- Staff **must** not wear scrubs to/from work.
- Staff **must** follow prescribed sequence re: donning and removing PPE (educational video available on the NBDS website, **Appendix B**).
- Breaks **should** be staggered to respect physical distancing requirements.
- Staff **should** disinfect parcel deliveries and surfaces they contact.

### **PRE-SCREENING AND SCHEDULING**

- Clinics **should** interview patients prior to appointment re: Exhibiting COVID-19 symptoms *and risk factors* (**See: Appendix A**)
- Clinics **must** confirm that patients have answered all questions in **Appendix A** prior to entering the clinic.
- 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.
- Appointments **should** be scheduled with sufficient time between appointments to minimize the potential for contact with other patients.
- Vulnerable patients **should** be scheduled at the beginning of the day.

### **PATIENT ARRIVAL PROTOCOL**

- Patients **should** be advised to contact the clinic and wait for screening and entry instructions.
- If screening reveals signs or symptoms of Covid-19, **unless it is a dental emergency**, the appointment **must** be deferred for a minimum of 14 days, and the patient **must** be advised to call Tele-Care 811 or call their primary healthcare provider.
- Patients **must** attend their appointments alone unless circumstances require assistance (e.g. child) at which point one other guest may attend.
- Accompanying guests **must** be screened in the same manner as patients.
- All persons **must** be wearing a mask upon entering the clinic / or **must** be provided a mask upon entry.
- All persons **must** sanitize/wash hands immediately upon entering the clinic.
- Staff **should** accompany patient throughout the clinic to minimize touching of surfaces.

## 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 FOR NON-AEROSOL GENERATING PROCEDURES**

- Surgical masks, eye protection and/or face shield, gloves **must** be worn.
- Patients **should** rinse with an antiseptic mouthwash, as prescribed.
- Use of air/water syringe **should** be minimized.

### **GENERAL PRECAUTIONS FOR AEROSOL GENERATING PROCEDURES**

Aerosols are produced by the use of high speed handpieces, ultrasonic and sonic scaler, air polishing, air-water syringe, and air abrasion.

- Eye protection and face shield and gloves **must** be worn for all AGP.
- Fit-tested N95 or equivalent respirator as per Appendix D, **or** ASTM level 3 or 2 surgical masks **must** be worn.
- Lab coats or gowns and head bonnets **should** be worn.
- High-volume evacuators **must** be utilized.
- Patients **should** rinse with an antiseptic mouthwash, as prescribed.
- Dental dams **should** be used where possible.
- Use of air/water syringe **should** be minimized.
- Four-handed dentistry **should** be used where possible.

### **PATIENTS WHO SCREEN POSITIVE**

Patients who have screened positive **should** be rescheduled. If the appointment cannot be deferred, treatment **should** be conducted in an enclosed treatment room with floor to ceiling walls or barriers and a door. If not possible, these patients **must** be scheduled at the end of the day or when other patients and non-essential staff are not present in the defined treatment area. Follow times **should** be respected based on the air changes per hour for your office setting.

## **PATIENTS WHO TEST POSITIVE**

For patients who are positive for COVID-19, in-person treatment **must** be deferred unless it is a life-threatening emergency. Patient assessment **must** take place remotely as a first line of care. Dentists are responsible for patient's dental care plan. (e.g. Prescription medication; referral to specialist; treatment within a hospital setting or treatment within your offices adhering to the same infection control guidelines and using enhanced PPE as outlined in the "Patients Who Screen Positive" section.)

In addition to general precautions listed above, a fit tested N95 respirator (or equivalent as per Appendix D), gowns, head bonnets, face shield and eye protection, gloves **must** be worn.

## **Public Health Identified Zones of moderate to high rates of community transmission**

Where Public Health has identified a community as a moderate to high risk transmission area, detailed screening will dictate which of the required protocols must be followed. However, a fit-tested N95 respirator (or equivalent as per Appendix D), gowns, head bonnets, face shield and eye protection, gloves are strongly recommended for all patients in this zone.

## **CLEARING THE AIR – FALLOW TIME**

- 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 C** – Standard Reference "air changes per hour" CDC).

## **PATIENT DISMISSAL**

- Patients **must** put their mask back on.
- Patients and guests **must** sanitize/wash hands immediately before exiting the operatories and clinic.
- Patients **should** make payments using debit or credit cards.

## **SANITIZATION**

- Appoint a staff person responsible for Infection Control.
- 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, and clean floors.
- Discard all disposable 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

**Patients** should defer treatment and seek a COVID-19 test through the Department of Health **if they've had a close contact with a person who tested positive for COVID-19 or if they have any of the following symptoms:**

- fever above 38 degrees Celsius
- new cough or worsening chronic cough
- difficulty breathing
- runny nose
- sore throat
- new onset fatigue
- new onset of muscle pain
- diarrhea
- loss of taste or smell
- in children purple markings on the fingers and toes

**Source:** [PosterCL.pdf \(gnb.ca\)](#)

Public Health will continue to give advice regarding protocols for those infected and close contacts. **Members and their staff are advised to follow the advice of Public Health.**

When screening staff, anyone with **two or more** symptoms who is **not** fully vaccinated should isolate while awaiting test results. Book the test [online](#) or by calling 811.

### **If you are fully vaccinated (2 doses) for COVID-19:**

- If any COVID-19 symptoms develop you should book a test.
- You do not need to isolate while waiting for your test results, unless you are a close contact of a positive case.
- Continue to follow all Public Health advice, including wearing a mask, washing hands frequently, and maintaining physical distancing in public settings.
- If you have been advised by Public Health to isolate, you must do so regardless of vaccination status.

*\*Revised Nov. 15, 2021*

## Appendix B

### **Donning & Doffing of PPE**

#### **Donning of PPE:**

If at any time you feel you have made an error, please use hand hygiene techniques and wash any 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 C**

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 <sup>+</sup>	46	69
8	35	52
10 <sup>+</sup>	28	41
12 <sup>+</sup>	23	35
15 <sup>+</sup>	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 D

### 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

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

Strategies for Optimizing the Supply of N95 Respirators

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

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## References:

### Mandatory signage:

**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>

### PNB Information on Mandatory Masks and Poster

<https://www2.gnb.ca/content/gnb/en/corporate/promo/covid-19/guidance.html#4>

### Other resources:

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

**WorkSafeNB Guidelines** <https://www.worksafenb.ca/media/61014/covid-19-operational-plan-for-workplaces-template.pdf>

**Self-Monitor / Isolation** [https://www2.gnb.ca/content/gnb/en/corporate/promo/covid-19/self\\_isolation.html](https://www2.gnb.ca/content/gnb/en/corporate/promo/covid-19/self_isolation.html)

**Living With COVID-19** <https://www2.gnb.ca/content/dam/gnb/Departments/eco-bce/Promo/covid-19/guide-living-with-covid-19.pdf>.

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