

## **Checklist for Re-Opening**

As oral health care professionals, it is important to prepare for a new “future” in dentistry. The proper time to reopen a dental practice involves many factors including government and community guidance.

In all circumstances the dental practice must take appropriate safety precautions, follow all IPAC best practices for pandemic situations, and utilize appropriate PPE for each situation.

Dental teams need to focus on learning how to start treating patients in the new era of COVID-19. This way dental practice protocols and procedures can help protect everyone.

In all cases, dental professionals must adhere to the standards of care and “strong recommendations” of provincial regulatory authorities.

As we phase back to a new normal and you are thinking of getting your dental practice back up and running, please consider the following.

### **1. Preparing for Office Opening**

#### **Phase One - Present Day**

##### **Dental Team Considerations for return to work**

- ☐ Purchase non-contact thermometer
- ☐ Provide office specific IPAC training
- ☐ Ensure understanding of [proper donning/doffing](#)
- ☐ Complete fit testing for N95 masks (N95s will not form a seal around facial hair)
- ☐ PPE inventory assessment
- ☐ Place ABHR and handwashing signs in appropriate areas
- ☐ Consider remote conferencing for team meetings such as morning huddles -
- ☐ Consider vaccinations/immunization status

##### **NOTE FOR PERSON IN CHARGE OF OPERATIONS & HR:**

- Level of risk depends on the significance of the outbreak around the practice location.
- As a result of self-monitoring and self-isolation as a result of fever/symptoms, etc. availability of staff may be fluid.
- It will be extremely important to emphasize that team members **MUST** stay home when presenting with symptoms of COVID19
- In areas where COVID19 is actively spreading, team members who live in close contact with persons who have symptoms should also self-isolate

#### **Policies**

- ☐ Each practice must develop criteria for scheduling appointments
  - Stagger start and end times for procedures
  - Allow time after appointments for AGDPs where operatories are unutilized
  - Follow provincial regulatory guidance

- ☐ Develop workflows for common procedures to avoid having to leave the operatory during treatment
  - Which instruments are required
  - Is the procedure an AGDP
  - What PPE that will be used,
  - Will any barriers be needed
- ☐ Prepare policy for receiving packages/deliveries
  - Have all packages delivered to a designated area
  - Person receiving the package should wear gloves, a mask, and perform hand hygiene before donning and after doffing PPE
  - Packages should be disinfected

### Waiting Area and Reception

- ☐ Chairs/furniture should be wipeable and placed six feet apart to accommodate social distancing
- ☐ Remove non-essential items (rugs, toys, displays, brochures, magazines, plants, models)
- ☐ Implement environmental cleaning logs
- ☐ Install text answering for appointment scheduling
- ☐ Ensure risk assessment signage is displayed (“STOP sign for symptoms of flu or COVID19”)

### Operatories

- ☐ Remove non-essential items (brochures, magazines, teaching aids, displays, office supplies)
- ☐ Ensure counters are wiped down and clear of clutter
- ☐ Cleaning of drawers, windows, blinds, counters
- ☐ Do not bring paper charts into the operatory
- ☐ Be extra careful to cover any non-removable items with barriers
- ☐ When possible, AGDPs to be performed in an operatory with floor-to-ceiling walls and a door
  - Always follow provincial regulatory guidelines

### Reprocessing Area

- ☐ Ensure one-way flow, as per IPAC best practices
- ☐ Implement cleaning log
- ☐ Wall mounted ABHR should be placed at entry and exit of steri-centre
- ☐ Having a designated steri-tech is advised clinicians will have longer donning and doffing and operatory decontamination routines leaving less time to reprocess instruments

### Staff Rooms

- ☐ Ensure social distancing in staff room (consider furniture placement)
- ☐ Stagger lunch breaks
- ☐ Provide change rooms
- ☐ Provide lockers (locked)

### Laundry

- ☐ Personalize/label all scrubs and lab coats
- ☐ If laundry can be done in practice:

- Scrubs should stay in the practice and not be taken home by the staff
- Appropriate PPE for laundering garments should include: Gloves, disposable apron
- Laundry should be completed by designated person and not by clinical staff between patients
- ☐ Consider protocol for laundry (consider a laundry service)
  - Scrubs and lab coats should be laundered separately from towels
  - Designated drop off area for used laundry
  - The load should not exceed HALF of the machine capacity
  - Scrubs and lab coats should be washed with the maximum temperature tolerated by the fabric

### Storage

- ☐ Ensure adequate closed storage of materials/stock
- ☐ Ensure contained disposal storage for contaminated items

### General Office

- ☐ Thoroughly clean and de-clutter all areas of the office
- ☐ Remove expired products

## **Phase Two - 7-14 days prior to Opening**

### Waterlines

- ☐ Run all water lines for 5 minutes
- ☐ Follow MIFU regarding waterline testing; pending results, cleaning and shocking waterlines may be needed

### Mechanical room

- ☐ Turn on nitrous units and O2 tanks, including shut-off valves on all tanks
- ☐ Confirm that vacuum is powered on, and electricity is supplied to vacuum system
- ☐ Turn on power to air compressor
- ☐ If you have a dryvac, refer to manual for instructions
  - If you prefer to have a technician on site, please arrange
- ☐ For wet vacs turn on water supply

### Operatory

- ☐ If office is not equipped with main master water shutoff valve, turn on water valves by hand at foot of chairs
- ☐ Turn on all power to dental units
- ☐ Turn on waterlines to the piezo or cavitron if connected to the unit
- ☐ Always listen for any air and vacuum leaks
- ☐ Run water through suction lines to ensure any dust or micro-debris is flushed through

### **Phase Three - 1-3 days prior to Opening**

#### **Sterilization**

- ☐ Fill all sterilizer water reservoirs
- ☐ Plug in all sterilizers
- ☐ Hydrim – Follow MIFU for start-up procedures
- ☐ Water purification systems – Follow MIFU for start-up
- ☐ Wipe down internal cavity of the autoclave with a dry cloth to remove any excess water left behind from draining

#### **Lab Areas**

- ☐ Turn on the sink at plaster trap for 2-3 minutes, as well as the model trimmer
- ☐ Run eyewash station as per MIFU

### **Phase Four - Day of Opening**

#### **Operatory**

- ☐ Lower chairs and place foot pedals on floor
- ☐ Turn on any links to nitrous and oxygen
- ☐ Dust all computers in operatories and throughout clinic to ensure dust does not clog the fan inside computer
- ☐ Ensure counters are wiped down and clear of clutter
- ☐ Ensure operatories are disinfected
- ☐ Ensure all operatory drawers are cleaned

#### **Sterilization**

- ☐ Perform Bowie Dick test if applicable
- ☐ Perform biological indicator test with first load of the day in each sterilizer; each type of cycle
- ☐ Ultrasonic – Wipe with disinfectant, fill with solution
- ☐ Fill water distillers and plug in

#### **Technology**

- ☐ Check router and computer equipment to ensure everything works appropriately

#### **Imaging**

- ☐ Turn on all x-rays units
- ☐ Turn on processors if used and fill with appropriate solutions
- ☐ Take radiographic step wedge test for all units
- ☐ Start logging of x-rays

#### **CAD/CAM, CEREC MILL**

- Start up as per MIFU

## 2. Preparing for Patient Care

### Pre-Screening and Appointment Scheduling

#### Initial telephone conversation

- ☐ Teledentistry
  - Should be used to triage and manage patients
  - Incorporate when required to minimize unnecessary patient visits
- ☐ Communicate to patients the difference in the dental environment and patient care
  - Changes to PPE requirements
  - Safety policies put in place
  - New mandatory protocols
- ☐ Review patient chart for treatment plan and radiographic prescription and schedule accordingly
- ☐ Document
  - all answers to COVID19 screening questions
  - patient's chief complaint
- ☐ Book date/time of appointment
  - Appointments should be scheduled with social distancing in mind
  - Leave appropriate time between appointments to accommodate environmental cleaning
  - Consider donning and doffing times
  - Following an aerosol-generating procedure, cleaning and disinfection of the operatory must be delayed to allow settling of the aerosol (refer to current provincial guidance)
- ☐ Gather financial information for treatment (insurance, type of payment)
  - Limit patient to staff interactions in the clinic—taking payment over the phone if possible
  - Limit cash payments if possible—decontaminate cash when accepted

### Preparing for Patient Arrival

- ☐ Plan for dental team members in the practice
  - Limit to only staff members required for care
  - Temperature to be taken morning of work-day (e.g. non-contact thermometer)
  - Team members to sign consent form or take oath indicating that they are not experiencing any Covid related symptoms
  - Remove facial hair if applicable for mask use
- ☐ Arrange for greeter at entrance
- ☐ Administrative staff to wear appropriate PPE
- ☐ Advise patient to remain outside the practice (e.g. in car) until notified
- ☐ Advise patient that only they may enter office for appointment
  - Spouses, friends, caregivers and parents need to wait outside. They can assist patient to the front door and hand off to greeter if required
- ☐ Select suitable operatory
  - Preferably with closed door and adequately ventilated

- If AGDPs are performed, adjacent open concept operatories should not be used simultaneously
- ☐ Prepare the operatory for procedure
  - Take all steps required to avoid having to leave and return to the operatory during the procedure (consider radiographs)
  - Place barriers on any non-smooth and high-touch surfaces
- ☐ Post safety cleaning schedule and [signage](#) for i.e., (“AGDP in progress”, and “120 minutes until safe to decontaminate”)
- ☐ Don full PPE in operatory where the procedure will be taking place (gloves, protective eyewear, face shield, gown, fitted N95 Mask, optional: hair and foot covers).
  - See [donning and doffing resource](#)

### Patient Arrival

- ☐ Contact patient when clear to enter office
- ☐ Observe all physical distancing measures
  - Maintain 2 metres (six feet) distance
  - NO SHAKING HANDS
- ☐ Where possible greeter should meet patient at entrance
- ☐ Upon entering the office, have the patient put on boot covers, don a mask, and perform hand hygiene with ABHR
- ☐ Greeter to take patients temperature (non-contact thermometer) and if cleared they can be escorted directly to the treatment area
- ☐ Minimize patient contact with surfaces, including door handles, counters etc.

### 3. Treatment

*Whenever an aerosol procedure is provided, dental care should be provided using enhanced precautions (i.e. N95 mask – or NIOSH approved respirator (fitted), gloves, eye protection, face shield and protective gown). If unable to procure N95s, use best PPE available. **Always follow local regulatory guidelines.***

- ☐ Review medical history
  - Patient should complete forms at home to minimize time in the office
  - If paper copy, place a barrier on pen and clip board, and after patient is done remove barrier, discard it and disinfect the pen and clipboard
- ☐ Review material information about procedure(s) and have patient verbally agree to informed consent forms
  - These should be provided to the patient and signed prior to arrival
  - If sedation will be provided, ensure adherence to standard of care
- ☐ Paper charts should not be brought into the operatory during an AGMP
- ☐ Take vitals including blood pressure, pulse and respirations per minute
- ☐ Have patient doff mask and rinse with 1% hydrogen peroxide for 30-60 seconds
- ☐ Use of extraoral imaging preferred over intraoral
- ☐ Open pouches/cassettes of sterile instrumentation for procedure
  - Ensure BI/CI pass and document in the patient’s chart
- ☐ Complete procedure maintaining appropriate PPE and aerosol reduction

- Be sure not to touch your face, mask, glasses, etc. during the procedure
- Ensure PPE in operatory is not exposed to aerosols in environment
- Consider 4 handed dentistry for dental hygiene appointments
- Avoid the use of ultrasonic instruments, high-speed handpieces, and air/water syringes whenever alternatives are available
- Restorative treatment performed with rubber dam adding additional protection to the dental provider
- Disposable and single-use instruments and devices should be used whenever possible to reduce the cross-infection risks
- High Volume Suction should be functioning during all treatment when aerosols are being generated
- Consider external aerosol evacuator
- For handpieces, piezos/cavitrons, the amount of water should be reduced as much as possible while still having a coolant effect
- Operatory doors, where they exist, should be closed during treatment
- Once in the operatory do not step out until treatment is finished.
  - If absolutely necessary to do so, PPE should be doffed before stepping out
- ☐ Provide PPE disposal/collection areas
  - taking into consideration increased amounts of waste

#### **4. Dismissing Patient**

- ☐ The patient should wait in the dental operatory until safe dismissal is possible
- ☐ Discuss financial arrangements and process appropriately
  - Ideally this can be done without the patient having to handle any equipment
  - Consider requesting the patient's payment information over the phone, adhering to privacy regulations (PCIDSS)
- ☐ If patient was escorted to appointment, contact escort to let them know treatment is completed and to meet the patient at the exit door
- ☐ Once confirmation received, provide ABHR and allow patient to leave treatment area and exit practice directly

#### **Post-Procedural Cleaning and Disinfection:**

- ☐ Following an AGDP, cleaning and disinfection must be delayed to allow aerosol settling
  - Refer to current provincial guidance regarding timing
- ☐ Remove barriers and soiled sundries and place in covered waste in the operatory
- ☐ Remove gross soil from all instruments using a wet gauze (not alcohol-based wipe)
- ☐ Clean and disinfect all surfaces including floor and allow the appropriate kill time dependant on the disinfectant you are using
- ☐ Doff PPE excluding N95 mask (gloves, gown, protective eyewear, face shield)
  - Doff PPE in a dedicated area within the operatory
- ☐ Don appropriate PPE (gloves, protective eyewear)
- ☐ Transport instruments to reprocessing area in a covered container

#### **Reprocessing of Instruments**

- ☐ Use N95 (if available) when creating aerosols in steri-area
  - Especially if treating patients with COVID19 risk symptoms
- ☐ Consider presoaking instruments in H2O2 solution prior to placing in ultrasonic

#### **Environmental Cleaning of Waiting area**

- ☐ Increase frequency of standard environmental cleaning
  - Use log of cleaning for accountability
- ☐ After the patient is dismissed, proceed with environmental cleaning protocols
- ☐ Wipe down the front desk area including:
  - Pens
  - Doorknobs
  - Counters
  - Chairs
  - Computer keyboards etc.
- ☐ Disinfect all touch surfaces close to patient exit path

#### **5. Post-Treatment Screening**

- ☐ Contact patients 48-72 hours after providing care
  - Follow-up regarding the treatment provided
  - Ask them if they are demonstrating any new symptoms of Covid-19
- ☐ Document all communication in patient record

#### **6. End of Day: Dental Team Procedures**

- ☐ Do not leave office in scrubs or clinical attire
- ☐ Bring a change of clothing to change into and properly store garments (scrubs) in plastic bag so you can wash when you return home (unless using a laundry service)
- ☐ Use ABHR before leaving the practice