



# NOVEL CORONAVIRUS (COVID-19, A.K.A. 2019-NCOV) GUIDANCE FOR DENTISTS IN A COMMUNITY-BASED SETTING

## Dentists in a community dental practice should:

### PREPARE

**Follow** [routine practices and additional precautions](#), including contact and droplet precautions.

**Assess** whether your practice has the capacity to safely conduct a clinical dental examination, in a true emergency situation\*, for patients at risk of having COVID-19. Capacity requirements include access to and ability to safely use N95 masks, face shields, gowns and gloves, as well as having an appropriate isolation room and cleaning procedures in place.

**Implement** a process to screen patients, flag suspected cases and refer them to your [local Public Health Unit](#) to determine next steps.

### SCREEN

#### Screen Patients

- By phone (whenever possible)
- At the door (via signage)
- At reception

### ASSESS

**Assess** the patient to determine if they meet the definition of a [“Probable Case of COVID-19”](#).

### REPORT

**Report** all suspected cases to your [local Public Health Unit](#) and determine next steps.

\* In dentistry, a “true emergency situation” includes trauma, significant infection, prolonged bleeding or pain which cannot be managed by over-the-counter medications.

# How to respond to COVID-19 in a community-based dental practice:

## 1. If a patient screens positive by phone:

- Take a detailed history by phone.
- Determine if the patient meets the definition of a [“Probable Case of COVID-19”](#).
- If the patient reports a true emergency\*, determine the nature of the emergency and consider whether your practice has the capacity to safely conduct a clinical dental examination (see steps outlined below for option 2b).
- **REPORT:** If the patient is a PUI, call your [local public health unit](#) to report the case and determine next steps.

## 2. If a patient screens positive at the office:

- a) If the patient presents without an emergency:
  - **ISOLATE:** Mask the patient and isolate them in a room with a closed door upon arrival.
  - **ASSESS:** Maintain contact/droplet precautions and a 2-metre distance from the patient. Take a detailed history and conduct a visual assessment to determine if the patient meets the definition of [“Probable Case of COVID-19”](#).
  - **REPORT:** If the patient is a PUI, contact your [local Public Health Unit](#) to report the case and determine next steps.
- b) If the patient presents with a true emergency\*:
  - **ISOLATE:** Mask the patient and isolate them in a room with a closed door upon arrival.
  - **ASSESS:**
    - o If your practice has safety precautions in place to manage COVID-19, including access to and ability to safely use N95 masks, face shields, gowns and gloves, take a detailed history and conduct a visual assessment to determine if the patient meets the definition of [“Probable Case of COVID-19”](#). If necessary, conduct a limited clinical dental examination to determine the nature of the emergency and provide limited care. **DO NOT PERFORM ANY PROCEDURES THAT MAY GENERATE AN AEROSOL.**
    - o If your practice does not have safety precautions in place to manage COVID-19, maintain contact/droplet precautions and a 2-metre distance from the patient. Take a detailed history and conduct a visual assessment to determine if the patient meets the definition of [“Probable Case of COVID-19”](#).
  - **REPORT:** If the patient is a PUI, contact your [local Public Health Unit](#) to report the case and determine next steps.

## 3. If a patient is asymptomatic, but reports a positive travel history:

- An asymptomatic patient with a travel history to an affected area in the past 14 days, and with concerns about possible exposure to COVID-19 cases, should be advised to contact their [local Public Health Unit](#) for further direction.
- An asymptomatic patient with a travel history to an affected area in the past 14 days, but with no known exposure to COVID-19 cases, may be treated like any other patient. If there is no emergency, the patient may be asked if they wish to reschedule their appointment to a date beyond the 14-day period. As part of this conversation, the patient may be asked to contact their [local Public Health Unit](#) for advice.

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**Questions?** Contact the Practice Advisory Service at [practiceadvisory@rcdso.org](mailto:practiceadvisory@rcdso.org) or 416-934-5614.