



Additional Guidance for Preventing Spread of COVID-19 for the Oral Health Community and Dental Practices Vol.3 (subject to change) – Mandated Closure to Routine Dental Care

Purpose

This guidance provides updated recommendations from the Illinois Department of Public Health to the oral health community and providers in response to the rapid spread of COVID-19 in Illinois. These recommendations will safeguard healthcare providers and the public while limiting the use of personal protective equipment (PPE).

Information

Cases of COVID-19 are increasing across Illinois. It is a critical time for Illinois oral health providers to make every effort to protect the health and wellbeing of the Illinois population, including healthcare workers, and to support measures that guard and limit the spread of this virus. Oral health providers are at an increased risk of acquiring SARS CoV-2 because they work closely with patients and are exposed to aerosols, saliva, and other potentially infectious materials during procedures.

State and federal officials have recommended that oral health practices should only treat patients with emergency and urgent dental care needs. This guidance is supported by scientific facts and statements made by several experts, including the U.S. Centers for Disease Control and Prevention and Centers for Medicare and Medicaid Services. However, some dental practices continue to provide routine services, putting their staff, patients and the community in danger to SARS CoV-2 infection.

Required Action

1. Dental offices should cease routine dental care immediately. The provision of routine dental care frequently involves the use of aerosol-creating equipment such as high-speed handpiece, ultrasonic and sonic scalers, and air/water syringes. Aerosols and droplets are thought to be transmission vehicles for SARS CoV-2.
2. Dental offices should limit dental services to emergency and urgent care until further notice. Offices should remain open to the extent necessary to triage and provide care to patients facing emergency and urgent oral health care issues. Oral health providers should use their professional judgment to determine a patient's need for emergency

and urgent treatment on a case-by-case basis. Providers should consult guidance provided by the American Dental Association.¹ Providing this limited oral health care will limit unnecessary exposure due to population mobility and limited availability of PPE and will divert people seeking dental care in hospitals to dental offices.

3. For the safety of all concerned, emergency and urgent care should be provided without the use of aerosol-creating equipment such as high-speed handpiece, ultrasonic and sonic scalers, and air/water syringes. Prescribing antibiotics, analgesics, over the counter medications, providing atraumatic restorative treatment with the use of hand instruments only or the use of silver diamine fluoride until definitive care is available should be carefully considered.
4. Providers should refer patients to a properly-equipped facility that can follow CDC's guidelines and take precautions when performing aerosol-generating procedures².

Reference

1. https://success.ada.org/~media/CPS/Files/Open%20Files/ADA_COVID19_Dental_Emergency_DDS.pdf?_ga=2.250269573.2003345993.1584634508-1239058311.1502377212
2. https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html