



Staying Safe in the Dental Practice: PPE During COVID-19

The latest recommendations, supply chain considerations, and discussions regarding who should pay for the additional cost.

People all over the country are asking the same question: Is it safe to see patients?

This guide is a quick look at some of the precautions that dental practices are taking. Discover how private practices and DSOs are changing their safety protocols, effectively communicating the changes to patients, overcoming PPE shortages, determining PPE costs, and navigating “the new normal.”



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Answering the Question: **Is it Safe to See Patients?**

It's hard to believe how much has changed in just a short amount of time. In early March, we could still pop into the store on the way home from work, hang out with friends, greet people with a handshake or a hug, and take comfort in knowing exactly what we needed to do to take care of our patients.

COVID-19 changed just about everything.

Now many team members are asking, "Is it safe to see patients?"

“*Yes, I think it's safe to see patients today, provided we have the proper PPE and that we don't rush back to practice,” said Linda Harvey, RDH, MS.*

Linda is a licensed Healthcare Risk Manager, author, and well-known regulatory compliance expert with 30 years of experience in providing quality assurance / patient safety perspectives for dental healthcare professionals and state licensing boards.

“*We're all eager to get back to taking care of our patients and being with our team members. We just have to take it slow and steady, take the time to prepare to have the office ready, and make sure everyone knows what is going to happen.”*

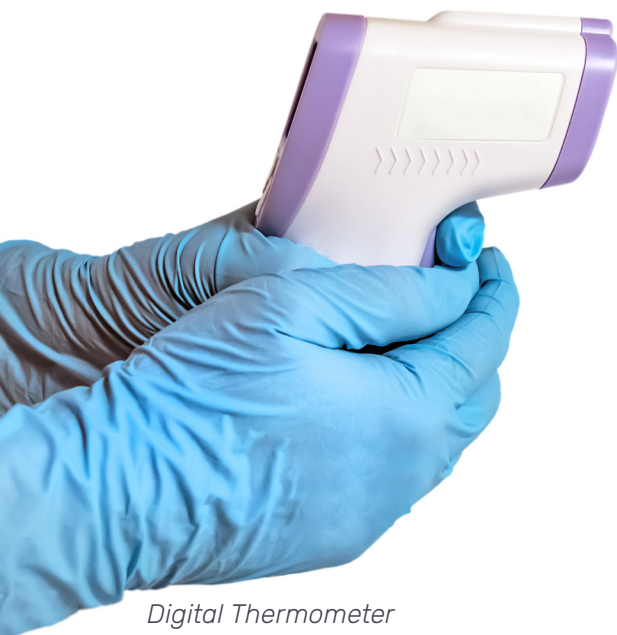
What Will be Different

This guide is a quick look at some of the changes that private practices and dental support groups are implementing to give you and your team some ideas. Each practice is different, so some of these ideas you may love and others you may choose to disregard. The important thing is to make sure your team is following the CDC, OSHA and ADA guidelines for patient safety, risk management, and regulatory compliance. There is a list of resources with links to those websites at the bottom of this guide.

Preparing Your Patients and Team Members for Changes

Success depends on effective communication. Dental practices are implementing a lot of changes to keep their team members and their patients safe. These may include:

- Pre-screening phone calls to confirm the patients' health
- Online patient health questionnaires so they don't have to fill out paperwork on-site
- Teledentistry consultations to gain advance knowledge of the patients' concerns and reduce the amount of time in the office
- Teledentistry post-op calls instead of return visits
- Asking all team members and patients to wear face coverings
- Limiting who can accompany the patient into the practice
- Asking patients to remain in their cars until they can be seen
- Explaining physical distancing measures that have been implemented
- Extending business hours for patients who may not be able to miss any more work
- Removing beverage stations, magazines, and other community property from the waiting room
- Adding hand sanitizer stations in patient-facing areas
- Temperature checks for both team members and patients
- Enhanced Personal Protective Equipment (PPE) for team members
- Disinfecting common areas and doorknobs
- Creating a list of answers for safety-related questions that patients may have



Digital Thermometer

Dentists and teams are making a lot of decisions right now. Processes will need to be tweaked and re-evaluated as everyone learns what works.

The key is to have open communication with each other, and to let the patient know what to expect every step of the way.

A lot of this will require a new playbook for your team members, so the first step might be to assign somebody on your team to be the point person for that.

Patient Pre-Screening Phone Call

Many dental practices use automated text messages, emails, and voice recordings to confirm dental appointments. Now, the CDC recommends talking to patients prior to their arrival to confirm they have not been sick or in contact with anyone who has been sick.

The CDC recommends asking patients if they have been exposed to COVID-19 or have exhibited a fever, cough, sore throat, shortness of breath, or have lost their sense of taste or smell. Many healthcare professionals are also asking patients if they have been in contact with anyone with those symptoms or have traveled out of state in the past three weeks.

The answers should be recorded in the patient file and accessible by team members.

Face Coverings

The CDC now recommends requiring all dental healthcare personnel (DHCP), patients, and anyone else entering the practice to wear a face mask or cloth face covering regardless of whether they have COVID-19 symptoms.

Asking Patients to Wear Masks

“I know you’re used to seeing the dentist and hygienist wearing a mask. Now the CDC has asked that everyone who comes into the practice to wear a mask, including our patients. Do you have a mask that you can wear? It can be either homemade or store-bought.”

Types of Masks

The ADA has issued Interim Mask and Face Shield Guidelines, which can be found at [ADA.org/virus](https://www.ada.org/virus). The guidelines include use limitations.

The ADA recommends that masks be worn in addition to goggles or face shields to reduce the risk of exposure to infection.

N95 and KN95 respirators: A respirator is a personal protective device that covers at least the nose and mouth and is used to reduce the wearer’s risk of inhaling hazardous airborne particles, gases, or vapors. The N95 masks are fitted to the wearer’s face to provide a snug fit.

Surgical masks: An FDA-approved surgical face mask is a type of PPE that is fluid-resistant and is designed to protect against spatter and spray.

Cloth masks: The CDC website states that non-clinical personnel can wear a cloth facemask and that clinical team members may wear a cloth face covering when they are not actively caring for patients. Cloth masks are not PPE and are intended to keep the wearer from spreading particles when talking, sneezing or coughing.



Changes in PPE Gear

Dentists and team members already know how to reduce the risk of infection and clinical team members are comfortable with wearing personal protective equipment according to the Standard Precautions. (In 1996, the CDC expanded Universal Precautions to Standard Precautions.)

But even veteran team members may not have had to don face shields, scrub caps, disposable isolation gowns, and shoe coverings before. In the past, doctors may not have worn their lab jackets because they were too hot or team members may have worn masks incorrectly, such as below their nose. With COVID-19, everyone will need to be more diligent than ever in conforming with safety regulations.

And people who may never had to wear PPE before might be wearing at least masks and gloves now. The team members who perform temperature checks on patients will also need protective outerwear and a face shield.

The CDC has step-by-step directions and a video on how to don and remove PPE: www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html

Ordering PPE

As many dental practices have already discovered, the supply chain is broken.

“Demand far outweighs supply right now,” said Scott Drucker, DMD, a periodontist and founder of Supply Clinic, an online distributor of PPE and other healthcare supplies. “Every government, hospital system, and private practice in the world is vying to acquire and stockpile PPE.”

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Now many companies and restaurants that are reopening are also ordering gloves and masks for their workers.



Plus, manufacturing plants and distribution warehouses are working with skeleton crews because of employee illness and social distancing measures. They've added overnight shifts and made other changes, but it's still not enough to keep up with the global demand.

As a result, the shortage has driven prices up about 400% for many products. **A box of 100 nitrile gloves used to cost about \$5 to \$6. Now that same box might cost \$15 to \$25.**

Many manufacturers and distributors are limiting the number of cases you can order at one time.

“ *I'm telling all my customers to order from multiple distributors so they can get the quantity that they need,” said Dr. Drucker.*

Delivery services like UPS and FedEx have changed their processes, too. Many are only attempting delivery once, instead of three attempts like they would make pre-COVID. If the practice is closed and there is no one available to sign for the delivery, it will be sent back to the warehouse.

“My advice is to have the cases delivered to a residential address where you know somebody will be available to sign for them,” said Dr. Drucker. “You don’t want anything to delay that shipment getting to you.”

PPE Costs: Should Patients Pay Extra?

This is a hot topic in dentistry right now. On April 23, 2020, the ADA urged third-party payers to alter their fees to account for the increasing cost of personal protective equipment for dentists.

The ADA statement advised dentists to develop a standard office policy to document the additional PPE that will be used across all patients or to add a note in the patient’s record to document the details of PPE uniquely necessary for the visit, and charge out using D1999.



"If you're in-network, this would be a code that carriers would normally disallow, which means you can't charge the patient either," said Teresa Duncan, one of the nation's leading experts on dental insurance benefits and the author of "Moving Your Patients to Yes: Easy Insurance Conversations."

As of April 23, she had only heard of Delta Dental in Connecticut and New Jersey temporarily reimbursing \$10 per patient visit for PPE.

Should patients shoulder the additional cost?

“There are two arguments to make,” said Teresa. “You could charge it because there is a cost involved. Or you could decide that you shouldn’t charge it because it’s just part of doing business and should not be line-itemed out.”

If you do decide to charge your patient, then it’s important to make sure your team and your patients know about the cost so no one thinks you’re nickel-and-diming them, advises Teresa.

“If you’re charging for PPE, then consider creating a specific code to track it. Set up a modified code like D1999.1 or D1999.P. Only the first 5 characters will print on the claim form and you can title the code Infection Control. This will help with tracking the charges associated with PPE so you can run a report,” said Teresa.

If you’re not charging the fee, then make that a positive part of your messaging about your commitment to patient safety and share that information on your website, email communication, and verbal communication with patients. Not only will that make your current patients feel good, but it might help you attract new patients, too.

Providing Dental Care to Patients Without COVID-19

As of April 27, 2020 the CDC guidelines stated, "If the patient is afebrile (temperature < 100.4° F) and otherwise without symptoms consistent with COVID-19, then emergency dental care may be provided using appropriate engineering controls, work practices, and infection control practices."

Many state governments are allowing dental practices to perform other types of dentistry. The guidelines vary state-to-state so check with your local dental association, city government, and state government for the most up-to-date information for your practice.

Things can change. Officials are using data to inform their decisions, so the situation is fluid.

Infection Control Measures

Many practices are implementing additional infection control measures. Some of these include:

- Avoiding hand-shaking, hugs, or any greeting that requires direct contact
- Installing "sneeze guards" / plastic barriers between patient areas
- Installing doors on operatories
- Creating negative-pressure rooms
- Using preprocedural rinse of peroxide when appropriate
- Implementing on-site COVID-19 antibody / antigen testing
- Upgrading HVAC systems

In all cases, visitors should not be present for the procedure, and the number of dental healthcare professionals should be limited to only those essential for patient care and procedure support, according to the CDC's website.

CDC Guidance on Avoiding Aerosol-Generating Procedures

This is a tough one for most dental practices. The CDC recommends avoiding aerosol-generating procedures whenever possible. Specifically, it recommends avoiding the use of dental hand pieces, ultrasonic scalers, and air-water syringes.

Instead, The CDC recommends hand instruments only. Many hygienists worry about the extra amount of time that will take and the quality of cleaning that will provide.

If aerosol-generating procedures are necessary, the CDC recommends using four-handed dentistry, high-evacuation suction, and dental dams to minimize droplet spatter and aerosols.

Team Communication Improves Team Safety

As your team starts seeing patients, it will take time to get used to the “new normal.”

Feeling safe means more than just making sure you have the right PPE and protocols. For many people, it will take time to feel emotionally safe and financially secure again.

Some people can't wait to get back to work. Others might feel scared. Both emotions are valid. Both are okay.

Your patients are going to have a wide range of emotions, too. This is uncharted territory for everyone.

There are a lot of resources available to help. You're not alone in this. The first step is to talk to each other. Together, you'll figure this out.

There's a reason why your patients love you. It's because you're compassionate, you're smart, you're honest, and you provide incredible service. **None of that has changed.**

Additional Resources

- Comeback Strategies for Dental Practices: www.PatientPrism.com/Comeback
- ADA: Return to Work Interim Guidance Toolkit: ADA.org/virus
- CDC: Interim Infection Prevention and Control Guidance for Dental Settings: www.cdc.gov/coronavirus/2019-ncov/hcp/dental-settings.html#note1
- CDC: Criteria for Return to Work for Healthcare Personnel with Suspected or Confirmed COVID-19 (Interim Guidance): www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html
- OSHA: Dentistry Workers and Employers COVID-19 Control and Prevention: www.osha.gov/SLTC/covid-19/dentistry.html

Our Contributors

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