Roslyn Franklin is a dentist and an infection control consultant with a wealth of knowledge having practical, educational training and accreditation experience.

Roslyn has also completed a Certificate IV in Work Health and Safety, a Graduate Certificate in Infection Prevention and Control from Griffith University and is a primary credentialed infection control professional with the Australasian College of Infection Prevention and Control (ACIPC).

With her respected consultancy business, Amalgamate, Roslyn has focused on working with and educating dental teams to achieve realistic and best practice infection prevention and control practice in Australia.

As the transition to reopen dental practices takes place, the balance of safety and care of patients and staff must be taken into consideration. Dental practices are encouraged to always conduct an individual risk assessment for each scheduled patient. This risk assessment should include screening patients for respiratory illness and epidemiological factors. As well, the patient's dental treatment should be classified into the urgency of the visit, the likelihood of generating aerosols during the visit, and a decision as to whether to provide or defer treatment. Based on the results of this risk assessment, staff should then be able to form an appropriate infection control process that will meet the needs of each individual patient. The table below highlights risk reduction recommendations for every phase of a dental visit.

<table>
<thead>
<tr>
<th>PATIENT SCHEDULING</th>
<th>RECEPTION ROOM</th>
<th>PPE MEASURES</th>
<th>AEROSOL GENERATING PROCEDURES (AGPS)</th>
<th>CLINICAL PROCEDURE RECOMMENDATIONS FOR ALL PROCEDURES (AGPS &amp; NON AGPS)</th>
<th>CLEANING / DISINFECTING</th>
<th>DENTAL TEAM</th>
</tr>
</thead>
</table>
| • Pre-screen all patients with specific questions  
• Increase appointment times  
• Patient only, no visitors  
• Temperature check on entry  
• Require patient to wear a mask, until they reach the treatment room  
• Social distancing, when possible | • De-clutter and remove magazines  
• High touch areas cleaned regularly  
• Place hand hygiene and cough etiquette posters  
• Space seating | • Proper donning and doffing of gowns, masks, eye protection and gloves  
• Proper selection and wear of surgical or respirator masks  
• Practice good hand hygiene | • Use of high-speed handpieces  
• Use of Cavilon, Piezonicsonic or other types of ultrasonic scalers  
• Polishing teeth  
• Air abrasion  
• High pressure use of 3-in-1 syringe | • Pre-procedure supervised mouthwashes for 30 seconds  
• High volume evacuation  
• Rubber dam  
• Minimize 3-in-1 syringe use  
• Four handed dentistry (work with an assistant)  
• Only essential dental professionals present during procedures | • Use recommended protocols and products for cleaning & decontamination of the environment  
• Identify detergent cleaners VS disinfectant chemicals  
• Review cleaning techniques  
• Identify high touch areas and items  
• Use disposable surface protection | • Staff meeting with infection control coordinator  
• Daily staff screening  
• Infection control training: hand hygiene, PPE, environmental cleaning  
• Stock PPE inventory  
• Follow local & regional policies on vaccinations |
Current evidence shows that COVID-19 is spread via respiratory droplets and contact routes, which is spread when an affected individual coughs or sneezes and becomes airborne or on any surface that may contain the virus. Additionally, airborne transmission may be possible in aerosol-generating treatments or procedures (AGPs), which calls for dental practices to update their guidelines with current recommendations. Selecting the correct personal protective equipment (PPE) during AGPs is imperative to maintain safe practices for staff and patients.

The following tables highlight current PPE recommendations for AGPs and Non-AGPs during dental treatments, proper mask and respirator selection:

### Minimum PPE recommended when providing restricted dental treatment

<table>
<thead>
<tr>
<th></th>
<th>USA</th>
<th>Australia</th>
<th>UK and EU</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>For all AGPs</strong></td>
<td>Patients without COVID-19 (low risk)²</td>
<td>Patients without COVID-19 (low risk)²</td>
<td>All Patients¹/²/³/⁷</td>
</tr>
<tr>
<td><strong>Non AGPs</strong></td>
<td>N95 respirator or better</td>
<td>Surgical mask (level 2 or 3)</td>
<td>FFP3 respirator</td>
</tr>
<tr>
<td></td>
<td>If not available, put on surgical mask</td>
<td></td>
<td>Surgical mask FFP2 or FFP3 respirator</td>
</tr>
<tr>
<td></td>
<td>(level 2 or 3) with full face shield</td>
<td></td>
<td>(Valved or non-valved)</td>
</tr>
<tr>
<td><strong>Full face shield or goggles</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Medical Gloves (non sterile)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Gown</strong></td>
<td>Gown or protective clinical clothing</td>
<td></td>
<td>Gown</td>
</tr>
<tr>
<td><strong>Gown</strong></td>
<td></td>
<td></td>
<td>Apron</td>
</tr>
</tbody>
</table>

**Increasing protection and breathability**

### PPE Use During Clinical Care

**Medical Masks**

- **USA:** ASTM F2100
- **EU:** EN14683

Filtration efficiency is one of five tests conducted to classify the masks under 3 levels:

- **Level 1:** ≥ 95%
- **Level 2:** ≥ 98%
- **Level 3:** ≥ 98%

**FACIAL FILTERING RESPIRATORS**

- **USA:** 42 CFR 84
- **EU:** EN149

This standard meets the performance criteria set by CDC for respiratory devices used in healthcare settings and is used by US National Institute for Occupational Safety and Health (NIOSH) for certification:

- **N95:** ≥ 95%
- **N99:** ≥ 99%
- **N100:** ≥ 99.97%

This standard specifies minimum requirement for filtering half masks as respiratory protective devices to protect against particles except for escape purposes:

- **FFP:** ≥ 80%
- **FFP 2:** ≥ 94%
- **FFP 3:** ≥ 99%


### References


Please Note: Given the novelty of this coronavirus, recommendations from the source references are interim and advisory in nature and are based on current knowledge of the situation. Always ensure compliance with your local public health authorities regulations surrounding conservation, usage, and selection guidance of PPE to combat the COVID-19 pandemic.

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