



# Fletcher Dentistry

## COVID-19 Safety Protocols and Standard Operating Procedures

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### A. TEAM TRAINING AND SAFETY GUIDELINES

Our most important goal is to train and educate our staff in order to keep themselves and our patients safe.

Training on all standard operating procedures, hand hygiene, and proper PPE will be provided.

We encourage any staff member that is not feeling well to stay home and not to return to work for at least three days after all symptoms have resolved.

Staff will take their temperature at the beginning of the day, to be logged upon entry, and sent home if above 100.4.

If staff member has a family member who has been diagnosed with COVID-19, you may be asked to stay home.

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### B. PERSONAL AND PROFESSIONAL RECOMMENDATIONS

#### BEFORE COMING TO WORK

- Take temperature (do not come to work if you or any other person in your home are experiencing symptoms: cough, sore throat, fever, etc..)
- Remove watch and rings and leave at home
- Tie hair up, keep nails short; no acrylic/gel
- Avoid extra accessories
- Wear street clothes to work and plan to change into scrubs upon arrival
- Be confident in proper donning and doffing PPE procedures

#### **ARRIVING AT WORK**

- Clinical employees, follow SOP for arriving to the office
- Use PPE as appropriate for your roll in the office
- Leave all clutter (pens, papers, phone, etc) outside of patient treatment areas
- When possible, avoid using other employees phones, desks, offices, and other work tools and equipment
- Clean phone handset after each use
- Cell phone use is discouraged

#### **AFTER WORK**

- Clinical employees, follow SOP for leaving the office
- Wash hands and arms with soap
- Sanitize personal items (phone, glasses, etc..)

#### **AT HOME**

- Change clothes
- Wash clothes in hot water
- Shower immediately before touching anything, including loved ones

### **C. COVID-19 PATIENT SCREENING GUIDELINES**

#### **BEFORE PATIENT ARRIVAL EVERY EFFORT IS MADE TO**

- Triage patients by phone during scheduling appointments and confirmation calls using checklists and scripts.
- Reschedule patients who show signs of cough or fever or who describe having any concerning warning signs of illness (at least 10 days after onset of symptoms/ at least 3 days after all symptoms are gone OR two negative test results  $\geq$  48hrs apart).
- Instruct patients to call ahead and reschedule their appointment if they develop symptoms of respiratory infection on the day they are scheduled to be seen.
- Instruct patients how to complete all necessary paperwork online prior to appointment (Health History, COVID-19 screening, Consent forms, etc..).
- Provide check-in procedures for their appointment and remind them that no one may accompany them.

### **TO PROMOTE SOCIAL DISTANCING**

- Prioritize high risk patients with early morning appointments to ensure less contact with others.
- When scheduling, stagger appointments, so fewer patients are arriving at one time.
- If a patient is being accompanied, their escort should wait in the car to limit the number of people in the reception area and promote social distancing.
- During lunch, co-workers need to make every effort to sit spaced apart in break room.

### **SAFETY MEASURES TAKEN UPON ARRIVAL**

- Post visual alerts at entrance advising patients of COVID-19 risk and advising them not to enter when ill.
- Alcohol-based hand rub, tissues and receptacles for disposal will be at entrance.
- All patients will wear masks upon entering and keep masks on throughout their time in the office until asked to remove mask for treatment.
- Cough etiquette is posted in reception area.

### **SAFETY MEASURES TAKEN UPON LEAVING**

- Encourage payment by credit card over the phone prior to their appointment to encourage social distancing with front desk.
  - Review of estimates and insurance forms can be carried out via phone and sent to patient via email/zoom meeting
  - Patients should use hand hygiene upon exiting the office
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## **D. CLINICAL TEAM PROTOCOLS**

**We adhere to the CDC infection control protocol and standard precautions to keep ourselves and our patients safe.**

### **HAND HYGIENE**

- Before and after all patient contact, contact with potentially infectious material, and before putting on and after removal of gloves.
- After removing PPE in order to remove any pathogen that might have been transferred to bare hands during the removal process.
- Wash hands for a minimum of 20 seconds with soap and water

### **EYE PROTECTION**

- Eye protection is used with every patient interaction.
- Reusable eye protection is cleaned and disinfected between use

## **MASK**

- N95 masks will be worn by all clinical staff during aerosolizing procedures. Due to limited supply, each staff member will wear one per day. A surgical mask will be worn over the N95 and changed after each patient.
- If N95 masks are unavailable, the staff will be required to wear a level 3 surgical mask with a face shield when working with patients.

## **GLOVES**

- Change gloves if they become torn or heavily contaminated.
- Remove and discard gloves when leaving operatory, and immediately perform hand hygiene.

## **GOWNS**

- Washable gowns will be changed for every patient until this recommendation from the CDC is lifted.
- Disposable gowns will be available if washable gowns become unavailable.

## **SHOES**

- Clinical shoes are to be left at the office.
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## **E. STAFF ARRIVAL, ENTRY TRIAGE/SOP AND PATIENT ARRIVAL**

1. Upon arrival, use hand sanitizer, check temperature, record in log.
2. Change into scrubs, in the bathroom and wash hands.
3. Walk to PPE station, use hand sanitizer, don hair cover, then mask.
4. Open Operatories: Turn on computers, purge all lines for 2mins, disinfect counters.
5. Open Sterilization Center: Disinfect counters, fill ultrasonic bath, set out fresh towels.
6. Clinician sets up treatment room
7. Morning Huddle-Start laundry
8. PPE:
  1. Don Gown
  2. Sanitize hands
  3. Don level 3 mask/N95 mask if available
  4. Eyewear /face shield
9. Upon entering the office, patients will use hand sanitizer and take a seat in the reception area.
10. When Front Desk employee is ready, they will call patient forward for a temperature reading. Temperature is taken: Temp over 100.4, patient is rescheduled for 3 days. If temp is below 100.4, patient takes a seat in reception area (Record temp and give to patient)

11. Front desk employee communicates that patient is ready to be seen and confirms that clinician is ready for the patient.
  12. Patient is instructed which room # to go to and meet clinical team member.
  13. Clinician reviews paperwork / give patient CHX pre-rinse & has pt spit in cup and protective eyewear to wear.
  14. Clinician performs hand hygiene, puts on loupes, dons face shield, performs hand hygiene again, then dons gloves.
  15. Procedures are performed (RDH schedules routine patient re-care/RDA schedules next treatment).
  16. Clinician aids patient in making payment through patient portal/Venmo and dismisses patient from op (instructs patient to check out at front desk to pay if needed). Any treatment needed or questions will be followed up with a phone call (this to eliminate front office crowding).
    - \*\*If treatment is needed, the front office follows up with zoom virtual treatment consult or a phone call.
  17. Clinician changes gloves and breaks down the room & cleans room (SEE SOP).
  18. Removes face shield and loupes.
  19. Clinician removes gown, and disposes of gown in laundry area, (uses restroom if necessary).
  20. Clinician returns to PPE station and proceeds to set up for the next procedure.
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## **F. OPERATORY PROTOCOLS FOR THE PATIENT**

- Limit transport of patient outside of operatory (for xrays, etc..)
  - No other team member should enter the room during a procedure, and if necessary, proper PPE should be used.
  - After an aerosol generating procedure, sufficient time should elapse before utilizing that operatory for the next patient.
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## **G. POST-TREATMENT PROTOCOLS**

- All non-disposable equipment used for patient care should be cleaned and disinfected according to manufacturer's instructions.
  - Ensure environmental cleaning and disinfection procedures are followed consistently and correctly.
  - SOPs are followed using proper disinfectant.
  - At the end of the day, all sterilization room and lab surfaces will be cleaned and disinfected.
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## **H. OPERATORY DISINFECTING SOP**

- Remove ALL soiled instruments and barriers from operatory, spray room with Optim-deliver to sterilization with cover on tray.
  - Remove gloves and don new gloves with utility gloves to load ultrasonic cleaner.
  - Remove utility gloves and disinfect tray.
  - Return to operatory and disinfect all soiled surfaces according to disinfectant directions (including reusable PPE).
  - Remove gloves and soiled disposable PPE, perform hand hygiene, replace all barriers.
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## **I. STERILIZATION SOP**

1. Don proper PPE: Utility gloves
  2. Once instruments have run in ultrasonic for a minimum of six minutes, remove them with utility gloves on, and rinse thoroughly with running water.
  3. Turn onto towels on dirty side of sterilization room
  4. Place set-ups in appropriate size pouches and seal along perforation.
  5. Load autoclave, plastic of pouch side up, not overlapping pouches.
  6. Remove gloves, close autoclave, and start wrapped cycle.
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## **J. RADIOGRAPHY SOP**

1. With clean hands, gather all items needed for indicated radiograph (barrier, xcp, etc...)
2. Open items and drop onto clean paper towel without touching.
3. Ready computer for x-ray.
4. Place lead apron.
5. Perform hand hygiene and don gloves.
6. Barrier sensor and assemble XCP.
7. Take x-ray.
8. Remove sensor from patient's mouth and disassemble/ dispose of sensor barrier.
9. Remove gloves, perform hand hygiene.
10. Remove lead apron.
11. With clean gloves, disinfect tube head and sensor.