



Infection Control Protocol

This protocol is intended for patients that have already been triaged by the dental specialist, or dentist on-call, and are deemed to have a dental emergency requiring an in-person assessment and treatment.

GENERAL GUIDELINES

- Schedule only one patient at a time, have the patient call once arrived, and let them know if we are ready to have them come up (check with surgical staff)
- Do not allow any family/friends into the office unless deemed absolutely necessary, if this is the case it will be limited to 1 person for the individual (i.e. parent, caregiver)
- Patients and staff are to maintain a minimum of 2 meters distance from each other whenever possible

4 MEMBER TEAM

- **Treating dental specialist** (full PPE, including fitted N95 mask)
 - **CDA** (full PPE, including fitted N95 mask)
 - **Circulating Assistant** (PPE: N95 not required, ASTM level 2/3 mask, can use yellow isolation gown instead of level 3 surgical gown)
 - **Receptionist** (NO direct patient interaction, PPE not required)
- **Prescreen staff every morning prior to seeing patients**
- Dry cough/fever (>37.5°)/difficulty breathing present?
 - If yes, ask staff to contact their family physician or call the local health office (811)

PATIENT PRESCREENING

- Patient should be prescreened *before arriving to the office*, they should have been prescreened multiple times by this point, ask again when they have arrived at the office
- Dry cough/fever (>37.5°)/difficulty breathing present? Are they able to take their temperature at home?
 - o If emergent patient has a fever suspected to be related *specifically* to oral/facial conditions, with no other related symptoms, they can still be seen at Kelowna CEDC
- Travelled, and returned to Canada within the last two weeks?
- Contact with any individual(s) who have/were symptomatic/healthcare worker/recently returned to Canada within the last two weeks?

- Please instruct patient to fill out all personal information online/over the phone with the receptionist or a nurse prior to arriving at the office, this includes payment/insurance information and the consent form
- Please instruct patient to have a shower/wash their hair immediately before their appointment and arrive in freshly laundered clothes

PREPARATION PRIOR TO PATIENT ARRIVAL

- Have the air scrubber turned on in OR 8, make sure to open the window first before turning on the machine
- Set up mayo stand (that is kept in the patient waiting/exit room) just outside the clinic door, with hand sanitizer and put out a new mask for each patient (only 1 per patient)
- Prepare and set up all necessary equipment needed for the procedure that will be completed

DONNING PPE

- If your shoes are a porous material (i.e. mesh runners), please use a pair of shoe covers
- Perform proper hand hygiene
- N95 mask on first (make sure that the seal is complete), then normal mask over top
- Goggles placed on
- Bonnet over top of all hair, ears, and onto framework of goggles to prevent any exposure
- Tie a blue towel around neck, make sure that all neck skin at front and sides are covered (there is tape at the scrub sink to use if needed)
- Don first pair of gloves for underneath your gown
- Put gown on, and have circulating person close at the back (don't need to tie at the back, just velcro and front tie)
- Don second pair of gloves over top of your gown

PATIENT ENTRANCE INTO THE CLINIC

- Patient will call the office upon arrival; they will be instructed to remain in their car until directed by the office to come up
- When ready, the patient is instructed to come to the entrance of the CEDC on the fourth floor where a mask and hand sanitizer will be waiting outside of the door
- Once patient has donned mask and used hand sanitizer, they can be buzzed into the office
- Temperature will be measured by a staff member who is wearing full PPE, including a fitted N95 mask. There will be probe covers in the box attached to the monitor, make sure that the cover is clicked into place otherwise it won't work – takes approx. 20 seconds to complete recording

- If their temperature is >37.5°C, the patient will be instructed to leave the office and contact their family physician or call the local health authority (811) for further instructions
- If it has been deemed that the patients' fever is specifically related to their oral/facial condition, they can still be seen in the clinic
- Patient will then be escorted to the operatory for further assessment/treatment

PATIENT IS SEEN IN THE OPERATORY

- Have a cup of 0.12% Chlorhexidine rinse ready in the OR for the patient, have them swish for 1 minute (they can spit back into the same cup after swishing, then have them place the cup on the counter – can be emptied into the sink in the OR), and then have them use the hand sanitizer to again disinfect their hands
- Instruct the patient not to touch their face while being treated, or while in the office
- Dental specialist will then complete a brief history and the oral/facial exam to determine the best treatment plan
 - o If an x-ray is needed then the circulating assistant will take the patient to complete the PAN, no intraoral scans will be taken to minimize exposure risk, and patient will leave mask in place during the scan
 - o Receptionist will print off the x-ray and leave in the hallway for the circulating assistant to grab and tape up to window of OR
- Once x-ray is taken, patient will be brought back into the OR and the treatment plan will be discussed and then draping of patient (surgical towel to cover eyes) will be completed, with treatment being delivered immediately after
- Avoid the use of a handpiece/ultrasonic/suction IF possible – minimize aerosols
- Review post-op instructions and have the patient grab the Ziploc bag with take home instructions, extra gauze and a prescription (if needed) that is on the counter for them
- Escort the patient out of the clinic and explain that all instructions will be included on the sheet provided and that if they have any questions, they can contact the office
 - o ****If any equipment is needed by the dental specialist during the procedure, that isn't in the room, the circulating assist will open and drop whatever is needed onto the mayo stand directly outside the OR door for either the specialist or the assistant to grab and bring back into the OR, intercom will be used to find out what is needed (press OR 8 and the number 1 right away to be on intercom in the room)**

TAKE DOWN OF OR

- Once patient is gone, doctor and assistant (or just assistant depending on doctor in the office) will remain in OR and do the first full wipe down of all surfaces in the OR – instruments will be wrapped into the wrapper originally used and all sharps placed within

the irrigation bowl to be disposed of in sterilization, and placed on mayo stand outside OR for circulating assist to take away

- Once the first full wipe of the room has been completed both the specialist and assistant can begin to remove their PPE while still in the OR

DOFFING PPE

- Remove shoe covers, or wipe down shoes if shoe covers were not used
- Remove gown and neck towel by only pulling forward
- Remove outer pair of gloves, and use hand sanitizer on the counter over the inner layer of gloves before proceeding with removal of remaining PPE
- Remove bonnet, outer mask and then goggles – leave the goggles in the room to be wiped
- After all PPE is removed, both the doctor and the assistant will leave the room and immediately wash their hands at the scrub sink

CLEAN UP

- The door to the OR will remain closed and no one is to enter for a minimum of 33 minutes so the air can be turned over 7 times
- Don yellow isolation gown to decontaminate all areas outside of the OR
- Waiting/exit room, all hallways used by patient, CBCT room/machine, and mayo stands outside the operatory and in the hallway
- Once the 33 minutes has passed, you can then enter the OR and complete second wipe of the room, mop the floors and place new barriers, collect the garbage bags in all areas and tie off and set aside for garbage

MINIMIZE CONTAMINATED AREAS/SURFACES

- Use only one designated garbage inside the operatory
- Use only one designated garbage outside the operatory
- Wipe down **ALL** the OR; all cabinet handles/door faces/countertops, all equipment in the room, and anywhere that could have potentially been touched

ENSURE NO CONTAMINATION LEAVES THE OFFICE

- All staff are to shower before leaving the building, including your hair (both clinical and reception staff)
- All scrubs are to be left in the office and laundered using warm water and laundry detergent
- Be sure not to touch your face until after you have showered