#### KARNATAKA STATE DENTAL COUNCIL



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Ref. No. KSDC/2152/2020

From

The President

Karnataka State Dental Council

Dated: 15-04-2020

No. 23, Appajappa Agrahara, I<sup>st</sup> Main Road,

Chamarajpet, Bengaluru-560018.

### For the kind attention of Dental Surgeons practicing in the state of Karnataka.

In the Present situation COVID 19 pandemic I wish to bring to your notice that, The Dental Health services be limited to Dental Emergencies only and all elective procedures to be postponed until the Government announcement of Pandemic control.

A Standard Operating Protocol(SOP) is released from KSDC as an advisory to Dentists to assist in this period.

Visit our website: www.karnatakastatedentalcounciI.com for updates.

Stay Safe.

(Dr. Rajkumar S. Alle)

**President** 

Karnataka State Dental Council

Bengaluru

Enclosure- SOP for Dental Emergency treatment during -COVID 19 Pandemic

Note: Additional guidelines will be issued from time to time

# SANGALORE DENTITO COUNCIL

#### KARNATAKA STATE DENTAL COUNCIL

# STANDARD OPERATING PROTOCOL (SOP) FOR MANAGEMENT OF PATIENTS IN DENTAL CLINIC/HOSPITAL DURING COVID 19 OUT BREAK

By the end of 2019, a pneumonia outbreak with unknown etiology occurred in Wuhan, China. The pathogen was identified and named as 2019 novel corona virus (2019- nCoV), and the disease was named corona virus disease 2019 (COVID-19), which stands for corona virus disease 2019. International Committee on Taxonomy of Viruses (ICTV) named the virus severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The possible routes of SARS-CoV-2 transmission are mainly direct contact and droplet transmission. Aerosol transmission is also a possible route of transmission when there is an exposure to high concentrations of aerosols in a relatively closed environment. Routine dental procedures generate aerosols, which pose potential risks to the dental care personnel and patients. The high transmissibility of the disease, dental teams should be alert and maintain a safe environment for both the patients and themselves. Therefore, understanding aerosol transmission and its implications in dentistry is essential. In addition to standard precautions, some special precautions should also be implemented during this pandemic period.

#### **ACKNOWLEDGEMENTS:**

Karnataka State Dental Council acknowledges the contribution of following experts in the preparation of this SOP.

Dr K S Nagesh. Dr Girish Giraddi. Dr Jayakar S M Dr.Jaikrishna

Dr Girish Rao Dr.Sanjay Mohan Chandra Dr.Harikiran Dr. Rajkumar S Alle

Dr Shiva Prasad Dr. Revan Kumar Joshi Dr. Mahesh Kumar T.S

#### **Purposes:**

- 1. Early recognition and source control.
- 2. Application of standard precautions for all healthcare providers and patients.
- 3. Implementation of empirical additional precautions (droplet, contact and airborne precautions) for suspected cases
- 4. Administrative controls.

5. Environmental and engineering controls.

#### **Abbreviations:**

DHSP – Dental health care service provider

OHSP- Oral health care service provider

PPE- Personal protective equipment

#### **Policy:**

- 1. Treatment care only limited to emergency cases and rescheduling non emergency cases irrespective of whether the patient is Covid 19 positive or not.
- 2. Managing emergency cases with use of proper personal protective equipment whether the patient is Covid 19 positive or not.
- 3. Avoid aerosol producing procedures.

#### **Procedure:**

- ❖ Warning sign boards about Covid 19 outbreak and instructions to the patients should be displayed in patient waiting area and near entrance in English and Local Language.
- ❖ Instructions should include how to use tissues to cover nose and mouth when coughing or sneezing, to dispose of tissues and contaminated items in waste receptacles, use of surgical masks and how and when to perform hand hygiene.
- ❖ Install physical barriers (e.g., glass or plastic windows) at reception areas to limit close contact with potentially infectious patients.
- ❖ All Dental setups/ Colleges will ensure distribution of their human resources judiciously into two teams. The first team designated as Team-A shall work on a biweekly (14 days) basis and on completion shall proceed on a 14 days' quarantine; the same protocol shall apply to the designated Team-B.
- ❖ All personnel involved with patient care shall change to OT scrubs, which shall be removed on completion of the duty and shall be immediately transported to laundry services for cleaning, under no circumstances the OT scrubs shall be taken to residences.

- ❖ The designated In charge person will also ensure that a sub-team formed from team A and B respectively, comprising of all functional elements is kept ready for any unforeseen circumstances. There shall be only two or three clinics made functional for entire college or one each in each department.
- ❖ As soon as the patient arrives at the clinic or hospital out-patient area, screen for the body temperature with a thermal scanner.
- ❖ Perform hand hygiene before and after each patient contact, follow WHO's My 5 Moments for Hand Hygiene and use 70%−90% alcohol-based hand rub.
- Non-dedicated and non-disposable equipment (e.g., handpieces, dental x-ray equipment, dental chair and light) should be disinfected according to manufacturer's instructions. Handpieces should be cleaned to remove debris, followed by heat-sterilization after each patient.
- ❖ Taking Three- level protective measures of the dental professionals are recommended for specific situations.
- (1) Primary protection (standard protection for staff in clinical settings). Wearing disposable working cap, disposable surgical mask, and working clothes (surgical scrubs), using protective goggles or face shield, impermeable shoe cover disposable latex gloves or nitrile gloves if necessary.
- (2) Secondary protection (advanced protection for dental professionals). Wearing disposable doctor cap, NIOSH-certified N95 masks, protective goggles, face shield, and working clothes (surgical scrubs) with disposable isolation clothing or surgical clothes outside, impermeable shoe cover and disposable latex gloves.
- (3) Tertiary protection (strengthened protection when contact patient with suspected or confirmed 2019-nCoV infection). Working clothes (surgical scrubs) with extra disposable protective clothing outside should be worn. In addition, disposable doctor cap, protective goggles, face shield, N95 masks, disposable latex gloves, and impermeable shoe cover should be worn.
  - Clinics or Operating areas should be equipped with all Primary protection equipments and aerosol controlling measures.
  - Record a Detailed history including travel, fever, body pain, cough, throat infection, difficulty in breathing, any history of travel outside India or to any place prone to

- Covid 19 outbreak. Take a compulsory informed consent with contact details of the patient and accompanying person.
- ❖ If the patient gives any positive history about the above mentioned symptoms, patients should be referred to a nearby designated hospital with isolation facilities to rule out Covid 19.
- ❖ Have the contact numbers of the nearby Police station, Covid 19 treating Hospitals.
- ❖ Following flow chart can be used to take decision whether the patient requires emergency care, Urgent care or Rescheduling of Appointments.

#### **Emergency Care**

- Space infection, Unbearable pain, Difficulty in breathing secondary to Space infection, Trauma cases and Malignancy cases
- Broken prosthesis or ortho appliances requiring urgent repair,
   hypersensitivity reaction, Vesiculobullous/desqauamative oral conditions

#### Urgent care

- Disabling pain, symptomatic irreversible pulpitis, periapical lesions, dry socket, tooth fracture, dental trauma with soft tissue injury/avulsion

#### Scheduled care

- Asymptomatic tooth with fractured restorations, asymptomatic dental trauma, replacement of provisional fillings

- ❖ Emergency cases have to be treated by taking Standard Infection prevention protocols and by using PPE. Surgical procedures requiring sutures, absorbable sutures have to be used.
- \* Avoid the use of aerosol generating treatment procedures, avoid use of 3-way syringe.
- ❖ Use either single use disposable or dedicated instruments, e.g. mouth mirror, probe, tweezer, etc. Clean, disinfect and sterilize the instruments between each patient use.
- ❖ Avoid intraoral radiographs, instead OPG and CBCT can be advised as an alternative.
- ❖ Dental practitioner should adhere to the standard sequence of donning and doffing of PPE.
- **!** Ensure safe waste management

- ❖ Dental practitioners should change from scrubs to personal clothing before returning home. Before reaching home, Dental practitioners should inform somebody at home to keep the doors open and keep a bucket of water with soap outside. Wash hands with soap and hand sanitizer.
- ❖ Enter the house without touching anything, enter the wash room and soak all the cloths in water and use hot water to wash it or with high temperature settings in washing machine [separately from other household residents]. Take head bath with shampoo and soap. Sanitize your belongings like mobile, wallet and keys with suitable sanitizer.

#### **Standard Emergency Care:**

- 1. Acute pain is managed by prescribing appropriate/suitable analgesics orally or intramuscularly.
- 2. Analgesics are combined with antibiotics and analgesics to address the associated infection.
- 3. Patients with severe pain shall be managed by performing emergency access opening under antibiotic cover with Standard Infection control protocol.

#### **Drug prescription at first appointment:**

Patients with acute pain shall be prescribed antibiotics and analgesics for a duration of 5 days as per the evidence based practice.

#### **Responsibility:**

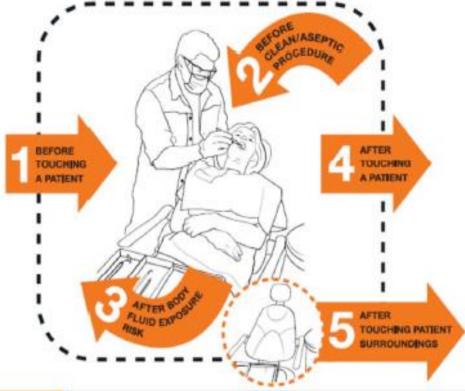
The Chief Dental Surgeon and treating Dental Surgeons are responsible,

- ❖ For deciding whether the patient has to be treated, deferred or referred based the history and health status of the patient.
- For selecting and prescribing the drugs taking into consideration all the pros and cons of the drugs.
- ❖ To bring it to the notice of the Covid 19 management team if the patient has been suspected with Corona viral infection.

To provide task-specific education and training on preventing transmission of infectious agents, including refresher training.

# Your 5 Moments for Hand Hygiene

### **Dental Care**



1	REFORE TOUCHING A PATIENT	WHENT	Clean your hands before tourning a patient. To protect the patient against harmfull-germs carried on your hands.	
2	ASSPTIC PROCEDURE	wert	Gleen your hands incrediately before performing a clean/asseptic procedure.  To protect the patient against harveful germs, including the patient's own, from entering triuther body.	
3	AFTER BODYFLIAD EXPOSURE MEX	WHETT	Obser your hands immediately after a procedure treating exposure risk to body fluids joid after glove removals.  To protect yourself and the environment from harmful patient genns.	
4	APTER TOUGHAG A PATEENT	MARCH.	Clies your hands after fourning the patient at the end of the encounter or when the encounter is interrupted, To protect yourself and the environment from having patient perms,	
5	APTER TOUCHBUS PATENT SUBROUNDERGS	WHENT	Clean your hands after touching any object or furniture in the patient surroundings when a specific some is temporarily and exclusively dedicated to a patient - even if the patient has not been founded.  To protect yourself and the environment from harmful patient germs,	



SAVE LIVES Clean Your Hands

WHO guidance on hand hygiene in dental care

## **How to Handwash?**

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB



Duration of the entire procedure: 40-60 seconds



Wet hands with water;



Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



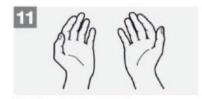
Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



Patient Safety

SAVE LIVES

Windows is precisions have been taken by the World Health Digitation to verify the information contained in this document. However, the published not reliable the region of the transfer of any lend either with precision or wind the World Health Organization be liable for disasses around from its use.

#### SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

### 1. GOWN Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back Fasten in back of neck and waist 1. MASK OR RESPIRATOR Secure ties or elastic bands at middle of head and neck Fit flexible band to nose bridge Fit snug to face and below chin Fit-check respirator 2. GOGGLES or FACE SHIELD Place over face and eyes and adjust to fit 3. GLOVES Extend to cover wrist of isolation gown

#### HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE)

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. **Remove all PPE before exiting the patient room** except a respirator, if worn. Remove the respirator **after** leaving the patient room and closing the door. Remove PPE in the following sequence:

#### 1. GLOVES

Outside of gloves are contaminated!

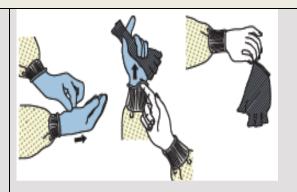
If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer

Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove

Hold removed glove in gloved hand

Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove

Discard gloves in a waste container



#### 2. GOGGLES OR FACE SHIELD

Outside of goggles or face shield are contaminated! If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based

Remove goggles or face shield from the back by lifting head band or ear pieces

If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



#### 3. GOWN

hand sanitizer

Gown front and sleeves are contaminated!

If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties

Pull gown away from neck and shoulders, touching inside of gown only

Turn gown inside out

Fold or roll into a bundle and discard in a waste container

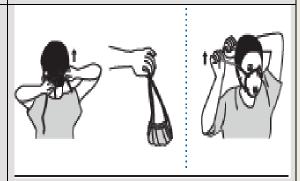


#### 4. MASK OR RESPIRATOR

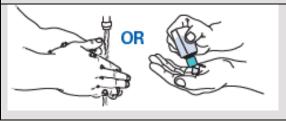
Front of mask/respirator is contaminated — DO NOT TOUCH! If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer

Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front

Discard in a waste container



5. Wash hands or use an alcohol-based hand sanitizer immediately after removing all PPE



### INFORMED CONSENT FORMAT FOR DENTAL TREATMENT DURING COVID 19 OUTBREAK

Date:

**Email Id:** 

Name:

Age/sex: Adress: Occupation: Mobile No:

	uestionare:			
Sl. No		Yes	No	
1.	Do you have any symptoms like fever, body pain, cough, sneezing, sore throat, difficulty in breathing			
2.	Have you or any of your cohabitants travelled outside state/country in the past one month			
3.	Any of your family members have history of fever, body pain, cough, sneezing, sore throat, Difficulty in breathing			
4.	Have you visited the general physician if your answer is yes for question 1.			
5.	Do you have any medical issues (if yes mention the details)			
6.	Do you belong to Covid 19 sensitive area or have visited one such place in past one month			
7.	Have you come into contact with a patient with confirmed 2019-nCoV infection within the past 14 days?			
8.	Have you recently participated in any gathering, meetings, or had close contact with many unacquainted people			
I.		rgency		
tı	reatment. Dentist reserves right to TREAT /DEFER /REFER me accordingly.			
If	If I happen to be an asymptomatic carrier or an undiagnosed patient with covid19 disease, I suspect is			
n	ay endanger Dentist and clinic staff. It is my Duty and responsibility to take appropriate preca	autions		
aı	nd follow the protocols prescribed by them.			
I	also know and understand that I may already be an asymptomatic carrier/ undiagnosed COV	√ID-19		
p	ositive patient/ may get infected due course of time after my visit to the dental clinic and I v	vill not		
h	hold the doctors or the staff of the clinic responsible for any future diagnosis of COVID with			
m	ny accompanying person.			
Т	The above terms and conditions have been read by me / have been explained to me in m			
la	inguage to my complete satisfaction. I agree to all terms and conditions mentioned above			
I	verify, confirm and agree to be held accountable, regarding the details given by me which I sta	ate are		
tr	true to the best of my knowledge.			
	atient's signature /Thumb Impression: arent/Guardian Signature (if minor):			

**KSDC Reg No:** 

Patients accompanying person's signature:

Name of the Dentist with Signature:

#### DISCLAIMER

This document is a compilation of relevant scientific data extracted from the guidelines issued by institutes and associations of international repute to help oral health care providers, practice safely in times of this pandemic. As the information and knowledge regarding COVID-19 disease is evolving continuously, it is suggested that all the oral health care providers need to update themselves on a regular basis and adapt their practices accordingly. The oral health care providers need to use their personal judgement based on universal standards for health care provision on each case according to the clinical findings and decide to treat the patient. This guideline is limited to the duration of COVID-19 pandemic and any guidelines issued by the State or Central Government will be final.

# Karnataka State Dental Council Wishes All the Dental Surgeons a Safe and Healthy Practice

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