1. **Patient Communication** :
	* + Send letter to all patients – See Sample at ADA Toolkit letter and make modifications to better represent your office. **Note: 5 bullet points on sample letter can be better elaborated** .
			- Via e-mail or third party communication systems
			- Hard copy to patient’s where a valid e-mail is not available and “elderly patient’s” that are likely not to open e-mail on a daily basis
			- Post on all Social Media venues related to practice
			- Post on Website
		+ Create a video and post on social media and website
			- Welcome back – here is what we have done to ensure your and our safety!
		+ Continue to contact patients via Phone
			- How are you doing?
			- Inform of actions we have taken to ensure their safety and ours – Did you receive our e-mail?
			- Guide patients to visit website for video
			- When Scheduling patients follow **ADA-Patient Screening Form**

 Phone calls priorities:

* + - Patients that called with an emergency and were not treated
		- Patients under care (in the middle of treatment)
		- Patients whose appointments were interrupted due to practice closing (we cancelled or they cancelled and pre-existing appointment)
		- Patients with unscheduled treatment plans
		- Patients due and overdue for hygiene that were not previously scheduled
1. **Social Distancing Scheduling Protocols:**
	* + Extend Business hours to accommodate patients
		+ Implement “virtual reception room”
		+ Extend time allowed per procedure depending on availability of treatment rooms and staff to accommodate additional need for disinfection protocols- (15 minutes to ½ hour )
		+ Set up a “scheduling grid” to what procedures should be scheduled at different times- That will allow a more productive day , extra time to disinfect treatment rooms after extensive procedures and utilization of different treatment rooms when possible.
		+ Example : Room 1- Aerosol generating procedure

 Room 2- Non aerosol generating procedure

1. **Update Practice’s Pre-existing Guidelines and Systems** ( they might no longer be effective )
	* + Update financial policies:
		+ Set up direct deposit, credit card authorization forms
		+ Consider creating alternative payment plans, or/and no interest charges
* Extended courtesies for front-line workers
* Apply a PPE – charge- check insurance companies allowance for charge
* Consider setting up tele-dentistry for your practice:
	+ - * triage
			* consults
			* new patient experience
			* follow-ups
			* review of findings
			* case presentation
			* financial arrangements
* Zoom conference – review privacy settings and protection against zoom hacking , waive of HIPPA privacy regulations during crisis
* Create a 3 step plan to who and when your team is returning to work.
* Be logical not emotional
* Review the financial reality and projected revenue based on patient’s demand but also at practice real capacity under new regulations , and safety of staff and patient’s
* Phase I:
	+ Skeleton staff
	+ Limited Procedures
	+ Hygiene?
* Phase II:
	+ Re- assess demand
	+ Extend schedule – Possible staggering of team and hours
* Phase III:
	+ Full team
	+ Marketing
	+ Restructuring
	+ Being prepared to better and more efficient than before crisis- Use all learner as a new way of being and a new way of operating

**4 – Preparing the Practice to Receive Patients:**

* Reception Area – Administrative Space
	+ - Remove all magazines and reading materials
		- Remove coffee station – place in a private area with disposables
		- Set up disinfection station in a place near the entrance of practice.
			* Some offices have op to set up station on hallway before entering the practice if appropriate
		- Create a Welcoming sign -to be visible either at the door or at disinfection station so patients can read when they enter.
		- A sign with disinfection protocols and a copy of patient screening form (both framed)
		- Disinfection Station : Sanitizer, tissues, thermometer, \*patient’s kit
		- Install Plexi-glass at reception counter
		- Place tape on floor to indicate proper spacing
		- Add an additional garbage can with cover – for disposables
		- De-clutter any additional items as needed
		- Remove chairs from reception – leave 2 chairs on each side (patient and companion)
		- Use keyboard protectors and clean or change out
		- Assign personal headset for phone usage to eliminate touching phone with hands and cross contamination
		- If you have more than one person working at the desk- Practice 6 feet distancing when possible
		- Stock and use CaviWipes
		- Schedule disinfection of surfaces: counters, doorknobs, chairs.
		- Consider Installing Air Purification System in Reception and Administration Space
* Patient Check-In Protocols
	+ - Welcome to the office
		- Greet at disinfection station
		- Temperature check with -infra-laser thermometer
		- Confirm Patient Screening Form has been completed online.
		- Hand patient the kit \*see Patient Kit below for items included
* Patient Kit (in a closed bag) Suggestions:
	+ - Pen
		- Booties
		- Surgical Cap
		- Mask
		- Gloves
		- Disposable gown
		- Traveler size tissue pack
		- A copy of patient screening form (unless is completed online)
		- Credit card authorization form
		- Travel sized Purell or equivalent
		- Garment bag if applicable
		- Safety glasses
		- Hygiene- patient package
		- Menu- Pedo: fluoride flavor, toys, sticker choices
* Bathroom
	+ - Door is locked or taped
		- Bathroom gets disinfected after each use
		- Place seal on door to indicate just disinfected
		- Provide pump anti-bacterial soap and hand sanitizer

**5.- Treatment Room Protocols**

* Team protocol in the treatment room:
	+ - Wash hands in front of patient
		- Place goggles and mask- Double mask option
		- Long sleeves and/or disposable gowns
		- Remove mask only after leaving the room
* Treatment room set up:
	+ - Place barriers, including full plastic cover for chair
		- Plastic covers for any keyboards,
		- Consider using tape instead of bib-chains that can get highly infected
* Procedure set-up
	+ - Basic set up is pre-packaged ahead of time @ assembly station:
			* All disposables
			* Instruments
			* Air& water syringes
			* Suction tips
			* Water cup
			* Bib
			* Safety glasses
			* Necessary Materials
			* Anesthesia
			* Bur blocks
			* Disposable Dappen-Dishes and brushes
			* Smaller etch syringes
			* Individual uses of fluoride, composite
			* Polishing paste
			* Consider installing an air purifier at each treatment room or larger unit for open floor
			* Consider purchasing an extra-oral suction unit for high aerosol procedures
			* Consider looking into Ozone/ water purification system
* Treatment Room Break-Down
	+ - Follow standards of disinfection as usual- spray surfaces and let air-dry
		- In addition: wipe every knob, door handle, counter surface, cabinet faces, monitors, keyboards.
		- Transfer all infected materials and instruments to sterilization area.
		- Replace gloves with utility gloves
		- Dispose of all aerosol exposed PPE such as: mask, and gowns
		- Alternatively: double mask and dispense the external mask
		- As per ADA there is no specific demand to how frequently to change a N-95 mask or gown. Make judgement based on professional judgment results as to necessity. See page 15 on ADA tool-kit

**6.- Sterilization**

* Sterilization Protocol:
	+ - Follow standard sterilization protocol
		- Ultrasonic cleaner (?) Make sure cover is sealed tight or
		- Soak instruments with a disinfectant
		- Rinse under running water and pack
		- Autoclave- Spore test done more frequently
		- Impressions are sprayed and disinfected
* Consider creating an assembly station to have all materials and instruments pre-set outside the treatment room e.g. Surgical Room setup pack- Blue Autoclavable wrap

**7.-Staff Protocol**

* All Staff-upon arrival go to disinfection station
	+ Use Hand sanitizer
	+ Temperature Check/ symptoms check
	+ Log in stats on Daily Screening Log
	+ Remove External Clothing and shoes -place in a disposable bag
	+ Place PPE on (scrubs, gown, mask, gloves, shoes etc.)
* Front Desk:
	+ Masks
	+ Disposable Gowns are optional
	+ Gloves- during patient transaction (credit card, handling forms, etc.)
	+ Face Shields if no Plexi-glass is available
* Clinical Staff
	+ All proper PPEs as mentioned above
		- Disposable gown or long sleeve scrubs button to the neck
		- Surgical cap
		- Face shield or proper eye protection

8.**Other Recommendations:**

* + - Watch Covid-19 infection control protocols webinar
		- Order an infrared thermometer
		- Look into Extra-Oral Suction Unit– at least one, for aerosol generating procedures
		- Air purification units to be installed in each treatment room and reception/front desk area rated for size of rooms.
		- Ozone Generator – consider use of for overnight disinfection of entire office/rated for size
		- UV lighting- use eye protective glasses during usage
		- Have patients rinse with an antimicrobial rinse : examples-Hydrogen peroxide diluted solution, ECO balance, Ozone water etc
		- Conduct a laser pocket disinfect prior of treatment
		- UV light disinfection technology