



Guidance for Dental Health Care Providers Responding to Cases of COVID-19

October 19, 2020 Updates are Highlighted

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The purpose of this document is to provide guidance for dental health care personnel responding to a newly identified patient or employee with COVID-19. This guidance is divided into four sections:

- **What to do if an employee is symptomatic or tests positive for COVID-19?**
- **What to do if an employee is diagnosed with COVID-19?**
- **What to do if patient is positive for COVID-19 and had visited the office in the 48 hours before (a) testing positive or (b) becoming symptomatic and later diagnosed with COVID-19?**
- **What other precautions should a dental office take when a patient or employee with COVID-19 is identified?**

Make sure to document all activities, every step along the way. Documentation may occur in several places—for example, a dental office may use a line list to track case contacts but may also make a note in a patient’s chart if they are listed as a contact.

What to do if an employee is symptomatic for COVID-19?

1. Document the date employee reports symptoms and send employee home if they are at work. Symptoms include fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.
2. Advise employee they may return to work when they meet the criteria laid out in the CDC Criteria for Return to Work for Healthcare Personnel with SARS-CoV-2 Infection. These criteria to return to work and release from isolation include:
 - a. At least 10 days have passed since symptoms first appeared *and*
 - b. At least 24 hours have passed since last fever without the use of fever-reducing medications *and*
 - c. Symptoms (e.g., cough, shortness of breath) have improved
3. Ask employee to contact their primary care provider about medical evaluation for possible COVID-19, which may include testing.

4. If the employee is tested and willing to share, request they communicate the date of the test, the test result, the source of specimen (e.g., blood, nose, throat, etc.), and what type of test was used (e.g., PCR, antigen, etc.) if known. Document this result in your records.

What to do if an employee is diagnosed with COVID-19?

1. Notify dental health care personnel (DHCP) that someone in the office was diagnosed with COVID-19., but do not disclose who this person is unless the employee with COVID-19 has agreed to be identified.
2. Assess their contacts during the 48 hours before having symptoms or a positive test (if no symptoms) and identify all close contacts.
 - a. Close contact is defined as being within six feet or closer for 15 minutes. Cumulative exposures that add up to 15 minutes within a day may be considered close contact. See the [ACPHD updated definition of close contacts](#).
 - b. Ask employee with COVID-19 to identify other staff and patients with whom they had close contact during the 48-hour time period.
 - c. If employee is willing to be identified, consider asking other employees about who may have had close contact with the person during the 48-hour time period.
 - d. During this investigation, identify what Personal Protective Equipment (PPE) (e.g., surgical facemask, fit-tested N95 respirator, face shield, goggles, gown, gloves) if any, was being worn by the employee or other staff at that time.
3. Ask any DHCP who are close contacts to self-monitor for fever or [symptoms consistent with COVID-19](#) for at least 14 days after exposure. They have the option to, though are not required, to obtain COVID-19 testing.
4. Send home any DHCP who had close contact and at least one of the following criteria are met:
 - a. DHCP was not wearing a respirator or facemask, OR,
 - b. DHCP was not wearing eye protection and the employee with COVID-19 was not wearing a cloth face covering or facemask

Advise the employees to stay home, practice physical distancing and monitor for symptoms for the 14 days following the exposure. Consult [CDC U.S. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19](#) for more information.

5. Contact patients that may have been exposed to the employee with COVID-19.
 - a. Call the patient, identify yourself and your office
 - b. Calmly state that “We had a person in the office that tested positive for COVID-19 while you were here. We are concerned about your health and we wanted to

- be transparent about this exposure and to offer helpful suggestions.” (possible sample dialogue)
- c. Explain about protocols in place in your office to prevent virus transmission and how these protocols make the chance of transmission very low.
 - d. Because you value the health of your patients, you wanted them to know and you want them to call their primary care physician about being tested and to self-quarantine for fourteen days.
6. Contact Alameda County Public Health Department (ACPHD):
 - a. Call (510) 268-2101 or email: COVIDWorkplace@acgov.org
 - b. Provide the name, date of birth, contact information (including address and phone number), occupation, race/ethnicity and date the diagnosis was known, date of the employee’s COVID-19 test and the site where the test was given.
 7. Contact California Workers Compensation about employee:
 - a. Governor Newsom’s Executive Order N-62-20 provides that all California employees who work at a jobsite outside their home at the direction of their employer who test positive for COVID-19 within 14 days of working at their jobsite are presumed to have contracted any COVID-19 related illness at work for the purposes of awarding workers compensation benefits.

What to do if patient is positive for COVID-19 and had visited the office in the 48 hours before (a) testing positive or (b) becoming symptomatic and later diagnosed with COVID-19?

1. Document the date patient notified the dental office.
2. Identify the date the patient first experienced symptoms, and request they communicate the date of the test, the test result, the source of specimen (e.g., blood, nose, throat, etc.), and what type of test was used (e.g., PCR, antigen, etc.) if known.
3. Assess their close contacts during the appointment(s)
 - a. Close contact is defined as being within six feet or closer for 15 minutes.
Cumulative exposures that add up to 15 minutes within a day may be considered close contact. See the [ACPHD updated definition of close contacts.](#)
 - b. Close contact is also defined as any duration of exposure which occurred during performance of an aerosol-generating procedure.
 - b. During this investigation, identify what Personal Protective Equipment (PPE) (e.g., surgical facemask, **fit-tested** N95 respirator, face shield, goggles, gown, gloves), if any, was being worn by the employees during the patient encounter.
4. Ask any DHCP who was a close contact to self-monitor for fever or [symptoms consistent with COVID-19](#). They have the option, though are not required, to access COVID-19 testing.
5. Send home any DHCP who had close contact with the COVID-19 positive patient *and* at least one of the following criteria are met:

- a. DHCP was not wearing a **fit-tested N95** respirator or facemask, OR,
- b. DHCP was not wearing eye protection and the patient with COVID-19 was not wearing a cloth face covering or facemask, OR,
- c. While performing an [aerosol-generating procedure](#) on the person with COVID-19, the DHCP was not wearing all recommended PPE (i.e. gown, gloves, eye protection, **fit-tested** N95 respirator).

Advise the employees to stay home, practice physical distancing and monitor for symptoms for the 14 days following the exposure. Consult [CDC U.S. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19](#) for more information.

What other precautions should a dental office take after a patient or employee with COVID-19 is identified?

1. Perform environmental cleaning of the office
 - a. At a minimum, perform an environmental cleaning and disinfection of all high touch surfaces and clinical instruments.
 - b. Refer to the [CDC's Infection Prevention and Control Guidance for Dental Settings during the COVID-19 Response](#) for more guidance
2. After an employee or patient is diagnosed with COVID-19, all staff should continue to monitor for symptoms and make sure to not come to work if feeling sick.
 - a. Follow all [recommended infection prevention and control practices](#), including wearing a facemask for source control while at work, monitoring themselves for fever or [symptoms consistent with COVID-19](#) and not reporting to work when ill. The staff should continue to undergo screening for fever or [symptoms consistent with COVID-19](#) at the beginning of their shift.
 - b. Any employee who develops fever or [symptoms consistent with COVID-19](#) should immediately self-isolate and contact their established point of contact (e.g., occupational health program) to arrange for medical evaluation and testing.
3. If someone is identified as a close contact (within 6 feet for at least 15 minutes or present during an aerosol-generating procedure) the close contact is a high priority for testing and should obtain testing if desired. This means that their health care provider should make every effort to have this close contact tested. A COVID-19 test is most likely to be positive between 4-10 days after the exposure.