South Carolina
OSHA
Occupational Safety and Health Administration
South Carolina Department of Labor, Licensing and Regulation

FastFact

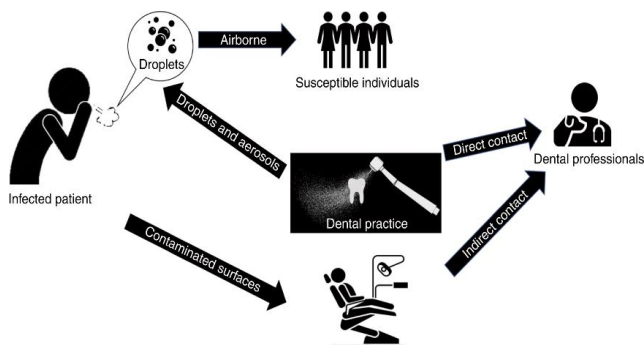# COVID-19 in Dental Settings

What is COVID-19?

COVID-19 is a disease caused by a respiratory virus first identified in Wuhan, Hubei Province, China in December 2019. COVID-19 is a new virus that hasn't caused illness in humans before. Worldwide, COVID-19 has resulted in thousands of infections, causing illness and in some cases death. Cases have spread to countries throughout the world, with more cases reported daily.

What are the symptoms of COVID-19?

- COVID-19 generally causes mild respiratory illnesses, but can cause severe disease, including pneumonia-like illness (Novel Coronavirus-Infected Pneumonia or NCIP).
- Typical symptoms include fever, cough, and shortness of breath.
- Symptoms begin 2-14 days after exposure.

How does this affect work in Dental Health Care Personnel (DHCP)?

The Centers for Disease Control and Prevention (CDC) Division of Oral Health and the American Dental Association (ADA) strongly encourage DHCP to postpone any non-emergency or elective dental procedures if a patient is displaying acute respiratory illness until they are no longer contagious with diseases that may be transmitted through airborne, droplet, or contact transmission (e.g., sneezing, coughing, and contact with skin). DHCP and their patients are at risk of contracting COVID-19 due to frequent face-to-face interaction and extended exposure to saliva, blood, and other bodily fluids all while utilizing sharp instruments.

Illustration of transmission routes of 2019-nCoV in dental clinics and hospitals from the International Journal of Oral Science (IJOS).

The potential for spreading the virus in dental settings occurs when an individual inhales the droplets or aerosols from an infected individual through propulsion of an uncovered cough or talking, or through indirect contact with infected instruments or tools.

What about emergency dental procedures?

If urgent dental treatment is necessary, dentists and a patient's medical provider(s) should work together to determine the appropriate precautions to take on a case-by-case basis and decide whether the dental facility is an appropriate setting to provide the necessary services to the potentially infectious patient, as dental settings are not typically designed to carry out all of the transmission-based precautions recommended for hospital and other ambulatory care settings.

Patients with an acute respiratory illness should be identified at check-in and placed in a single-patient room with the door closed. Patients should be offered a disposable surgical mask if the patient is coughing, as well as tissues and no-touch receptacles for disposal.

Patient and dental healthcare workers should perform hand hygiene (e.g., hand washing with non-antimicrobial soap and water, alcohol-based hand rub with at least 60 to 95% alcohol, or antiseptic hand wash) after possible contact with respiratory secretions and contaminated objects/materials.

What type of Personal Protective Equipment (PPE) is applicable?

The CDC Guidelines for Infection Control in Dental Health-Care Settings recommend the following:

- Dental healthcare personnel assessing a patient with influenza-like or other respiratory illness should wear an [Food and Drug Administration (FDA) approved surgical mask](#), non-sterile gloves, gown and eye protection with solid side shields or a face shield to protect mucous membranes of the eyes, nose, and mouth during procedures likely to generate splashing or spattering of blood or other body fluids to prevent exposure.
- Change masks between patients, or during patient treatment if the mask becomes wet.

Additional Controls to Consider Implementing in the Workplace

The CDC and ADA recommend the following:

- Post educational posters (e.g., hand hygiene and respiratory etiquette) and warning signs in strategic locations.
- Implement a flexible work leave policy per public health leave recommendations and follow the CDC guidelines for post-exposure to COVID-19.
- Encourage sick employees to stay home and not return to work.
- Practice social distancing when scheduling patients, and remove material not easy to disinfect (e.g., magazine, books, toys).

General OSHA Guidance

For all workers, regardless of specific exposure risks, it is always a good practice to:

- Frequently wash your hands with soap and water for at least 20 seconds. When soap and running water are unavailable, use an alcohol-based hand rub with at least 60% alcohol. Always wash hands that are visibly soiled.
- Follow good cough etiquette by covering your mouth when coughing and sneezing, such as by using disposable tissues or coughing/sneezing into the elbow.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid close contact with people who are sick.

OSHA COVID-19 Resources

- **https://www.osha.gov/SLTC/covid-19/**

Also visit the CDC and the ADA websites for the latest updates on COVID-19.

- **https://www.cdc.gov/coronavirus/2019-ncov/hcp/index.html**
- **https://www.ada.org/en**

Disclaimer

This Hazard Alert is not a standard or regulation, and it creates no new legal obligations. These recommendations are advisory in nature, informational in content, and are intended to assist employers in providing a safe and healthful workplace. The Occupational Safety and Health Act requires employers to comply with safety and health standards and regulations promulgated by OSHA or by a state with an OSHA-approved state plan. In addition, the Act's General Duty Clause, Section 5(a)(1), requires employers to provide their employees with a workplace free from recognized hazards likely to cause death or serious physical harm.

Contact Information
SC OSHA Standards Office
803.896.7661
scosha.llronline.com

@scllr

@sc_osha