Directive on Resuming Elective Dental Services

The Secretary of Health, in consultation with the Governor, has sole authority over all instances of quarantine, isolation, and restrictions on commerce and travel throughout Arkansas, as necessary and appropriate to control disease in the state of Arkansas as authorized by Ark. Code Ann. §20-7-109—110 and the Board of Health’s Rules Pertaining to Reportable Disease (2019). Based on available scientific evidence, it is necessary and appropriate to take further action to ensure that COVID-19 remains controlled and that residents and visitors in Arkansas remain safe.

Since dental work often creates aerosols, it carries an added risk of spreading COVID-19, especially to the DHCP who can spread it to others. Dental procedures can resume if dental health care professionals (DHCP) fully adhere to the revised ADH Guidelines effective June 15, 2020.

a. Follow the screening guidelines for patients and dental team as outlined in the ADH Guidelines

b. All providers must plan for and ensure enhanced workplace sanitizing and disinfecting;

c. All patients and dental team members should wear appropriate face mask coverings while within the facility;

d. All providers must modify traditional reception/common room seating areas and implement non-traditional alternatives (call ahead registration, wait in car until called, etc.). Remove all magazines, TV remotes, toys, etc. that may typically be handled by patients. Social distancing requirements are to be maintained in all settings where people must wait in order to minimize direct personal contact between individuals within the facility;

e. Patients should use a preprocedural mouth rinse of 1% hydrogen peroxide or 0.2% provodine to reduce the oral microflora;

f. The proper Personal Protective Equipment (PPE) is made available to all staff members and disinfectant protocols have been updated to reflect issues related to the SAR-CoV-2 Coronavirus (COVID-19).

g. In high aerosol risk treatment areas, all providers must wear appropriate PPE and strictly adhere to aerosol mitigation and controls as outlined in the ADH Guidelines;

h. Ultrasonic/piezo/sonic instrumentation may be allowed in use at this time with the recommendation of a four-handed approach or suitable HVE listed in the ADH Guidelines;

i. Allot longer appointment times for proper disinfecting protocols, i.e. allow extra 15 minutes after patient exists treatment room for aerosols to settle prior to implementing disinfection protocols while also following the recommended time (product label) for the disinfectants to remain on surfaces in order to be effective;
j. Implement protocols to minimize exposures after procedures:
   a. Ask patients to wash their hands for 20 seconds and to wear their mask when they leave the treatment area;
   b. When possible, provide all necessary information to patients in the procedure room to avoid congregation at the front desk/waiting area on their way to exit the clinic;
   c. Complete paperwork electronically before or after the appointment if possible.

k. Each dental facility must have an adequate supply of PPE, through its own suppliers, to comply with these and future guidelines. All practices shall maintain the level of PPE needed to protect the dental team members and patients. **Without proper PPE, treatment must be suspended until such time as PPE supplies are restored.**

Resources for Guidance Governing the Provision of Dental Care

- [CDC Interim Infection Prevention and Control Guidance for Dental Settings During the COVID-19 Response](https://www.cdc.gov/dentalhealth/covid19/dental-guidance.html)
- [CDC Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care](https://www.cdc.gov/dentalhealth/covid19/dental-guidance.html)
- [OSHA COVID-19 Control and Prevention](https://www.osha.gov/SLTC/COVID19/)

**This Directive is subject to change as the COVID-19 pandemic progresses**