



Addendum to ASDA COVID 19 Statement (as of March 24, 2020)

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As many communities embrace both mandatory or voluntary “stay-in” measures, we urge our members to continue adhering with their local official mandates and recommendations. We recognize the significant strain on our members and on our colleagues due to the heightened response to the COVID-19 outbreak, and hope that the efforts enacted in our dental communities will help protect the most vulnerable.

ADA and State Guidelines for Emergent and Urgent Dental Care

The ADA issued guidelines (3/18/20) on what constitutes emergency or urgent care in dentistry. While the decision ultimately relies on the professional judgement of licensed dental providers, it is clear that the treatment of asymptomatic patients for whom a delay in treatment poses no risk of impairment to the patient’s condition or pending treatment, should be deferred to a future date.

<https://www.ada.org/en/publications/ada-news/2020-archive/march/ada-develops-guidance-on-dental-emergency-nonemergency-care>

This follows earlier recommendations issued by the ADA to postpone elective procedures for three weeks. Dentist anesthesiologists must also be aware that individual state guidelines may vary from the ADA recommendations, and may change as the response to the pandemic evolves.

We strongly encourage our members to validate treatment together with the operating dentist/surgeon, adhering to national and local guidelines with documentation in the patient record. Alternative treatment strategies may be shared with referring dentists to assist in helping patients avoid a hospital or emergency room visit.

Use of Personal Protective Equipment

Recommendations from the CDC, OSHA, ASA, and APSF for use of PPE as related to dental surgery and anesthesia have suggested reserving the use of N95 respirators for patients with suspected or confirmed COVID-19 exposure or infection. However, as it has been increasingly recognized that asymptomatic patients may unknowingly transmit viral infection, more recent recommendations have clarified that healthcare providers should be protected with the N95 respirator, gown, hair cover, and eye protection during intubation or when aerosolizing procedures are performed. The availability of N95 respirators has been an issue, and while the reuse or disinfection of the N95 respirator has not been officially described, protocols at different centers are being discussed. PAPR (Power Air Purifying Respirator) and other protective gear are alternatives if N95 respirators are unavailable.

Improving Access to Care for Dental Patients and Their Dentists

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Dentist Anesthesiologists Assisting in Response

As the number of cases diagnosed continues to surge, health care organizations are experiencing shortages, especially in PPE and ventilators. We urge our members to assist their local health care communities in any way possible. Such opportunities include:

- 1) Volunteering effort and expertise especially in triage and airway management. Volunteers may benefit in first consulting with their malpractice carrier and dental board if the assigned duties would potentially extend beyond the scope of your license.
- 2) Donation of supplies especially PPE. Each hospital or region may provide guidance regarding the type and condition of needed supplies.
- 3) Donation / loan / sale of ventilation equipment. Communities and hospitals in desperate need may welcome supplementary access to ventilation and anesthesia machine equipment and accessories.

Please stay safe... We wish all our members, their families, their staff, their patients and their communities safety and health.

American Society of Dentist Anesthesiologists

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