

# **Updated** Public Health Information about COVID-19

For up to date information on Covid-19, log on to <a href="https://www.who.int">www.who.int</a>

# For all Dentists, Dental Hygienists, Dental Nurses, Orthodontic Therapists, and Clinical Dental Technicians

COVID-19 cases have been detected across mainland China and in over 30 other countries. Further global spread is likely.

Risk assessment of people attending dental clinics/practices must be carried out to reduce the possibility of further spread. All dental healthcare workers are encouraged to have a high level of clinical suspicion. Pre-appointment, if a clinic/practice makes contact with a patient, it should be established if the patient is well and free from known risks. Clinical triage should be used for all people attending dental clinics/practices.

## **Common Signs of Infection**

## Respiratory symptoms i.e. cough, shortness of breath and breathing difficulties

- Fever
- In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death.

#### **Guidance on PPE**

- Wear Mask with Goggles that have side protection, gloves, gown
- If goggles are not available, use mask as above with visor, gloves, gown
- Do not use a facial shield/visor
   without a mask face shields should
   not be used as solitary face/eye
   protection, but rather as adjunctive
   to other PPE (protective facemasks,
   goggles, etc.).

#### **Clinical Guidance**

### What should I do if a symptomatic person arrives or makes contact?

• The primary care algorithm must be followed, see below.

#### What should I do if someone has been in an affected area recently?

- If a well person who attends a clinic has returned from mainland China/affected area in the previous 14 days, it is prudent to defer the appointment until at least 14 days after last known exposure.
- In general, a generic travel question for everyone on the consultation form is always useful, e.g. Have you travelled abroad in the last month? If yes where? This would help gather this information without singling out any particular group or individual.

#### Infection Control and Waste Management

- The IPC guidance on waste management is available here: <a href="https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/">https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/</a>
- The HSE's IPC Guideline for Dental and Orthodontic Services is available here: https://www.hse.ie/eng/about/who/healthwellbeing/our-priority-programmes/hcai/resources/dental/

#### Recommendations to prevent spread of infection include:

- Regular hand washing. Training should be provided for any staff members who require an update this is available at www.HSELand.ie registration is required
- Supply of Alcohol Based Hand Rub should be readily available in all areas
- Respiratory etiquette: cover mouth and nose when coughing and sneezing, poster available from <a href="https://www.hpsc.ie">www.hpsc.ie</a> should be on display in all waiting rooms, reception and surgeries
- Foot controlled bins should be available in all waiting rooms
- Avoid close contact with anyone showing symptoms of respiratory illness
- If you are unwell on return from travel to an affected area, contact your healthcare provider and tell them of recent travel.



# COVID-19 (2019-nCoV): Risk Assessment for patients presenting to general practice and healthcare settings other than receiving hospitals



#### 1 CLOSE CONTACTS:

Any individual who has had greater than 15 minutes face-to-face (<2 metres\* distance) contact with a laboratory confirmed case, in any setting.

Click <u>here</u> for further details on the definition of close contacts.

\*A distance of 1 metre is generally regarded as sufficient to minimise direct exposure to droplets however, for Public Health purposes, a close contact definition of 2 metres has been specified.

#### Interim Case Definition

In the 14 days before the onset of illness:

Been in mainland China excluding Hong Kong and Macau

OR

Contact1 with a case of COVID-19

OR

Worked in or attended a healthcare facility where patients with COVID-19 were being treated

#### AND

#### CLINICAL CRITERIA

 severe acute respiratory infection requiring admission to hospital with clinical or radiological evidence of pneumonia or acute respiratory distress syndrome

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 acute respiratory infection of any degree of severity (including at least one of the following: fever, shortness of breath or cough)

OR

Fever of unknown cause with no other symptoms

Clinicians should be alert to the possibility of atypical presentations in patients who are immunocompromised.

#### STANDARD PRECAUTIONS (SP)

Maintain at least 1 METRE
DISTANCE

# CONTACT & DROPLET PRECAUTIONS:

- Gloves
- Long-sleeved gown, if available, if not, then use plastic apron and roll up sleeves
- Eye protection (face shield or goggles)
- Respiratory protection (surgical face mask)
- Respiratory hygiene and cough etiquette

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COVID-19 UNLIKELY Proceed as clinically indicated



- ISOLATE patient away from other patients (Advice for GPs)
- 2. Initiate STANDARD CONTACT & DROPLET PRECAUTIONS
- Provide the patient with a SURGICAL MASK if tolerated
- 4. Explain the NOW and the NEXT to the patient

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CONTACT DETAILS: PUBLIC HEALTH Medical Officer Health (MoH): (OOH 0818 501999)

HSE E: 01 635 2145 HSE M: 057 935 9891 HSE MW: 061 483 338 HSE NE: 046 907 6412 HSE NW: 071 985 2900 HSE SE: 056 778 4142 HSE S: 021 492 7601 HSE W: 091 775 200

NAS: as per usual channels— (0818 501999)

- Phone PUBLIC HEALTH to DISCUSS details of the possible case
- If the patient fits the CASE DEFINITION:
- You should ALERT NATIONAL AMBULANCE SERVICE (NAS) of a possible case of COVID-19 for transfer of the patient
- NAS will contact the <u>RECEIVING HOSPITAL</u>, who will alert ED/admitting team and IPC team in advance
- Discard waste and decontaminate environment as per IPC guidelines
- Record details of all persons in the waiting room and practice team members who
  may have had potential exposure

If the patient PHONES



- If the patient fits the CASE DEFINITION:
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