Pediatric dentistry management guidelines during the confinement or quarantine stage of the COVID-19 pandemic

EMERGENCY-URGENCY DENTAL CARE

TELEMEDICINE (telephone or digital media): Presents symptoms or exposure to COVID-19

YES

Triage for Urgent Dental Care

YES

Can the dental urgency be managed with telemedicine?

YES

Delay scheduling appointment

Management at home (analgesics, antibiotics, etc.)

Favorable outcome Follow-up with telemedicine

YES

Follow-up with telemedicine until quarantine is finished

Appointment for dental treatment if necessary

NO

Refer patient for medical evaluation or testing for COVID-19

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NO

Delay treatment until authorized by medical team

Dental Pain

Mild to moderate

Dental Pain

Severe pain

Favorable outcome Follow-up with telemedicine

NO

Persistent pain, swelling, or intraoral edema

Extraoral swelling

Extraoral swelling/Cellulitis

Dentoalveolar trauma

ATTENTION

Only patients with irreversible pulpitis, pericoronitis, localized dentoalveolar abscess, painful dental fracture, alveolitis, dental trauma with avulsion or dislocation, hemorrhage should be treated. All PPE for the entire dental team must be available. Biosecurity measures must be strictly enforced. If these parameters cannot be met, the patient must be referred.

NEED FOR IN PERSON DENTAL TREATMENT IS CONFIRMED

Informed consent is sent to the parent or legal guardian

Signed Informed consent is received by the Dental team

END OF TELEMEDICINE, APPOINTMENT IS SCHEDULED AT THE DENTAL OFFICE
IN-PERSON URGENT DENTAL TREATMENT

DENTAL TEAM:
All the dental team must have complete an appropriate personal protective equipment (PPE)
Appointments must be made on an individual basis and punctuality must be met

PATIENT AND COMPANION:
Must keep social distancing of 2 meters. At the office must use masks, wash hands and face. The patient must enter the operatory room alone or with a maximum of one companion

Choose to perform treatments that minimize aerosol production

Disinfection of all surfaces and equipment with 70% alcohol, 0.1% chlorine or medical disinfectant. Dental chair should be near natural ventilation and sole light, covered with plastic film.

Procedure that will generate aerosols

Low risk: Dentist and assistant with disposable basic PPE (surgical mask, eye protection, facial shield, hair cover, surgical boots, isolation gown, gloves)

Moderate to high risk: Dentist and assistant with disposable PPE (N95* respirator, eye protection, facial shield, hair cover, surgical boots, isolation gown, gloves)

Donning on PPE: wash hands, booties, hair cover, isolation gown, N95* respirator or surgical mask, eye protection, facial shield, hand sanitation, gloves.

PATIENT: Rinse or clean mouth with 1% hydrogen peroxide or 0.2% povidone-iodine. Protective barriers (hair cover, eye protection, surgical field if necessary)
The patient must keep proper cooperation throughout all the treatment procedure
Refer uncooperative patients for conscious sedation or General Anesthesia

Four-handed dentistry with high suction. Minimize the use of rotatory handpieces. Use rubber dam when possible. Keep the door of the dental operatory room closed.

After finishing the procedure: use air disinfectant spray. Remove plastic film from dental chair. Dispose of waste is appropriate containers. Cleansing of rotatory handpieces (submerge in soapy water and activate for 2 minutes), wash instruments with liquid soap and chlorine, sterilization of all instruments in autoclave. Cleansing of all surfaces in a 2 meter radius from the dental chair with 70% alcohol, 0.1% chlorine or medical disinfectant.

Removal of PPE: in the following order: wash hands, facial shield, isolation gown, sanitize hands, eye protection, surgical mask or N95* respirator, sanitize hands, hair cover, booties and gloves. Wash hands and face after each procedure.

PATIENT: Remove barriers. Exit the operatory room. Wash hands and face. Keep social distancing of 2 meters in external areas.

Patient follow-up with telemedicine until quarantine is finished

If contamination or contact with COVID-19 is suspected, all dental team must keep 14 day quarantine and COVID-19 testing should be performed.