



Reopening New York

Dentistry Guidelines for Employers and Employees

These guidelines apply to all dental care activities, including emergency and non-emergency/elective care statewide. References to dental healthcare personnel (DHCP) include dentists, dental hygienists, dental assistants, dental laboratory technicians, students and trainees, contractual personnel, and other persons not directly involved in patient care but potentially exposed to infectious agents (e.g. administrative, clerical, housekeeping, maintenance, or volunteer personnel), per [CDC guidelines](#).

During the COVID-19 public health emergency, all owners/managers of dentistry facilities should stay up to date with any changes to state and federal requirements related to dentistry activities and incorporate those changes into their operations. This guidance is not intended to replace any existing applicable local, state, and federal laws, regulations, and standards.

	Mandatory	Recommended Best Practices
Physical Distancing	<ul style="list-style-type: none"> ✓ Ensure 6 ft. of distance between individuals, unless safety or core function of the work activity requires a shorter distance (e.g. provision of care during dental visits and procedures). ✓ Modify or restrict access to any waiting area seating, as needed, to allow for 6 ft. of distance between individuals in all directions (e.g. spacing chairs, instructing people to sit in alternating chairs). ✓ Ensure adequate social distancing in small areas, such as restrooms and breakrooms, with appropriate signage and systems (e.g. flagging when occupied) to restrict occupancy. ✓ Limit in-person employee gatherings (e.g. meetings) as much as possible. 	<ul style="list-style-type: none"> ✓ Practice the following dental activities in accordance with CDC guidance <ul style="list-style-type: none"> • Make sure that all unused supplies and dental instruments are appropriately covered and stored (e.g. closets, drawers, cabinets). • Set up patient rooms so that only necessary sterile equipment is accessible. Any supplies or equipment that are exposed but not used should be considered contaminated. • Attempt to limit or avoid aerosol-generating procedures whenever possible (e.g. avoid dental handpieces, air/water syringe, ultrasonic scalers) and prioritize hand instruments and minimally invasive/atraumatic restorative techniques. If aerosol-generating procedures are necessary, take precautions to minimize exposure (e.g. four-handed dentistry, high evacuation suction, dental dams, and limited personnel for procedure support). • Maintain appropriate ventilation systems to provide adequate air movement from clean to contaminated areas, refer to the CDC guidelines and OSHA recommendations for additional details on HVAC setup and appropriate air filtration. ✓ Limit dental care to as few patients as can safely be treated simultaneously with appropriate distancing, whenever possible. ✓ Post social distancing markers using tape or signs that denote 6 ft. of spacing in commonly used and other applicable areas (e.g. health screening stations, breakrooms, check-in areas). ✓ Advise patients to limit accompanying visitors to dental appointments, to the extent possible. ✓ Encourage visitors to wait outside or in vehicles until their designated appointment time.



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	Mandatory	Recommended Best Practices
Physical Distancing (cont'd)		<ul style="list-style-type: none"> ✓ Minimize overlapping appointments to reduce density of individuals in facility. ✓ Conduct tele-dentistry options where appropriate for non-emergency consultations to potentially minimize in-office care, in accordance with CDC guidelines and OSHA recommendations.
Protective Equipment	<ul style="list-style-type: none"> ✓ Ensure that patients and accompanying visitors wear face coverings at all times when in the dental facility (including in elevators, lobbies, and waiting areas), except when undergoing dental procedures. Acceptable coverings include at minimum cloth face coverings or surgical masks that securely cover nose and mouth. ✓ Procure an adequate supply of necessary PPE and provide employees with acceptable and appropriate PPE at no-cost to the employee. ✓ DHCP must wear appropriate PPE when providing care to patients, in accordance with appropriate OSHA standards, including surgical masks, eye protection, gloves, and protective clothing, when performing any dental procedures that do not generate aerosols. <ul style="list-style-type: none"> • For aerosol generating procedures, providers should wear a properly fit-tested, NIOSH-certified, disposable N95 or higher-rated respirator, eye protection (e.g. goggles, face shield) gloves, and gowns. ✓ Establish policies for PPE removal and replacement for before and after DHCP see patients. DHCP must follow CDC recommendations for donning and doffing PPE. For example, when removing potentially contaminated PPE such as face mask or N95 respirator, do not touch the outside of the mask without wearing gloves. Always perform hand hygiene before and after using PPE. ✓ Staff with duties unrelated to patient care, such as clerical staff, must also wear appropriate face coverings at all times. 	<ul style="list-style-type: none"> ✓ Advise patients and visitors in advance to wear appropriate face coverings. ✓ If patients arrive at dental facility without appropriate face coverings, provide face coverings if supplies are adequate or ask patient to reschedule and return with an appropriate face covering. ✓ Remind patients to wear appropriate face coverings in shared spaces before entering/exiting the facility (e.g. lobby, corridors, elevators). ✓ Install touchless appliances, such as contactless soap/towel dispensers and contactless trash cans.



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	Mandatory	Recommended Best Practices
Hygiene, Cleaning, and Disinfection	<ul style="list-style-type: none"> ✓ Adhere to hygiene and sanitation requirements from the Centers for Disease Control and Prevention (CDC) and Department of Health (DOH) and maintain cleaning logs on site that document date, time, and scope of cleaning. ✓ DHCP must wait at least 15 minutes after completion of dental procedures to allow potential contagious droplets to sufficiently fall from the air before beginning cleaning and disinfecting of surfaces in the dental operator per CDC Guidance on Generation and Behavior of Airborne Particles. ✓ Staff that clean and disinfect operator must wear, at minimum, gloves, surgical mask, and eye protection, such as goggles or face shield. ✓ Provide and maintain hand hygiene stations on site, including handwashing with soap, water, and paper towels, as well as an alcohol-based hand sanitizer containing 60% or more alcohol for areas where handwashing is not feasible. ✓ Make hand sanitizer available throughout common areas. It should be placed in convenient locations, such as at entrances, exits, waiting areas. Touch-free hand sanitizer dispensers should be installed where possible. ✓ Conduct regular cleaning and disinfection of the facility and restrooms, and more frequent cleaning and disinfection for high risk areas used by many individuals and for frequently touched surfaces. ✓ Ensure that equipment and tools are regularly cleaned and disinfected using hospital grade disinfectant. Refer to the OSHA recommendations, and the Department of Environmental Conservation (DEC) list of products registered in New York State and identified by the EPA as effective against COVID-19. 	<ul style="list-style-type: none"> ✓ Remove any frequently touched objects that cannot be cleaned and disinfected regularly (e.g. toys, magazines, pens). ✓ Place signage near hand sanitizer stations indicating that visibly soiled hands should be washed with soap and water; hand sanitizer is not effective on visibly soiled hands.



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	Mandatory	Recommended Best Practices
Hygiene, Cleaning, and Disinfection (cont'd)	<ul style="list-style-type: none"> ✓ Provide for the cleaning and disinfection of exposed areas in the event an individual is confirmed to have COVID-19, with such cleaning and disinfection to include, at a minimum, all heavy transit areas and high-touch surfaces (e.g. elevators, waiting areas, entrances, badge scanners, restrooms handrails, door handles). ✓ Place receptacles around the dental facility for disposal of soiled items, including PPE. ✓ Prohibit shared food and beverages among employees (e.g. self-serve meals and beverages), encourage employees to bring lunch from home, and reserve adequate space for employees to observe social distancing while eating meals. 	
Communication	<ul style="list-style-type: none"> ✓ Affirm you have reviewed and understand the state-issued industry guidelines, and that you will implement them. ✓ Institute a training plan to educate all staff on new practices and responsibilities before re-opening or expanding operations. ✓ Post signs throughout the dental facility, consistent with DOH COVID-19 signage, reminding individuals to maintain physical distance, wear appropriate face coverings, follow hand hygiene and cough etiquette, and report symptoms of COVID-19. ✓ Notify the state and local health departments immediately upon being informed of any positive COVID-19 test result by an DHCP at their facility. ✓ Cooperate with state and local health department contact tracing efforts. ✓ Conspicuously post completed safety plans on the premises of the workplace. 	<ul style="list-style-type: none"> ✓ Consider developing webpages, text and email groups, and social media as a means of communicating about new COVID-19 measures and practices. ✓ Develop a communications plan that includes applicable instructions, training, signage, and a consistent means to provide individuals with updated information.



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Screening	<ul style="list-style-type: none"> ✓ Implement mandatory health screening practices (e.g. questionnaire, temperature check) for DHCP, patients, and visitors, asking about (1) COVID-19 symptoms in past 14 days, (2) positive COVID-19 test in past 14 days, and/or (3) close or proximate contact with confirmed or suspected COVID-19 case in past 14 days. ✓ Immediately notify state and local health departments of confirmed positive cases and provide the individual with information on healthcare and testing resources. ✓ Designate a central point of contact, which may vary by activity, location, shift or day, responsible for receiving and attesting to having reviewed all questionnaires, with such contact also identified as the party for individuals to inform if they later are experiencing COVID-19-related symptoms, as noted on the questionnaire. ✓ Require DHCP to immediately disclose if they begin to experience symptoms, including outside of work hours. 	<ul style="list-style-type: none"> ✓ Dental treatment for an individual who screens positive for COVID-19 symptoms should be deferred if possible and patient is not in need of urgent dental care. If emergency dental care is necessary, conform to CDC's Interim Infection Prevention and Control Recommendations or refer to a facility that has appropriate engineering controls in place to take care of the patient. ✓ Maintain a daily log of all DHCPs and visitors who may have had close or proximate contact with other individuals in the in the facility; excluding deliveries that are performed with appropriate PPE or through contactless means. Encourage but not require patient and visitor information as part of this log. ✓ Perform screening practices remotely (e.g. by telephone or electronic survey) to the extent possible. ✓ Refer to CDC guidance on "Symptoms of Coronavirus" for the most up to date information on symptoms associated with COVID-19. ✓ Refer to DOH guidance regarding protocols and policies for employees seeking to return to work after a suspected or confirmed case of COVID-19 or after the employee had close or proximate contact with a person with COVID-19. ✓ Screeners should be trained by individuals familiar with CDC, DOH, and OSHA protocols and wear appropriate employer-provided PPE, including, at a minimum, a face mask.