When should you go to the dentist during COVID-19's spread?

March 23 2020, by Mary Kate Brogan

VCU School of Dentistry dentists manage emergency care in the VCU Dental Care clinic. Credit: Allen Jones, University Relations

Routine dental procedures are important to overall health. But with the continued spread of the COVID-19 virus, the novel coronavirus, the

American Dental Association is recommending postponing elective dental procedures.

David Sarrett, D.M.D., dean of Virginia Commonwealth University's School of Dentistry and associate vice president for health sciences, has been among the leaders speaking up about the importance of dental practices scaling back to focus on urgent and emergency care and taking greater precautions during COVID-19's spread.

Sarrett is a fellow in the American College of Dentists and a member of the ADA and the American Dental Education Association, among others. He has been a national leader with the ADA and currently serves on the Virginia Dental Association Board of Directors.

Sarrett shared his expert opinion this week in a video conversation with the Virginia Dental Association and answered questions. After speaking to his fellow dentists, Sarrett spoke with VCU News about when patients need to go to the dentist for emergency care and what dental practices can do to reduce the spread of COVID-19.

How were decisions made about recommendations to postpone elective dental procedures?

I am a member of the Virginia Dental Association Board of Directors. This past Sunday, as we were planning to stop elective dental care, the board held an emergency conference call. Members of the board had been in touch with ADA leadership or attending meetings at the ADA offices in Chicago. These board members recommended the closure of dental offices across Virginia for elective and routine dental care and only providing urgent care. I reported that we would support that 100%, based on our decision to shift VCU Dental Care's practice to urgent- and emergency-only care.

The ADA recommendation came after the Virginia Dental Association and other states, such as Ohio, were already recommending this. I feel the VDA was a leader on this issue.

What does the ADA's decision to recommend postponing elective procedures mean for patients?

Assuming dentists comply, or this becomes mandated by governments, they will have to delay most of the planned dental work and preventive visits. VCU Dental Care has developed a list of urgent care issues to determine if it is appropriate to treat the patient or delay treatment. This list can be found on our patient care website: vcudentalcare.com/covid19.

What kinds of dental procedures qualify as emergencies?

VCU Dental Care is now restricting treatment to urgent or emergency care only. We define this as:

- Severe toothache pain (on a pain scale of 1 to 10, a 5 or more that has lasted more than 24 hours)
- New or recent swelling of your gums or face (within the past three to seven days)
- Bleeding in your mouth that does not stop following tooth extraction or gum surgery
- Tooth infection
- Recent trauma (a broken tooth causing pain)

If I'm a patient, when should I go to the dentist while COVID-19 continues to spread?

The examples we have provided are a good place to start. There are

some other areas that are unique, such as orthodontic emergencies with loose wires (on braces) that can be sharp. Each practice will have to develop their own list. The additional ADA recommendations are more detailed and will help dentists develop a plan. What is most important is minimizing the number of patients brought to the office and minimizing the number of aerosol-producing procedures that create droplets. We learned this week that the virus may stay alive in the air for three hours. This is particularly worrisome for dentists.

What is VCU Dental Care doing to screen patients, and how should other dental practices follow suit?

We screen and evaluate VCU Dental Care patients who are coming for urgent care by asking a series of questions based on the most current risks and by taking patients' and employees' temperature at the entrance to our building. We are taking this step to protect our patients and slow the spread of COVID-19 by reducing the number of in-person exchanges. The decision also allows us to increase our ability to care for those with emergency dental needs. We are evaluating our procedures daily as new information is learned. This is not a one-and-done process.

That is what dental offices will need to be doing. There's that factor of you, as a dentist, actually getting sick by delivering treatment, but then just bringing people together in a waiting room does not support social distancing, which we've seen as a crucial preventive measure against this threat. Even if people are not sick, when they come in and somebody is a carrier, you've increased your risk just by being around other people. Every time you can keep people away from each other, it prevents the likelihood of another spread.

Is there anything else you think people should know about COVID-19?

Now is the time for the nation to hunker down and slow the community spread. We are hearing that many non-urgent medical visits and procedures are being postponed. This is to reduce the virus spread by keeping people away from each other and to preserve medical resources for sick patients. Practice frequent hand hygiene. Cold water and any soap works. The good news is that this virus is very easy to kill with soap and water, alcohol and bleach.

Provided by Virginia Commonwealth University