

Good Afternoon members of the Task Force Committee and guests, I thank you for allowing me to present today.

My name is Myra Nikitas I am the president of the New Hampshire Dental Hygiensit Association, as well as practicing dental hygienist in NH. As you know my concern with many other dental professionals we are a high-risk profession in the spread of the covid 19 virus. I would like to review the concerns weighing on the safety of opening dental offices too soon.

- 1. Our environment dictates that we cannot readily go back to work like many other businesses that can practice social distancing and proceed.
- The practice of dentistry involves the use of rotary dental and surgical instruments such as handpieces or ultrasonic scalars for cleanings. These instruments create a visible spray that contains large particle droplets of water, saliva, blood, microorganisms, and other debris. This spatter travels and settles quickly, landing on floor, nearby operatory surfaces, the practitioner, and or the patient. Keeping in mind the virus has been shown to survive for hours in aerosols, and survive on surfaces for days. This is concerning because of the indications that patients maybe able to spread this virus while asymptomatic. It should be assumed that all patients could transmit disease.
- 2. Dental offices commonly adhere by the OSHA recommendations and guidelines. As well as the CDC, with disinfectants and sterilization procedures and protocols. We have a know motto in dentistry to treat all patients as if they were infected with disease and use universal precautions- HOWEVER...
- 3. The best avaible PPE at the moment is scarce. While N95, and KN95 masks remain in back order, level 3 –surgical masks protect mucous membranes of the mouth and nose from droplets, but they do not provide complete protection against inhalation of air borne infectious agents, such as covid 19. The CDC recommends a face shield if the best available is a level 3 mask. And if that is unavailable then CDC recommends referring patient to a provider that has the appropriate ppe. While most offices currently only have level 2 masks which again only provides a barrier for fluids. Eye protection, and face shields, gowns, hair covering, are all on back order at this time, quantities are limited.

- 4. The wellness and safety of our patients and ourselves is our priority, we are learning day to day what changes to make within our profession, The Dental hygienists association, the ADA follow the recommendations of the CDC and OSHA guidelines on the protocols and procedures. the Proper PPE, handwashing station for patients, no waiting room, pre health screening call to patient including review of MED HX, temperature check, these are a few of procedures and protocols, however this is still a work in progress. We want to make sure that the patient feels comfortable at the dental office and understands we are taking ever measure to ensure their safety.
- 5. There is a lot of information regarding different equipment that may aid in reducing aerosols in the dental setting, such as air purifying systems, high evacuation suction, possibly a UV light which may aid in killing the virus on surfaces, a high grade professional disinfectant, BIO Surf? But again things that are developing daily. The cost of a dental practice to purchase additional PPE and certain equiptment is expensive. This type of investment is a strain financially to dental practices however the employees must feel safe to return to work, and safely treat patients.

As a concerned dental health care provider I feel it be considered to Continue to postpone elective dental treatment, surgeries and non urgent dental visits including dental cleanings, restorative procedures limited to cosmetic/aesthetic treatment, dentures, all orthodontic procedures including delivery of aligners, anything that does not address infection, or pain.

Phased approach- last phase more PPE availability for dental practices. Alo tof changes need to be enforced to dental practices so we can feel safe and safely treat patients with the recommended equipment modifications.

At this time we do not feel safe to return to work and safely treat patients. If dental offices open too soon with out the proper PPE available then we will be adding to the rising numbers of those contracting the virus. If a phased approach is considered than we will be able to make modifications in a timely manner that appropriately adheres to the guidelines of the CDC and allows us access to the proper PPE.

We want to make sure that when and if dental offices resume elective treatment that the Dentists understand that we can not continue to treat the number of patients daily prior to covid. That they understand this is not a time to jam the schedule and recuperate lost revenue. There needs to be a limited number of appointments for patients to ensure proper disinfection and sterilization, for the safety of all. The enthusiasm for our profession has declined due to the uncertainty of our future in dental hygiene. However, I am certain that if we all work together in creating a pheaseable way to ensure patient and employee safety we will develop a new normal and resume patient care. I am more than willing to help with this in a phased approach if needed.

PHASE 1- NOW Through May 15, 2020 Dentists may preform emergency/urgent care procedures only

Phase 2- May 15-May 31, 2020 Dentist may preform essential services.

Phase 3 June 1-June 15 2020 Dentist may perform Non essential services to low risk patients only.

Phase 4- June 15- June 29 2020

All elective procedures allowed for all patient categories

Thank you, Myra Nikitas, RDH President, New Hampshire Dental Hygienist Association