Dental Office Closures for Non-Essential Services
(PPE/Exposure)

1) Is the MDA going to adopt the same recommendation as the CDC, ADA, and MDHHS of 3 WEEKS of only urgent care? It would be nice if everyone was on the same page.

The Board of Trustees met on March 24 and agreed that the MDA would support the governor’s Executive Order that mandates only essential services in the dental office.

2) Surely if closing the office has been recommended for health and safety, forcing staff to work is violating OSHA?

Offices may be open for essential care, and it could be considered a violation of OSHA to force staff to work. One of your employees would have to file a complaint. I would suggest asking your staff if they are willing to come in and assist with emergencies, don’t mandate it. Understand these are uncertain time with fear and panic. An ask is much better received than and mandate to work. For more information about preparing for COVID-19 from OSHS, click here: [https://www.osha.gov/Publications/OSHA3990.pdf](https://www.osha.gov/Publications/OSHA3990.pdf)

3) The biggest question is, how do we know that it’s all clear? What represents a safe work environment, for staff, doctor and patients? Rapid testing at our door step?

This question is yet to be answered. We are sure this will forever change the way we practice dentistry in the future. Time will tell us what the new protocols will be. Governor Whitmer’s office will give us the “all clear” to treat non-essential care, but we don’t now how this will be delivered to the dental/medical field.

4) What happens if an employee tests positive for COVID-19?

The employee cannot be in the workplace under cleared; more information is available from the CDC here: [https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/hcp-return-work.html](https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/hcp-return-work.html) You would also need to inform the rest of your dental team and the patients treated, while still complying with HIPAA.

5) If an employee states they have been in contact with a COVID-19 patient, should we require self-quarantine and would they be entitled to unemployment benefits?

Yes to both, see the CDC guidelines and the FAQs on HR issues.

6) It was my understanding the HIPAA regulations have been temporarily lifted. Is this true?

No, not to our knowledge.
7) OSHA has a statement on their website that we all should be using n95 masks to be treating our emergencies. Level 3 no longer ok?

Level 3 is ok if your patient does not exhibit symptoms and does not think they are exposed. N95 are for confirmed cases, if you can secure one.

8) The hard science shows that we do not have adequate PPE (ie N95 masks) and a zero-pressure chamber to prevent the spread of the virus-laced mist that hangs in the air for hours.

This is why non-essential treatment has been suspended. We are also asking dentists to try to avoid the use of high-speeds if possible.

9) Are age-related discrimination issues only for Team Members? Is it ok to say we only will see patients under a certain age for a time?

No. We are asking you to see patients for essential treatment only and try to avoid high-speed handpiece use. If you can’t or are unwilling to see older adults, please find another dentist in your area that can see them for Essential treatment only. We are asking dentists to use their best judgment and go by the guide we distributed “Essential vs. Non-essential treatment.”

10) For the offices still open, can you elaborate on what is considered elective vs emergency care? Reschedule most fillings and crowns unless causing pain?

We have developed an guidelines that address this at https://www.michigandental.org/Member-Center/Coronavirus-Update.

11) If this persists longer than 2-3 weeks, how are you expecting dental offices to survive? Especially newer offices who may have practice loans/student loans etc.?

We are compiling information for new dentists on how they can apply for assistance. Some of these were linked in the letter from the President that was sent on March 20. As more information becomes available, we will place it on www.michigandental.org. We are also planning on sending a letter to the new dentists to address some of their specific questions.

12) What are the ramifications if we continue to stay open to elective treatment?

This is now an EO from the Governor. You are risking an ethics violation, loss of licensure, and/or criminal charges.

13) Can I get the patient’s health history if they are seeking emergency treatment?

Yes, have the patient fill out a history form, then consult via teledentistry and code appropriately (D0140). That makes them a patient of record, and if appropriate, you can prescribe an antibiotic w/anti-inflammatories and Tylenol.

14) I did not receive the email from the ADA about what is considered elective vs non-elective. How can I get that information?

Visit https://www.michigandental.org/Member-Center/Coronavirus-Update

15) Can I take patient’s temperature?

Yes.