**Prevention of transmission**

The dental team in Germany is subject to strict hygiene regulations, which contribute to a correspondingly high level of protection in the practices, regardless of the current situation. These hygiene regulations assume that potentially infectious patients (viruses and bacteria, such as measles or HIV) regularly come to the dentist's office for treatment. The regulations apply equally to every practice, every dentist, every employee.

In addition, the following should be observed for the health protection of patients and the employees in the surgeries in order to prevent infection / transmission with SARS-CoV-2:

* During the entire patient treatment glasses / if necessary. Protective visors / shields, mouth-nose protection, gloves and possibly protective gowns worn. The barrier function of the protective clothing can only be guaranteed if it is properly seated and adherence to grip discipline.
* During the breaks in treatment, the recommended minimum distances between employees should be observed.
* Every patient should be asked for COVID-19 symptoms from the past two weeks by telephone before the visit to the dentist and again when entering the practice.
* Any physical greeting should be avoided.
* Patients should be encouraged to disinfect their hands 1. after entering and 2. before leaving the practice.
* Every employee in the ZA practice should wear mouth-nose protection - also when talking to each other.
* Reception areas can be protected by a liquid-tight partition.
* The number of people waiting should be limited as far as possible so that they can keep a reasonable distance.
* Treatment plans and appointments should be arranged so that the distance rules in the reception and waiting area can be observed.
* Accompanying adults of adult patients should wait outside the practice.
* Patients should be encouraged to touch as few surfaces as possible. This also applies to door handles, for example.
* Magazines and toys should be removed from the waiting area.
* Team meetings should take place regularly. So that necessary measures and routines can be discussed, questions can be clarified and adjustments can be made if necessary.
* Employees with COVID-19 risk factors for severe courses should be removed from patient contact / sent home and - where possible - sent to the home office.

**Prevention of aerosols**

There is no evidence of aerosol transmission.
For reasons of preventive health protection, the formation and spread of aerosols should nevertheless be avoided. First of all, this should be done by efficient, high-volume suction (four-handed work). The focus is on effective suction technology. The following should also be taken into account:

* Avoid the use of ultrasonic handpieces, piezoelectric operated ultrasound and surgical devices.
* Avoid using powder jet devices (eg "Air-Flow").
* Avoid using turbines.
* Antiseptic mouthwashes can help minimize infection transmission.

Depending on the type and extent of exposure and the risk of infection, wear appropriate personal protective equipment consistently and properly. The additional use of visors / protective shields in dental treatment can further increase safety.

**Treatment of patients for whom there is no urgent suspicion of being infected with SARS-CoV-2**

For the dental treatment of patients for whom there is no urgent suspicion of being infected with SARS-CoV-2, protective goggles or visors and mouth-nose protection (MNS) offer a barrier function against the infection transmission of the viruses by droplets.
It is important that these protective agents as well as gloves and possibly protective gowns are worn over the entire treatment period.

* During the entire patient treatment glasses / if necessary. Protective visors / shields, mouth-nose protection, gloves and possibly protective gowns worn.
* The barrier function of the protective clothing can only be guaranteed if it is properly seated and adherence to grip discipline.
* Sufficient suction is strictly observed. Aerosol formation is avoided as far as possible.
* A rubber dam is an effective barrier against the microorganisms in the mouth and throat.

## Risk groups

Any form of treatment for high-risk groups (senior citizens, multimorbid patients, immunosuppressed or immunocompromised patients or other health impaired patients) should be reduced to an absolutely necessary level, especially to avoid contacts in the waiting room or in the practice.

**Treatments for infected people
and patients suspected of having COVID 19**

The treatment of patients who already show symptoms of an acute respiratory disease of the lower respiratory tract (cough, fever, chills, headache and body aches, difficulty breathing and shortness of breath, fatigue, loss of appetite) should be postponed to the period after the end of the disease, if it is not an emergency.

To ensure the diagnosis, these patients should be referred to the general practitioner or the emergency services on tel. 116117.

In order to counter the spread of the virus, patients should be informed by appropriate measures (e.g. homepage, notices on and in the practice that they should contact the practice first if they have respiratory infections or if they belong to a risk group).

[Practice notice STOP](https://www.bzaek.de/fileadmin/PDFs/b/STOP-.pdf)

**Dental treatments that cannot be delayed**

Additional precautionary measures must be taken in accordance with BioStoffV and GefStoffV for dental treatments that cannot be postponed, for patients suffering from COVID 19 or suspected of having it.

* Spatial or organizational separation of the patients suffering from COVID 19 from the patients of the normal consultation hour,
* Personal protective equipment for the personnel
	+ Safety glasses with side shields;
	+ Respirator FFP2;
	+ non-sterile gloves;
	+ long-sleeved liquid-tight protective gown, hood and, if necessary, socks;
	+ for cleaning work protective gloves according to DIN EN 374 with longer cuffs,
* Stop the patient, disinfect their hands after entering the practice and then lead them directly to the treatment room, hand out mouth and nose protection for the waiting period,
* Encourage patients to disinfect their hands before leaving the practice
* Remove protective clothing contamination-free after treatment.

[Schedule for putting on and taking off personal protective equipment](https://www.bzaek.de/fileadmin/PDFs/b/Ablaufplan_An_Ablegen_Schutzausruestung.pdf)

[RKI: Information on the example of putting on and taking off PPE for specialist personnel](https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/PSA_Fachpersonal/Dokumente_Tab.htm)

Emergency care for infected and quarantined patients should be organized as specially designated clinics or specialist practices as dental treatment centers. Please contact your KZV.

## Assessment of the danger

The Bundeszahnärztekammer sees responsibility for the health and well-being of its employees as well as patients and dentists in the dental practices.

It is her concern to realistically assess the risk situation regarding corona infections.

The information available from Wuhan (China), Italy and South Korea indicates that there is no evidence of any particular infection risks in dental practices and for the dental treatment team itself.

In contrast, there are thousands who have become infected in the general medical field, ENT and ophthalmology were particularly affected. The Chinese colleagues attribute the extremely low infection rate in the dental field to the consistent implementation of classic protective measures.

Against this background, the dental teams are not the most vulnerable group and not "hotspots" or "superspreaders" as is often claimed.