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# **Korean Dental Association(KDA)' s current states and countermeasure against the COVID-19**

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2020. 4



◆ **Interim Guidance for Clinics and Healthcare Facilities**

The KDA and our members are following Government's guidance for Clinics and Healthcare Facilities to protect and prepare for an outbreak of COVID-19. We are promoting the guidance via KDA official website, press release to make sure our members can refer to their works. In section below is the summary of the guidance.

A. Interim Guidance for Clinics

- Attach posters for entrance of Clinics
- Terms of compliance for a medical teams
- How to behave in patient care

B. Compensation plans for loss in Clinics

C. Emergency procedures in COVID-19 Screening Center

(Operation guideline of COVID-19 Screening Center)

D. Requested terms of Clinics and medical teams

E. A general outline of COVID-19 and definition of the cases

F. Special operating procedures for the containment and disposal of regulated medical waste

G. The present condition of COVID-19 screening center

H. The others

- Environmental management and restraint of unnecessary outsiders (visitors)
- Work exclusion of healthcare personnel who have been to China
- Disinfection and reopen business of the clinics which had been visited by confirmed cases of COVID-19

◆ **Interim Guidance for Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with COVID-19**

If the Clinic has been visited by COVID-19 patient, disinfection and closing are called by local community health center. Reopen of Clinic should begin after proper disinfection procedure. (Korean Government's Guidance are following based on CDC data as

below.)

Epidemiologic risk factors	Exposure category	Recommended Monitoring for COVID-19 (until 14 days after last potential exposure)	Work Restrictions for Asymptomatic HCP
<b>Prolonged close contact with a COVID-19 patient who was wearing a facemask (i.e., source control)</b>			
HCP PPE: None	Medium	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing a facemask or respirator	Medium	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing eye protection	Low	Self with delegated supervision	None
HCP PPE: Not wearing gown or gloves <sup>a</sup>	Low	Self with delegated supervision	None
HCP PPE: Wearing all recommended PPE (except wearing a facemask instead of a respirator)	Low	Self with delegated supervision	None
<b>Prolonged close contact with a COVID-19 patient who was not wearing a facemask (i.e., no source control)</b>			
HCP PPE: None	High	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing a facemask or respirator	High	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing eye protection <sup>b</sup>	Medium	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing gown or gloves <sup>a,b</sup>	Low	Self with delegated supervision	None
HCP PPE: Wearing all recommended PPE (except wearing a facemask instead of a respirator) <sup>b</sup>	Low	Self with delegated supervision	None

HCP=healthcare personnel; PPE=personal protective equipment

<sup>a</sup>The risk category for these rows would be elevated by one level if HCP had extensive body contact with the patients (e.g., rolling the patient).

<sup>b</sup>The risk category for these rows would be elevated by one level if HCP performed or were present for a procedure likely to generate higher concentrations of respiratory secretions or aerosols (e.g., cardiopulmonary resuscitation, intubation, extubation, bronchoscopy, nebulizer therapy, sputum induction). For example, HCP who were wearing a gown, gloves, eye protection and a facemask (instead of a respirator) during an aerosol-generating procedure would be considered to have a medium-risk exposure.

(<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html>)

◆ **Suppliance of the Public Mask and Alcohol**

Due to the lack of the public mask, Associations in the field of medical(e.g. Korean Dental Association, Korean Medical Association, The Association of Korean Medicine) are secured by allocating the mask suppliers under the government. The healthcare personnel, therefore, can be supplied with the masks from each association. Dental masks and KF94 masks are provided to the dentists by the KDA and the dentists are sharing the masks with their dental team. In just three weeks, we faced with a definite shortage of the mask. However it is now on steady state.

In addition, KDA started to sell the masks and alcohol to the dentists by opening the online shop. Per dentist can purchase total 80 masks, 50 of dental masks and 30 of KF94, together with 18 liter of alcohol so the four sets of 4 liter of alcohol can be purchased at the moment.

◆ **Ministry of Health and Welfare(MOHW) COVID-19 Official Website Link**

<http://ncov.mohw.go.kr/en/>