Question: Can a KN95 be used as a surgical mask?

Yes. A KN95 can be used as a surgical mask because it is technically a higher level of filtration to a Level 3 mask, assuming the quality is as advertised. The board recommends being cautious with KN95 masks and reviewing FDA guidance, either for use as a surgical mask or in lieu of a respirator. The ADA has a tip sheet on how to avoid counterfeit masks: https://success.ada.org/~media/CPS/Files/COVID/ADA_TipsToAvoidCounterfeitMasks.pdf?utm_source=sl-societies&utm_medium=sl-wuw&utm_content=cv-counterfeitmask&utm_campaign=covid-19

Question: The FDA approval list related to KN95’s is changing constantly. If I have purchased KN95 masks that are no longer on the list, what should I do?

Use your professional judgement and act in good faith. If you feel the product you have is reputable, and from a reputable supplier, you may use it.

Question: Could you provide guidance on performing elective dental procedures on patients who are at high-risk of severe COVID-19 illness (e.g., aged 65 years and older, chronic lung disease) Are there any treatment modifications we should exercise in our practice to better protect this vulnerable population?

The Board recommends deferring elective care for those who are considered high-risk.

Question: Restaurants and other businesses can only open at 50% and we’re to avoid large gatherings when at those places. Is there any rule or recommendations for dental offices? My office has about 30 people (front desk, hygiene, assistants, and doctors) on any given day. Then adding in patients for everyone can easily get us to 40-50 people at one time.

The Board guidelines do have any requirements related to this. Offices should try to keep everyone 6 feet apart if possible and limit any unnecessary people being in the building. Consult the ADA Return to Work Interim Guidance for additional recommendations.
Question: The PPE Order provides more leniency in terms of extended use of PPE, than the Board’s guidelines. Who do we follow?

The Board guidelines supersede if there is a conflict.

Question: If I want to use our respirator considerably less than 48 clinical hours is that okay given the shortage issues?

Yes. All practitioners should decrease their demand for PPE, but practitioners are not required to extend the use of PPE if the demand does not exceed their supply.

Question: Can you autoclave respirators?

Autoclaving respirators is one option for decontaminating to extend use to a maximum of 48 clinical hours. IDPH has the following guidance: https://idph.iowa.gov/Portals/1/userfiles/7/Mask%20Re-use%20Guidance%2004-02-2020%20.pdf. This document has internal links with more specific information on decontamination, including information on autoclaving.

Question: Which patient rinses should be used?

Peroxide is recommended because it has shown to effectively reduce viral load. However, Peridex also has antiviral capabilities and would be a good substitute if peroxide is unavailable.

Question: Do the new board guidelines apply to emergencies?

Yes.

Question: What level of surgical mask is required when covering a respirator?

A Level 3 provides the most protection, but a Level 1 or Level 2 is permitted.

Question: When using a single respirator with multiple patients are we required to cover with a surgical mask AND full face shield?

No. While the Board recommends using a surgical mask over a respirator at all times, this is not required per the guidance. A surgical mask or full face shield can be used.