



Australian Society
of Orthodontists

Return to level 2 restrictions

Guidelines for orthodontists as at 27 April 2020

The AHPPC has endorsed Level 2 restrictions as set out in the [ADA Dental Service Restrictions in COVID-19 Document](#).

The ASO endorses the [Practical Advice for stepping back to Level 2 Restrictions](#) released by the ADA.

Further to this information, based on the situation today, the ASO recommends the following (please note the situation is still changing and information may change accordingly):

1. Members should continue to defer any non-urgent or non-critical treatment procedures that are likely to produce aerosols.

Aerosols are produced by dental equipment when water and air are mixed.

The following dental equipment is known to produce aerosols and therefore cannot be used under Level 2 restrictions:

- Prophy handpieces
- Dental handpieces with water spray – including low speed/intermediate speed/high speed/surgical
- Triplex syringes when water and air are used together
- Ultrasonic scalers
- Piezo surgical handpieces
- Hard tissue lasers that use water mist spray
- Particle beam jets/air-polishers
- Air-abrasion units

2. If aerosol-producing procedures are to be undertaken, the use of a dental dam is mandatory.

This condition applies to all procedures, including the removal of orthodontic adhesive remnants or attachments (Composite resin/Glass Ionomer resin etc) using the above listed equipment.

If a dental dam cannot be used, and aerosols will be produced, the procedure cannot be provided.

Patients requiring any treatment that will generate aerosols that cannot be minimised with the use of a dental dam should be advised that their orthodontic procedure will be

deferred until level 2 restrictions are lifted, and normal clinical practice is resumed.

3. The following orthodontic treatment is permitted provided heightened COVID-19 specific health and safety measures are employed above and beyond normal high infection control standards:

- New and existing patient consultations and reviews
- Routine fixed and removable appliance checks and adjustments
- Removal or repair of orthodontic fixed appliances with no aerosol generation
 - Pre-procedural mouthrinse mandatory (e.g: 1% Hydrogen Peroxide or 0.2% Chlorhexidene Gluconate)
 - Do not use high/intermediate speed handpieces or any other handpiece with water spray
 - Use only hand instruments or low speed handpieces at low RPM and no water spray to remove resin remnants from teeth
 - High volume evacuation should be administered by a dental chairside assistant if using a low speed handpiece
 - Apply careful isolation of every tooth requiring removal of adhesive remnants to minimise/eliminate the aerosolisation of saliva. E.g. cotton wool rolls, buccal dry guards, saliva ejectors. Consider use of rubber dam if practical.
- Commencement of active orthodontic treatment
 - Pre-procedural prophylaxis using a handpiece must be avoided. Consider use of pumice/water applied manually with cotton rolls/pellets instead
 - Avoid use of etching agents that require air/water rinse. Single step prime/bond agents recommended
- IPR/Enameloplasty
 - Use abrasive strips, avoid use of handpieces where aerosols may be produced
- Patient scans and impressions
- All retention visits.

4. Ensure your practice continues to have appropriate COVID-19 health and safety measures in place.

Adherence to additional infection control precautions (including patient screening, booking schedules, waiting room management, use of hand sanitisers, and pre-procedural mouthwash) should be continued during level 2 restrictions.

5. Orthodontic treatment should not be provided to anyone confirmed or suspected to have COVID-19.

The ASO reminds orthodontists making treatment decisions to consider all factors and exercise their clinical judgment based on their own education, experience and any unique patient specific factors.

IMPORTANT: Recommendations provided by the ASO are guidance only, not directives. They do not override laws, regulations, or official orders that exist or that may subsequently come into existence nationally or in particular states. Orthodontists should stay up to date in this regard.

Dr Howard Holmes
President, Australian Society of Orthodontists