

Dear DCNZ

Thoughts on the latest Covid 19 framework below:

Agree:

- a. A patient's Covid risk status is more important than whether the treatment results in AGPs or no AGPs.
- b. Respirator P2/N95 should not be required in low risk patients - Level 2 surgical mask is adequate. At present, we also wear a face shield and use rubber dam where possible.
- c. Ventilation - this definitely needs further investigation. Though, will all dental practices be held to the same standard? Namely, will small DHB clinics only seeing children be held to the same standard as a regular private dental practice?

Concerns:

- a. Aprons - why are these needed if AGPs are not a risk factor for Covid 19?
- b. Stand down periods in patients under 12 years of age - if AGPs are not a risk, why is there a need for a stand down period when seeing a child under 12 years? Especially if the procedure does not produce any AGPs (eg orthodontic adjustment) . At the appointment, if the treatment does not produce any AGP's, when does the stand down period start? Does the stand down period start as soon as the patient enters the surgery for a non AGP procedure? This seems nonsensical.
- c. Multi chair clinics - for moderate risk patients, even patients under 12 years of age, why do stand down times not apply for multi chair clinics? Yet the stand down times do apply for single chair clinics? This seems nonsensical.

Many thanks for your consideration.

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