

AO COVID-19 Patient's Guidelines

Introduction for Patients:

The purpose of creating guidelines is to outline a clear path of how we intend to keep our patients safe during treatment at AO. Customer service, quality & maintaining high infection control standards are the building blocks of our practice. As we continue to provide care to our patients our adherence to the Universal Covid-19 Precautionary guidelines needs to be understood. As a family we need to ensure that Alpan Orthodontics is incorporating these new procedural changes to assure our team & patient's are as safe as possible. The following guidelines shall apply to everyone coming to our offices. Our goal is to keep everyone safe. We have installed plexiglass shields at the front desk and between each chairs in the back. We have private rooms upon request in Woodland Hills & Los Angeles locations.

COVID-19 Guidelines For Reopening:

All Patients will be pre-screened by phone, text or email during the appointment confirmation. There will be an additional screening 15 min prior to your scheduled visit. All patients will be asked to wait in the parking lot in their car & we will invite you in at the appropriate time. Everyone will be asked to sign a AO Covid-19 health questionnaire & disclosure upon entering. We will accept a responsible party to accompany a minor if requested on an emergency basis only and based on our discretion due to our limitation on capacity.

Upon entering our facility all patients & responsible parties must wash their hands for at least 20 seconds under running water with soap. If they choose to use hand sanitizer, we are providing it with a concentration of at least 60% ethanol. All sanitizers will be provided. Any person who is not a patient of record or a new patient will be asked to wait outside to adhere to the states social distancing / gathering rules. We will treat everyone as if they have Covid-19 & follow Universal Covid Precautions in addition to the latest guidelines from OSHA, AAO, ADA, CDA, LADS, CDC, LA & CA health department official guidelines etc....

Masks shall be worn at all times for everyone. Masks will be provided if needed. All patients shall adhere to social distancing by maintaining a 6 feet distance upon check in, waiting or check out. All of our Team members are required to have a Covid-19 test as a base line prior to starting work. No employees or patients will be allowed in the office if they show any signs or symptoms of Covid-19 or have been exposed to someone with Covid-19. All of our employees have been tested negative for Covid-19 and get regular tests to ensure they are negative.

Our clinical team will utilize the proper recommended PPE: Gowns, gloves, eye protection (face shield or glasses) while working on patients. N95 masks will be worn under our AO or level 1 mask. When not working on patients or at the front desk, a mask will still be worn at all times. Our goal is to minimize the spread of the Corona virus for everyone!

Body temperature will be taken on patients & any family upon entering our facilities & will be logged in our Covid - 19 Log form. All of our team members are required to take their temperature at the start and end of their day. Anyone with a temperature over 99 degrees will be asked to reschedule their appointment or go home until there is no more symptoms or a negative Covid test. Any team member, patient or parent that has active signs & symptoms of COVID-19 will be asked to leave and reschedule immediately.

On completion of all orthodontic procedures our clinical team members will adhere to the already in place strict disinfecting & sterilizing procedures. All surfaces as well as dental equipment will be completely disinfected & instruments will be completely sterilized between each patient. Front office employees will regularly disinfect all front counters, work areas & reception areas.

For any patient needing bonding we will have the patient rinse with pre-procedural rinse (peridex or listerine) for 20 seconds prior to the start of the procedure. We will use N95 masks & high volume suction during the use of the high speed. We will purposely try to use the minimum speed to reduce the aerosol generated.

Everyone that comes to our office has a role to play in helping to keep us all safe & healthy. The team at AO are proud to be part of your family & we will continue to help protect you, & our team members from Covid-19. We will gladly share the processes pertaining to sterilizing instruments, cleaning, disinfecting surfaces, & infection prevention upon request.

Thank you all for helping to keep us all strong & safe!

Revised: 11/19/2020



AO Covid-19 Patients Informed Consent & Disclosures

We ask for your patience in advance due to all the new changes to our process. Our Covid-19 guidelines are designed to help keep everyone safe while attending to your treatment at AO. Please understand that all the new policies are designed for everyone's safety. Please disclose any indication of having been exposed to Covid-19, or whether you have experienced any signs or symptoms associated with the Covid-19 virus. Your health & the health of our team is our priority, before your appointment we need your help answering these following questions. Alpan Orthodontics reminds you that if you have recently travelled & have fever, cough &/or difficulty breathing please inform us ASAP: call (213) 382-8228 for any additional instructions regarding your appointment.

Please Individually Circle Either: YES or NO

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|---|-----|----|
| 1. Have you been in contact with someone who has tested positive for COVID 19? | YES | NO |
| 2. Have you tested positive for COVID 19? | YES | NO |
| 3. Have you been tested for COVID 19 and are awaiting results? | YES | NO |
| 4. Do you have a dry cough? | YES | NO |
| 5. Do you have a fever/chills? | YES | NO |
| 6. Do you have a sore throat? | YES | NO |
| 7. Do you have trouble breathing? | YES | NO |
| 8. Do you have repeated shaking with chills? | YES | NO |
| 9. Do you have a runny nose? | YES | NO |
| 10. Do you have any muscle pain? | YES | NO |
| 11. Have you recently been taking Aspirin, Advil, Tylenol, Naproxin, etc? | YES | NO |
| 12. Have you recently lost or had a reduction in your sense of taste or smell? | YES | NO |
| 13. Have you traveled outside the US by air or cruise ship in the past 14 days? | YES | NO |
| 14. Have you traveled within the US by air, bus or train in the past 14 days? | YES | NO |

By signing this document, I acknowledge that the answers I have provided above are true & accurate to the best of my knowledge. I am aware of the risks of contracting Covid-19. I have been informed & educated about Alpan Orthodontics Covid-19 Guidelines. I agree to follow these guidelines & release Alpan Orthodontics, Dr. Alpan or any of the team members for the responsibility of contracting Covid-19.

Print Name

Date

Date

Signature Patient/Responsible Party

Date

Date