

**In an effort to provide guidance to its licensees and the public, The North Carolina State Board of Dental Examiners has defined emergency and non-emergency dental treatment during the COVID-19 pandemic as set out below. The recommendation (issued 16 March 2020) that dentists treat only emergency cases during the current State of Emergency remains in effect until further notice.**

### **Emergency and Non-Emergency Dental Treatment**

Non-emergency Dental Treatments are those procedures that can be postponed or delayed without causing patient harm or pain. Dentists should refrain from non-emergency treatment of patients during the State of Emergency surrounding the COVID-19 pandemic. Examples of non-emergency treatments include, but are not limited to:

- Initial or periodic oral examinations and recall visits, including routine radiographs,
- Routine dental cleaning and other preventive therapies,
- Orthodontic procedures other than those to address acute issues (e.g., pain, infection, trauma),
- Extraction of asymptomatic teeth,
- Restorative dentistry including treatment of asymptomatic carious lesions,
- Aesthetic dental procedures,
- Placement of dental implants.

Emergency Dental Treatment consists of managing conditions that require immediate attention, including to relieve severe pain or risk of infection. Dentists should use their professional judgment to safely offer emergency care to patients, including to treat pain and infection, and to alleviate the burden on hospital emergency departments and urgent care centers. Examples of emergency dental treatments include, but are not limited to:

- Uncontrolled bleeding,
- Acute abscess, or localized bacterial infection resulting in pain and swelling,
- Extensive caries or defective restorations causing pain from pulpal inflammation,
- Tooth fracture resulting in pain or causing soft tissue trauma including avulsion/luxation,

- Surgical postoperative follow-up including osteitis or dry socket dressing changes, including suture removal,
- Dental treatment required by physician prior to critical medical procedures,
- Pericoronitis or other causes of third-molar pain,
- Biopsy of abnormal tissue,
- Dental prosthetic treatment to repair or replace a temporary restoration that is lost or broken and causing pain, discomfort or gingival irritation.
- Denture adjustments or repairs when function is impeded, especially for radiation/oncology patients,
- Snipping or adjustments of an orthodontic wire or appliances piercing or ulcerating the oral mucosa