

April 21, 2022

Occupational Safety and Health Administration
U.S. Department of Labor
200 Constitution Avenue, NW
Washington, D.C. 20210

Re: Docket No. OSHA-2020-0004—COVID-19 Emergency Temporary Standard for
Health Care Workers

To Whom It May Concern:

On behalf of our 162,000 members, we are pleased to respond to the Occupational Safety and Health Administration's request for information about updating its emergency temporary standard to protect health care workers from COVID-19. We offer these comments in response to your Federal Register notice of March 23, 2022 (87 FR 16426).

OSHA is considering whether and how to modify its emergency temporary standard to protect health care workers from COVID-19, presumably to prevent health care worker exposure to future variants. Among other things, OSHA is exploring the value of removing some of the exemptions for ambulatory care facilities where employees are screened for COVID-19, and non-employees and patients with suspected or confirmed cases of COVID-19 are not allowed to enter and may not be treated.¹

There does not appear to be a grave danger or a significant risk* of health care workers being exposed to COVID-19 in dental settings.² Removing the exemption for dental offices that screen employees, non-employees, and patients for COVID-19, and do not allow those with known or suspected cases to enter or be treated, will have little (if any) notable impact on dental office workers or the patients they serve.

Infection rates among dentists and dental teams are very low—far lower than for other health care workers, such as nurses and physicians, and even lower than in the general population.³ The cumulative COVID-19 infection rate was just 2.6 percent for dentists and 3.9 percent for dental hygienists, in November 2020 and October 2020, respectively.⁴⁻⁵ Those data were collected before the COVID-19 vaccines were available.

Since then, vaccination rates in dentistry have been exceptionally high. As of June 2021, at least 89.8 percent of dentists had been fully vaccinated and another 3.6 percent had received at least one dose.⁶ At least 75.4 percent of dental hygienists had been fully vaccinated as of August 2021, and another 5.0 percent had received at least one dose.⁷

We strongly support the Centers for Disease Control and Prevention's recommendations for health care workers and the public to be vaccinated against COVID-19, including every

* OSHA maintains that Section 6(b) of the Occupational Safety and Health Act of 1970 provides the statutory authority for an emergency temporary standard to protect health care workers from COVID-19, based on a finding of "significant risk" to worker health, as opposed to a finding of "grave danger" under Section 6(c) of the Act. As of this writing, OSHA has not defined a "significant risk" standard.

member of the dental team.⁸ We have encouraged our members to strictly adhere to CDC's infection control protocols and furnished all manner of guidance to help them do so.

It is worth noting that dental offices also adhere to a distinct set of infection control guidelines and recommendations that originated with another pandemic: the worldwide spread of HIV/AIDS.⁹ Over time, those protocols have evolved to address other airborne diseases, such as tuberculosis and influenza, and include protocols for using masks and face shields, and isolating patients with known or suspected cases. Adherence to these setting-specific guidelines has contributed to the low incidence of COVID-19 in dental settings.

Dentists have also looked to the ADA for guidance about how to safely treat patients and protect office staff. The ADA has provided guidance documents, frequently asked questions, digital learning opportunities, and more. Topics have included, among others:

- Understanding federal agency guidelines.
- Identifying office hazards and developing a response plan.
- Screening employees and non-employees.
- Conducting point-of-care testing.
- Using personal protective equipment, including masking guidance.
- Handling employee exposures outside the workplace.

Again, there does not appear to be a grave danger or significant risk of health care workers being exposed to COVID-19 in dental settings. Removing the limited exemption for dental offices that screen employees, non-employees, and patients for COVID-19, and do not allow those with known or suspected cases to enter or be treated, will have little (if any) notable impact on dental office workers or the patients they serve.

Thank you for providing the opportunity to comment. If you have any questions, please contact Mr. Robert J. Burns at 202-789-5176 or burnsr@ada.org.

Sincerely,



Cesar R. Sabates, D.D.S.
President



Raymond A. Cohlman, D.D.S.
Executive Director

CRS:RAC:rjb

¹ 29 CFR 1910.502(a)(2)

² Estrich CG, Mikkelsen M, Morrissey R (2020). Estimating COVID-19 prevalence and infection control practices among US dentists. *J Am Dent Assoc* 151(11): 815-824.

³ *COVID-19 Infection Rates Among Dental Professionals: A Comparison of Rates in North America and Europe*. International Association for Dental Research. Webinar. September 8, 2021.

⁴ Araujo MWB, Estrich CG, Mikkelsen M, et al. COVID-2019 among dentists in the United States: A 6-month longitudinal report of accumulative prevalence and incidence. *J Am Dent Assoc.* June 2021; 152(6):425-433.

⁵ Estrich CG, Gurenlian JR, Battrell A, et al. COVID-19 Prevalence and Related Practices among Dental Hygienists in the United States. *J Dent Hygiene.* February 2021; 95(1):6-16.

⁶ ADA Science and Research Institute and ADA Health Policy Institute, COVID-19 Health and Infection Control Practices Among Dentists, as of June 2, 2021.

⁷ Gurenlian JR, Eldridge LA, Estrich CG, Battrell A, Lynch A, Morrissey RW, Araujo MWB, Vujicic M, Mikkelsen M. (2022). COVID-19 Vaccine Intention and Hesitancy of Dental Hygienists in the United States. *J Dent Hyg* 96(1): 5-16.

⁸ Centers for Disease Control and Prevention (2022). Use of COVID-19 Vaccines in the United States: Interim Clinical Consideration. <https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html>, accessed March 30, 2022.

⁹ Centers for Disease Control and Prevention. Guidelines for Infection Control in Dental Health-Care Settings—2003. *MMWR* 2003;52(No. RR-17): 1-61.