To our valued patients,

With current events related to COVID-19, we know many of you have questions as it relates to your dental treatment. We have addressed the most Frequently Asked Questions (FAQ’s) below.

The coronavirus is a serious and credible concern. We do not wish to minimize it. We will get through this. We just need to be thoughtful and mindful about how we act.

**Q: Are you still open?**
A: Yes, our office is open for normal business hours

**Q: Is it safe to come in?**
A: Our office follows all the CDC recommended guidelines. We practice hospital level sterilization in our office. In fact, we even voluntarily invited an OSHA/WISHA inspector to come do an audit of our office and got a perfect score. Our doctors and our staff have attended many courses on sterilization technique, and we meet or exceed all safety guidelines. We have always assumed every patient who walks in our door has HIV/AIDS, and have treated every patient accordingly. We have taken every precaution and continue to evaluate all of our protocols to ensure the safety and well-being of our patients.

**Q: Is it still possible to get the coronavirus?**
A: Technically, yes. This is a surface and airborne virus, just like the cold or flu virus. The risk is not so much what happens back in the dental chair, but rather touching a door handle or being exposed to an infected person

**Q: What if I don’t feel well?**
A: Don’t come in! If you even suspect you were exposed, or are having any symptoms, then call your medical doctor right away and get tested. It is every individual’s responsibility to self-regulate, and self-isolate if necessary. We don’t want you to expose other patients, and we don’t want you to expose us.

**Q: What are the symptoms?**
A: Fever (common), fatigue (sometimes), cough (common), sneezing (no), aches & pains (sometimes), runny or stuffy nose (rare), sore throat (sometimes), diarrhea (rare), headaches (sometimes), shortness of breath (sometimes)

**Q: What are you offering to keep us safe?**
A: As stated before, we are (exceeding) state and federal guidelines with sterilization. Our cleaning staff disinfects the entire office (clinical & waiting room) each night. We have hand sanitizer at our front desk, in our business office, and in the consult rooms and every operatory room. We take your safety and ours very seriously.

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Q: Who is most at risk?
A: Primarily the elderly and people with underlying medical conditions. The mortality rate for 60-69yrs (3.6%), 70-79yrs (8%), and 80+yrs (14.8%). Children, surprisingly, remain the most resilient group. If you have an underlying health condition (respiratory, cardiac) you are at an increased risk.

Q: What can I do to minimize this?
A: 1) Wash your hands often; 2) Avoid crowds; 3) Cancel non-essential travel; 4) Stock up on food & essentials early, gradually, and responsibly; 5) If you can work from home, do so; 6) Get a “buddy” and make back-up plans for care of children, pets, and those in need of special assistance; 7) Prepare a hot zone in your home in case someone falls ill; 8) Do not touch your face; 9) Be on guard against false hope of “remedies”; 10) Do not shake hands; 11) Do not touch public surfaces with your fingers – use knuckles, your hips, your elbows, or even your sleeve to open a doorknob; 12) Do not go to work if you are in any way sick.

Q: Should I (the patient) be wearing face masks?
A: No. Healthcare workers desperately need them to care for you and your loved ones. If healthcare workers are at risk, we are all at risk. Masks are NOT the most useful thing you can do to protect yourself: they’re hard to wear properly, especially for long periods of time, and their effectiveness against viral particles stops as the filter gets moist with your breathing (about 30 minutes). Also, for some people, wearing a mask makes it more likely that they will touch their face.

Q: Is there a cure?
A: Currently there is NO cure. Be wary of remedies you read about on the internet.

Q: Is it inevitable that I will get the virus?
A: According to Harvard epidemiology professor Marc Lipsitch, “I think the likely outcome is that it will ultimately not be containable.” Lipsitch predicts that within the coming year, some 40-70% of people around the world will be infected with the COVID-19 Coronavirus. He clarifies emphatically, this does not mean that all will have severe illness. “It’s likely that many will have mild disease, or be asymptomatic.”

Q: What is the endgame?
A: In a nutshell, the endgame is to “Flatten the curve”. Without protective measures, the risk is that large numbers of people get the virus all at once and overwhelm the health care system. With protective measures, we can slow the spread of the virus to a rate that our health care system can accommodate and people can get appropriate treatment.

Of course, if you have any questions or concerns you would like to direct to any of our staff or our doctors directly, please do not hesitate to call us directly and we will be happy to speak with you.

Thank you for the continued confidence in our office.

Dr. David Engen, Dr. Rudolf Hahn and Team