

INTRODUCTION

The emergence of novel corona virus stain ((SARS-CoV-2) has been greatly afflicted as global pandemic declared by the World Health Organization and the Public Health Emergency of International Concern (PHEIC).

Dentists were presented at higher risk of being affected by COVID-19 in relevance to other health care professionals. The current practice guidelines have also been evolved in all disciplines of dentistry because of COVID-19 pandemic.

The objectives of this review was to discuss the *clinical recommendations of managing oral & maxillofacial surgical cases during COVID-19 Pandemic.*

OVERVIEW

Protocols for Clinical Procedures

- ✓ There is an absolute need to schedule interventions depending on their *priority* in order to avoid unnecessary exposure to infected patients.
- ✓ During the peak of the pandemic, *no elective surgery* should be performed.
- ✓ Even *urgent* procedures might be postponed if there is a view to recovery of a COVID-19 patient within a few days.
- ✓ *Emergency* procedures do not allow any delay.

METHODS OF DATA COLLECTION

Pub Med, OVID Medline, Cochrane & Google Scholar database were used as a main search engine for data collection.

The key words /mesh terms used for search were OMFS; COVID-19; Clinical guidelines; Oral Surgery.

The most recent articles related to Oral & Maxillofacial Surgery disciplines were selected.

OVERVIEW

Protocols for Surgical Procedures

- ✓ When surgery is performed on COVID-19 patients, adequate *personal protective equipment* is crucial. Utilization of protective equipment such as N95 masks, disposable gowns, and face-shields are highly encouraged.
- ✓ There must be negative pressure in the operating room, and aerosol formation must be reduced to a minimum.

OVERVIEW

- ✓ Oral and maxillofacial surgery discipline is correlated with a high risk of SARS-CoV-2 transmission.
- ✓ There is an absolute necessity to update and adopt latest safety and operatory protocols for providing dental care during the COVID pandemic.
- ✓ Firstly, the usage of *tele-consultation* is highly encouraged to screen healthy versus infected patients.
- ✓ A *triage protocol* has been developed to classify patients into 3 different categories before the dental examination is conducted.

OVERVIEW

- ✓ In order to address the COVID-19 challenge adequately, significant changes in the infrastructure of outpatient units, inpatient units, and operating rooms are essentials.
- ✓ Nevertheless, with the availability of safe and effective vaccinations against the SARS-CoV-2, scientists expect the world is returning to normalcy. Patients and health care professionals are required to be *vaccinated* before any elective treatment or long-standing procedure is executed.

OVERVIEW

- ### *Risk Assessment*
- ✓ Specialties with overlap in therapies should have well defined arrangements among each other in relevance to treatment.
 - ✓ OMFS should be able to identify a suspected case of COVID-19, its symptoms, risk groups, disease severity, laboratorial and computed tomography alterations, and treatment guidelines.
 - ✓ Inpatient and outpatient units are required to be organized in such a way that the risk of cross-infection among patients is reduced to a minimum.

CONCLUSION

- ✓ The major goal of implementing these clinical recommendations is to protect patients as well as the medical staff from unnecessary infection, and to keep the healthcare system running effectively.
- ✓ Therefore, every effort is essential to make the necessary investments.

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