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Mini Review

Role of Dentists in the National Emergency COVID

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Abstract

In this article my aim is to, summarize the effective collection of the host factors co-operated and indicating zonal pathways activated during human novel coronavirus infection, and its whole biomolecular relation, get evoking on Human CoV-infection with inducing stress response, autophagy, apoptosis, and innate immunity.

Keywords: Covid-19; Coronavirus; India

Figure

Introduction

The Role of dental practice, dental professionals and the persons who indulge in the profession (lab technician, dental hygienist etc.) are recommended for patient screening, diagnosis, infection control.

Everyone in the world and nation are itself and in a group are praising god to stop this pandemic disease. Which was started from Wuhan (china) to the whole world. a coronavirus. In spite of global attempt to contain the disease widespread, the explosion is still on a arise and on its high peak level retain to the community widespread pattern of this infection. arises in bats and pangolins, and further spread to human being. Observed in nasopharyngeal and salivary secretion of diseased patients.

Clinical hypothesis

Dentist are need to be aware of coronavirus. Avoiding dental procedures like RCT, dental filling, scaling and polishing all are cancelled until its not emergency. Increasing rate of virus and its wide spread to Health Care Providers, dental professionals are at high risk for hospital induced infection and can become carrier of the

disease. Its came through on nature of dental fields, which includes airway and aerosol generation, operating of sharp and mode of the supplier to the culprit oropharyngeal region. Medium to cross-contamination also [1-3].

Sign and symptoms

The major risk with pneumonia or (ARDS), asthma, allergic patient, cardiovascular disease patient or immunosuppressive patient.

Corona virus is highly transmissible when the patient is most symptomatic.

Imaging

- Ct-chest
- Ground glass opacification with or without consolidation
- Bilateral peripheral involvement especially lower lobe.

Transmission

- Direct or in direct transmission
- It can be transmitted though person to person and by direct contact of for mites like furniture's or equipment's
- Direct contact like that cough, sneeze, droplet inhalation
- Contact transmission like oronasal, eye mucous membrane
- Frequent exposure to saliva.

Precautions and protocols

- Avoidation scaler and airroter i.e. droplet infection and aerosol related procedures.
- Free telecommunication and tackling
- Evaluation and drug management for procedure shifting
- Use of (single use) instruments like mouth mirror, syringes
 -stop cross-contamination.
- Extraoral imaging like OPG or CBCT
- Indication sign at the entrance of dental practice and instruct the patient having respiratory symptoms like cough sneezing and asking about patient travel history.
- LED THERMOMETER -Temperature evaluation
- Install barrier in the dental office i.e. glass and using of rubber dam in procedures
- Autoclave and rinse with 1% H₂O₂ after every procedures.

For self protection

- Avoidation of contaminated with saliva and carefully using of sharp instruments
- Avoid touching of anything without proper handwash. like eyes nose mouth etc
- Wearing of proper PPE (personal protection kit) kit and gown and N95 mask
- Ensure safe waste management.

Management and protocol given by ministry

- Stay home stay safe
- A distance of 1m is necessary to safety of all people
- Wash hand and use sanitizer
- Given lockdown three times for the protection and control rates.

Conclusion

In climax, healthcare professionals have the responsibility to save the public, and contamination control. And tell the people about the disease and precautions to control it. Stay home stay safe.

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