



April 22, 2020

The Honorable Gavin Newsom
Governor of California
1303 10th Street, Suite 1173
Sacramento, CA 95814

Dear Governor Newsom:

On behalf of the California Association of Orthodontists (CAO) we wish to request additional guidance with regard to orthodontic patient care during this COVID-19 crisis.

We understand and support the decision to restrict the practice of dentistry to emergencies only, as defined by the ADA and AAO. However, due to the nature of orthodontic treatment, the possibility of an extended closure of our offices has the potential to jeopardize the health of many of our patients in ways unique to orthodontics.

The purpose of this letter is to clarify the scope of care that we believe is necessary in the orthodontic office during these exceptional times and should be considered allowable or exempt from closure mandates extending beyond May 1.

The vast majority of our patients are children between the ages of seven and seventeen, most of whom have some type of active (i.e., causing tooth movement) orthodontic appliances in their mouths. The goal of orthodontic treatment is to achieve healthy and functional bites for these children. Unsupervised movement by active orthodontic appliances for an undetermined amount of time has the potential to inflict irreversible harm. Close monitoring or removal of such appliances, while not strictly defined as a dental emergency, is essential.

There are other situations where a suspension of treatment has the potential to cause harm to our young patients. Poor oral hygiene in combination with orthodontic appliances, unmonitored and unaddressed, can lead to irreversible damage to teeth and increase the risk of dental infections. Removal of appliances may be critical in such situations until routine care and monitoring can be resumed. For patients who have had surgical procedures completed recently to facilitate the movement of teeth or to correct skeletal discrepancies, the cessation of orthodontic treatment for an undetermined amount of time may cause some to undergo invasive surgical procedures a second time. It is situations like these that concern us as a timeline for the resumption of routine care is undefined.

We urge that you consider the provision of orthodontic care that is necessary to prevent adverse long-term outcomes as outlined here essential care allowable during the extended closure of our practices.

From a safety standpoint it is critical to note that most orthodontic examinations and adjustments can be performed without high speed handpieces. This significantly reduces aerosols and lowers the COVID-19 transmission risk. Furthermore, orthodontists adhere to rigid standards to provide safe care through our full engagement with standard precautions for infection control. Our aim is to provide the safest care possible with careful adherence to the latest recommendations regarding personal protective equipment (PPE) for our procedures and strict social distancing protocols for as long as recommended by the state of California and the CDC.

Thank you for your guidance and mandates which are no doubt helping our communities to flatten the curve and to keep essential businesses open. We appreciate your additional consideration of the definition of essential orthodontic treatment, and we look forward to your response.

Please direct any follow-up to:

Dr. Kathleen Bales
President, California Association of Orthodontists
1713 Novato Blvd
Novato, CA 94947-3087
board@caortho.org

We stand ready to provide any further information you may require in order to provide an appropriate evaluation of this matter.

Sincerely,

Kathleen Bales, DDS, MS
President, California Association of Orthodontists

And the California Association of Orthodontists COVID-19 Task Force Members:

Samuel Berro, DDS
Rita Chuang, DDS, MS
Harry Dougherty, Jr., DDS, MS
Bella Shen Garnett, DMD, MMSc, PC
Zachary Nelson, DMD, MS
Christopher Roncone, DDS, MS

Cc: Dr. Mark Ghaly, California Health and Human Services Secretary