

Mouth Care for Inpatients with COVID-19 or Suspected COVID-19

(dated 31.3.20 - please crosscheck with latest PPE guidance - 02/04/2020 https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control

Supporting patients with mouth care who are confirmed or suspected COVID-19 positive is an important part of patient care.

Is providing mouth care high risk?

The virus is transmitted via respiratory droplets from the infected person to the mucosal surface of a recipient, commonly by coughing, speaking or sneezing. Aerosol generating procedures (AGP) increase the risk of aerosol spread of the virus irrespective of the mode of transmission (contact, droplet, or airborne). Although mouth care is not currently classed as an AGP, care must be taken to minimize coughing and generating an aerosol

Protective Personal Equipment (PPE) – Please keep updated with changes

As mouth care needs to be carried out less than a meter away from a patient it is advisable to wear appropriate PPE.

In intensive care unit (ICU), intensive therapy unit (ITU), high dependency unit (HDU) or where COVID-19 patients are cohorted, a filtering face piece (class 3) (FFP3) respirators should be worn as there is a risk of airborne transmission of pandemic COVID-19

In a non ITU/HDU setting use a fluid resistant face mask

- For all patients use eye protection (disposable goggles or full-face visor).
- Long sleeved disposable gown and gloves

•

Try to ensure all care that requires PPE is carried out at the same time to minimise the need to change PPE

1. Tips for carrying out mouth care on a ventilated patient who is COVID positive

- Carry out tooth brushing at least once a day ideally with a disposable toothbrush. Try and brush all surfaces of the teeth
- Avoid using electric toothbrushes as they generate more aerosol spray
- Use a small headed toothbrush with a long handle for better access
- Use a smear of toothpaste or a non- foaming toothpaste on a dry toothbrush to prevent the buildup of secretions
- Carry out gentle oral suctioning or use a single-use suction toothbrush.



continued

- Try to stand to the side of the patient or behind them so your face if not directly in front of their face
- Carry out dry mouth care regularly by moistening the mouth with water or using a dry mouth gel on a toothbrush as needed
- Gently brush the tongue in a forwards sweeping action
- Make sure the lips are regularly lubricated with a lip balm or water based gel

•

2. Tips for caring out mouth care on a non-ventilated patient who is confirmed or suspected to have COVID-19 positive

The key difference is that patients are more likely to cough when performing mouth care so be gentle and take breaks to allow the patient to rest and swallow.

Patients who are enterally fed are particularly at risk of aspiration pneumonia so regular mouth care on these patients is essential

- Sit the patient upright if possible
- Encourage the patient to do their own mouth care where possible and provide them with a disposable bowl if they cannot get to a sink.
- Encourage the patient to have a few sips of water after each meal to clear residual food from their mouth
- Carry out tooth brushing at least once a day ideally with a disposable toothbrush. If single use brushes are not available rinse the brush and store in a sealed container or washbag.
- Avoid using electric toothbrushes as they generate more aerosol spread
- Use a small headed toothbrush for betters access in the mouth
- Use a smear of toothpaste or a non- foaming toothpaste on a dry toothbrush to prevent the buildup of oral secretions
- Carry out gentle oral suctioning if available bedside
- Try to stand to the side of the patient or behind them so your face if not directly in front of their face.
- Carry out dry mouth care regularly by moistening the mouth with water or using a dry mouth gel on a toothbrush as often as needed.
- Gently brush the tongue in a forwards sweeping action taking care not to stimulate the cough reflex
- Make sure the lips are regularly lubricated with a lip balm or water based gel.
- If the patient is resisting care, stop and try again at a different time
- If the patient wears dentures, encourage them to take them out at night and store dry in a denture container



continued

3. Mouth Care at the end of life

As patients approach the end of life comfort and dignity is very important

Continue to carry out mouth care as long as it is not causing the person distress. In the last days and hours of life, keeping the mouth moist and comfortable is the main aim of care.

For further resources on mouth care please visit: https://mouthcarematters.hee.nhs.uk which has a range of training resources.

References

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/876577/Infection_prevention_and_control_guidance_for_pandemic_coronavirus.pdf