**Table 1: Questionnaire sent to dental practitioners** 

| Questions                                 | Answers              |
|---|----------------------|
| Do you agree to participate in this       | Yes                  |
| survey?                                   | No                   |
|   |                      |
| In case of participation, confidentiality |                      |
| of participants' data will be guaranteed. |                      |
| 1. Age                                    | <35 years            |
|   | 35-55 years          |
|   | >55 years            |
| 2. Gender                                 | Male                 |
|   | Female               |
| 3. Professional experience                | 0-5 years            |
| (One answer allowed)                      | 6-10 years           |
|   | 11-15 years          |
|   | >15 years            |
| 4. Weekly average working time            | <20 h                |
| (One answer allowed)                      | 20-30 h              |
|   | 30-40h               |
|   | >40 h                |
| 5. Average number of patients treated     | <5 patients          |
| daily before Egyptian national            | 5-10 patients        |
| administrative order of 15 March          | >10 patients         |
| 2020                                      |                      |
| 6. Due to Corona Virus Disease 19         | Yes                  |
| (COVID-19), was the practice              | No                   |
| closed/reduced to urgent procedures       |                      |
| only. (One answer allowed)                |                      |
| 7. When was your practice close or        | Before 15 March 2020 |
| clinical activity reduced to urgent       | After 15 March 2020  |
| procedures only? (One answer              |                      |
| allowed)                                  | **                   |
| 8. A telephonic availability was          | Yes                  |
| guaranteed for dental emergencies?        | No                   |
| (One answer allowed)                      | **                   |
| 9. In case of dental emergencies, did you | Yes                  |
| personally take care of them?             | No                   |
| (One answer allowed)                      | Vac                  |
| 10. In case of dental emergencies, were   | Yes                  |
| the dental assistant(s) present? (One     | No                   |
| answer allowed)                           | Vac                  |
| 11. Did patients understand motivations   | Yes                  |
| for practice closure/clinical activity    | No                   |
| reduction? (One answer allowed)           |                      |
| ` ,                                       | <5 notionts          |
| 12. Average number of patients treated    | <5 patients          |
| daily after 15 March 2020                 | 5-10 patients        |
| 12 Did nationts sangel their              | >10 patients         |
| 13. Did patients cancel their             | Yes                  |
| appointments after 15 March 2020?         | No                   |

| (One engine allowed)                     |  |
|--|--|
| (One answer allowed)                     | NY 41  |
| 14. Did COVID-19 pandemic condition      | Not at all   |
| negatively affect your professional      | Little   |
| activity? (One answer allowed)           | Quite  |
|  | A lot  |
|  | Extremely  |
| 15. Since the beginning of the pandemic, | Yes  |
| did you have difficulties in finding     | No   |
| Personal Protective Equipment            | I don't know                                       |
| (PPE)? (One answer allowed)              |  |
| 16. Since the beginning of the pandemic, | Yes  |
| have you noticed delays in the           | No   |
| delivery timing of dental materials?     | I don't know                                       |
| (One answer allowed)                     | 1 don't know                                       |
| 17. Do you know someone who              | Me   |
| contracted COVID-19? (One answer         | One or more relatives                              |
| · ·                                      |  |
| allowed)                                 | One or more employees                              |
|  | One or more patients                               |
|  | One or more acquaintances                          |
|  | No   |
| 18. How worried are you of contracting   | Not at all   |
| COVID-19 during your clinical            | Little   |
| activity? (One answer allowed)           | Quite  |
|  | A lot  |
|  | Extremely  |
| 19. How much do you think your patients  | Not at all   |
| are worried contracting COVID-19         | Little   |
| during a dental service? (One            | Quite  |
| answer allowed)                          | A lot  |
| answer and wear                          | Extremely  |
| 20. Which of the following emotions do   | Fear   |
| you feel when thinking about             | Anxiety  |
| COVID-19?                                | Concern  |
| COVID-19?                                |  |
|  | Sadness  |
| 21 11                                    | Anger  |
| 21. How worried are you for your         | Not at all   |
| professional future?                     | Little   |
| (One answer allowed)                     | Quite  |
|  | A lot  |
|  | Extremely  |
| 22. What worries you the most? (Multiple | I don't know when the emergency situation will end |
| answers allowed)                         |  |
|  | Patients will have less money to spend             |
|  |  |
|  | The crisis of dental environments will get worse   |
|  | The need of new procedures and new devices for     |
|  | safety and infection prevention                    |
|  | The chance of losing my job or having to fire my   |
|  | employees  |
|  |  |

| 23. Which improvements do you think can result from the COVID-19 | Reduction of dental practices competition              |
|--|--|
| emergency? (Multiple answers allowed)                            | Improvement of communication with patients             |
|  | Professional rhythm slowdown                           |
|  | Stabilization of relationship with dental associations |
|  | No improvements  |
|  |  |