# Supplementary table:

Variables	SARS-CoV-1	SARS-CoV-2 (COVID-19)
Original reservoir	Bats [1]	Bats [2]
Main transmission mode	Person-to-person through droplets [3]	Person-to-person through droplets [2]
Incubation time	Estimated from China [1]:	Estimated from China [4]
	Mean: 4.6 days (3.8- 5.8)	Mean: 4 days (2-7)
		Estimated from Wuhan, China [5]
		Mean: 5.2 days (4.1; 7.0)
Basic $R_0$	<i>Estimated from modelling [6]:</i>	<i>Estimated from cases in Wuhan</i> [5]
	Range from $2.2 - 3.6$	2.2 (1.4 – 3.9)
	Estimated worldwide [7]:	Average and range reported in review
	Range $2 - 5$	
		3.28 (1.4- 6.49)
		Estimated from modeling [0]:
		2.68(2.48 - 2.86)
Progression to severe	8-20 days [7]	2.00(2.40 - 2.00) 8-20 days [7]
disease	0-20 days [7]	0-20 days [7]
Case Fatality rate	Estimated from modelling [9]	Estimated from mainland China 1 <sup>st</sup> week
	Worldwide: 9.6%	of epidemic [13]: 0.15% (0.12-0.18)
	Mainland China: 6.4%	
	Hong Kong: 17%	Estimated from Hubai province (not
		Wuhan) [13]:
	Estimated from hospital cases in	1.41%(1.38-1.45)
	Bejing [10]	
	< 20 years: 0.5%	Estimated from Wuhan city [13]
	20-64 years: 4.8%	5.25% (4.89 – 5.51)
	> 65 years: 27.7%	
		<i>Estimated from multiple sources [14]</i>
	Estimated from Hong Kong	Wuhan: 4.42%
	department of health database [11]	Rest of Hubai: 3.09%
	< 60 years: 6.8% (4.0; 9.6)	Hubei: 4.07%
	> 60 years: 55.5% (45.3; 64.7)	Rest of China: 0.84%
		China: 3.53%
	Estimated from CDC China [12]	International 46 countries: 1.83%
	Overall: $6.4\%$	1 otal: 3.40%
	20 - 59 years: 2.4%	
	40-39 years: $8.970$	
	80-93 years: 17 7%	
Viral shedding	Nasonharengeal viral shedding from	High viral load in upper respiratory
v nar snedding	neak $6 - 11$ days after onset of illness	tract day 2 to 6 after onset of illness
	[15]	(Zou 2020) [16]
Genome	The conserved replicase domains of SARS-CoV-2 are 94.6% identical to SARS-	
	CoV implying the two belong to the same species [14]	
Cell entry	Both viruses use the same cell entry receptor (ACE2).	
	SARS-CoV-2 has 10-20 folds higher affinity with ACE2 than SARS-CoV	
	resulting in higher infectiousness [14].	

#### **References supplementary table**

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# Box 1: Explanation of quanta and estimation assumed quanta for *Legionella* pneumophila

#### Explanation parameter quanta

A quantum is a hypothetical infectious dose estimated from epidemiological studies describing the outbreak of a pathogen with a known infectious dose (Fennelly et al. 2004; Riley et al. 1978; Sze To and Chao 2010; Wells 1955). One quantum presents the number of bacteria or viruses in an airborne particle that is required to infect 63.2% (1- $e^{-1}$ ) of susceptible people per hour, also described as 1.25 x ID<sub>50</sub> (infectious dose of 50%) (Fennelly et al. 2004).

## Formula for quanta estimation

- Quantum =  $1.25 \times ID_{50}$
- Quanta number generation = number of CFU in one quantum divide by number of released CFU in the air
- Assumed upper and lower limit calculation =  $\pm 35\%$

#### Input values from literature

- ID<sub>50</sub> of *L. pneumophila* = 11.7 CFU (Armstrong and Haas 2007)
- CFU load *L. pneumophila* in the air per m<sup>3</sup> per hour in a dental clinic = 112.5 CFU/m<sup>3</sup>/h (Dutil et al. 2007)

Calculations with L. pneumophila

- One quantum =  $1.25 \times 11.7 = 14.6$
- Quanta number generation = 122.5/14.6 = 8.39
- Upper limit quanta = 11.32
- Lower limit quanta =5.45

## Box 2: description of modelled scenarios.

- A low-risk scenario in which the Dental Healthcare Worker (DHW) is exposed to an infectious source that generates the lowest quanta. The DHW is placed in low risk conditions wearing an FFP-2 mask and works in good indoor air quality (400-800 PPM CO<sub>2</sub>).
- An intermediate-risk scenario in which the DHW is exposed to an infectious source that generates the middle value quanta. The DHW wears a medical face mask and works in average indoor air quality (1100–1500 PPM CO<sub>2</sub>).
- A high-risk scenario in which the DHW is exposed to an infectious source that generates the highest value quanta. The DHW does not wear a medical face mask, nor covers the nose with the medical face mask and works in poor indoor air quality (>1500 PPM CO<sub>2</sub>).