ERIE COUNTY MEDICAL CENTER CORPORATION POLICY AND PROCEDURE

Name/Title of Policy:	Policy #: IC-048
Infection Control Guidelines	
Dentistry / OMFS Department	
Policy Type (choose one by inserting \underline{X})	Prepared by:
Administrative	Bonnie Sloma
X Clinical Practice	Assistant VP Ambulatory Services
Reference:	Applies to:
APIC Text of Infection Control &	Dentistry Department Personnel
Epidemiology, 2014	

Effective Date	2/01			
Review Date				
Revision Date	8/03, 7/06, 3/09	5/11, 7/12, 2/13	12/15	

I. Policy Purpose, Statement of Policy, and Policy Goals:

Certain aspects of dental practice may contribute to transmission of micro organisms within the Dental Clinic. Guidelines developed by the CDC, ADA, OSHA and other professional authorities have been reviewed to prepare a protocol for infection control in the ECMC Department of Dentistry. The Chief of Dentistry has also drawn on experience gained in participating in numerous continuing professional education programs.

II. Procedure

Patient Care Practices:

All Department of Dentistry Personnel will utilize Standard and Transmission Based Precautions (refer to the Infection Control Policy, ECMC Intranet).

Since medical history and examination cannot reliably identify all patients infected with blood borne pathogens, blood and body fluid contaminated with blood from any patient should be considered as infectious at all times.

Standard Precautions are designed to reduce the risk of transmission of pathogens by workers assuming that all human blood and body fluid are infectious for Human Immunodeficieny Virus (HIV), Hepatitis B Virus (HBV), Hepatitis C Virus (HCV), and other pathogens, and must be handled accordingly.

Appropriate barrier protection (namely, gown, gloves, mask and protective eyewear) must be used as necessary whenever contact with blood or body fluid is anticipated. The use of personal protective equipment is designed to provide a barrier between the worker and the exposure source

All patients should be considered as infectious at all times and appropriate barrier precautions must be used as necessary whenever exposure to blood or bodily fluids is anticipated.

All personnel must perform hand hygiene before and after each patient contact and between different procedures on the same patient. (refer to Infection Control Policy, Handwashing Procedure, ECMC Intranet).

Gloves must always be worn when touching blood, saliva, or mucous membranes. Repeated use of a single pair of gloves is not permitted. Gloves must be changed and discarded after use with each patient.

Following removal of gloves, hands must be thoroughly washed

When splashing or spattering of blood or other body fluids is likely, surgical masks and protective eyewear must be worn.

Protective eyewear, such as goggles, glasses with side shields or face shields should be used during procedures in which aerosol generation or splatter is anticipated.

Disposable fluid resistant gowns must be worn when clothing is likely to be soiled with blood or other body fluids.

Personal protective equipment (PPE) MUST be removed before leaving the patient care area. PPE should not be worn in non-clinical areas (i.e., front desk, conference rooms, laboratory, supply room).

All staff will be offered Hepatitis B vaccine free of charge.

Any employee refusing vaccination must sign the "Informed Refusal for Hepatitis B Vaccination" form.

All Department of Dentistry Personnel are required to comply with employee health policy including

Compliance with pre-employment and annual hospital physicals Personnel with active infection should not have patient contact Report all injuries, exposures to communicable disease or blood/body fluids to their supervisor immediately for follow up in Employee Health

All personnel are instructed to follow hospital codes and maintain high standards of personal cleanliness.

Personnel off-duty for five (5) or more days because of illness should be checked by Employee Health Service before returning to work.

No food or beverages will be brought into the clinic area by patients or staff.

Patients will be requested to finish or dispose of any food or beverages before being admitted into the clinic area.

III. Environment of Care

Instruments and Material

All instruments, burs, mirrors, and other devices used in intraoral treatment are to be decontaminated by ultrasonic cleaner, dried and sterilized in the central facility (SPD).

All instruments or other intraoral devices designed for repeated usage must be decontaminated as per CDC guidelines and prepared for sterilization in the central facility. (SPD).

Each patient is to be treated with sterilized instruments.

All contaminated needles are to be placed in rigid "sharp" needle containers.

Infectious waste is to be placed in red bags and disposed of in designated infectious waste containers.

Clinic Surfaces

Surfaces which are touched by the dentist, hygienist or assistant and, therefore, might be contaminated by blood or saliva must be cleaned and disinfected after each patient. Hospital approved solutions must be used to remove dried blood and to disinfect the surfaces.

Handpieces (autoclavable)

After use, the handpiece must be flushed, then must then be lubricated, as per manufacturer's specifications, and prepared for autoclaving.

Handpieces (not suitable for autoclaving)

After use, the handpiece must be flushed, then thoroughly scrubbed with a detergent and water to remove adherent material. It should then be thoroughly wiped with an absorbent material saturated with a chemical germicide that is registered with the EPA as a "hospital disinfectant" and is mycobacterial at use dilution. Following disinfection, any chemical residue must be removed by rinsing with sterile water.

Suction Equipment

Disposable tips and tubing will be discarded after each patient use. Suction line traps must be discarded and replaced weekly Disposable suction canisters will be discarded and replaced daily. Suction lines of the dental unit will be flushed daily per manufacturers recommendations..

Housekeeping

Routine cleaning of Dental Clinic will be done by Environmental Services as per Environmental Services Schedule.

Waste receptacles are emptied daily.

Refer to the Environment of Care Manual for cleaning procedure for isolation rooms.

Approved By:

Charlene Ludlow, RN, MS, CIC, Chief Safety Officer

Dr. John Crane, MD, PhD, Hospital Epidemiologist

ECMCC has developed these policies and procedures in conjunction with administrative and clinical departments. These documents were designed to aid the qualified health care team in making clinical decisions about patient care. These policies and procedures should not be construed as dictating exclusive courses of treatment and/or procedures. No health care team member should view these documents and their bibliographic references as a final authority on patient care. Variations from these policies and procedures may be warranted in actual practice based upon individual patient characteristics and clinical judgment in unique care circumstances.