



The Top Ten Frequently Asked Infection Control Questions

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The Infection Control and Biosafety Committee of the Maryland State Board of Dental Examiners is pleased to provide you with this compilation of the ten most frequently asked infection control questions regarding compliance with The Centers for Disease Control (CDC) Guidelines for Infection Control in Dental Health-Care Settings - 2003.

1. When do dental employees have to wear protective safety equipment?

Whenever they handle items that may come in contact with blood, saliva or chemicals. They must wash or sanitize their hands and use clean gloves for each patient. A mask, gown, and protective eyewear must also be used for each patient if there is potential for splatter, spray or aerosol production. Patients should also be offered protective eyewear.

2. Are we required to have a written Post Exposure Protocol?

Yes. In the event of an exposure incident, this plan must contain directions for first aid, documentation, testing (patient and staff), counseling and treatment. If employees refuse testing, a declination should be signed.

3. Should I take special precautions for patients with bloodborne diseases?

No. Follow Standard Precautions for all patients. Treat all blood and body fluid as if it were infectious.

4. What really needs to be sterilized?

Any reusable device that is used intra-orally. This includes: handpieces, hand instruments and scalers, burs, and radiographic positioning devices. Read manufacturers' directions for maintenance.

5. What has to go into medical waste?

Anything used in the mouth, anything saturated with blood or OPIM (other potentially infected material) including saliva or anything with dried blood. All sharps must be placed in a puncture resistant container.

6. Is it acceptable to set up patient trays at the start of the day by opening all the sterile packs and laying them out for easy access?

No. Sterilized instruments need to be stored in sterilization bags or cassettes with an activated process monitor inside and outside of each package. Sterilized instruments should be opened in front of the patient to demonstrate compliance with CDC protocols.

7. If we have more than one autoclave, is it OK to rotate spore testing?

No. Weekly spore testing must be performed for each heat source of sterilization.

8. It's more convenient to have prefilled irrigating syringes stored in treatment room drawers. Are there any objections to that?

Yes. Prefilled syringes are not allowed unless they have been manufactured as such, and must be stored in a way that will avoid cross contamination.

9. Do employers have to pay for their employees' mandatory continuing education in infection control?

No. Employers are not required to pay for any continuing education, but may choose to do so. However, employers must provide at least initial training and thereafter annual health and safety training. This does not have to be a Board approved continuing education course.

10. We have a clinical staff member who refuses to follow some of the safety protocols. What should I do?

As a dentist you are responsible for ensuring that all of your clinical staff follows all safety protocols.

Please note the links to the 2008 CDC Disinfecting and Sterilization as well as OSHA Guidelines:

http://www.cdc.gov/hicpac/pdf/guidelines/Disinfection_Nov_2008.pdf

https://www.osha.gov/pls/oshaweb/owadisp.show_document?p_id=10051&p_table=STANDARDS

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm>

<http://www.cdc.gov/HAI/pdfs/guidelines/standatds-of-ambulatory-care-7-2011.pdf>

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