The following is a list of CDC recommended infection control protocols that every dental practice should follow to help keep their patients safe from disease transmission during dental treatment.

How effective are your practice protocols?

- Instruments should be cleaned and inspected for cleanliness prior to sterilization
- Heat sterilize all reusable items and instruments that are heat tolerant using FDA cleared medical devices for sterilization
- Use high level disinfection/chemical sterilization on reusable items that are heat sensitive (“cold sterilization”)
- Package/wrap all instruments and/or cassettes prior to sterilization in wrapping compatible with the type of sterilization process used and that have received FDA clearance
- Use a chemical indicator in each instrument pack or cassette, or use sterilization pouches with internal and external indicators
- Monitor all heat sterilizers weekly with a biological monitor (spore test)
- Packages should be labeled with the date and, if multiple sterilizers are used within the facility, the sterilizer used should also be noted
- Keep contaminated items separated from clean/sterile items in the instrument processing area
- Use impervious barriers where appropriate to protect equipment and surfaces from contamination
- Replace equipment barriers after each patient
- Use intermediate level (tuberculocidal) disinfectants to clean and decontaminate surfaces in treatment areas
- Use personal protective equipment – gloves, safety glasses, face masks and gowns/lab coats when treating patients and reprocessing instruments
- Follow principles of aseptic technique during patient treatment, instrument processing and radiographic procedures
- Wash hands prior to donning gloves for treatment and immediately after removing gloves after treatment. If hands are not visibly soiled, an alcohol-based hand rub can also be used
- Change face masks between each patient or sooner if it becomes wet during treatment
- Wear a new pair of gloves for every patient; change gloves immediately if they become torn or punctured during a procedure
- Use sterile gloves for surgical procedures
- Segregate and dispose of contaminated sharps and waste according to state and federal guidelines
- Follow CDC prescribed protocol for follow-up after an exposure incident
- Vaccinate doctors, assistants and hygienists for Hepatitis B
- Maintain waterlines in dental units to provide water quality at 500 cfu/ml or less for treatment
- Use sterile water or sterile saline for surgical procedures
- Use single-dose medication vials whenever possible
- Prepare all medications in a clean area and use only sterile needles in multiple use medication vials
- Follow “standard precautions” (i.e. treating every patient) as if they are potentially infectious
- Screen patients for possible tuberculosis (TB) infections and provide only emergency treatment for patients who are known to have active TB or who are suspected of having TB because of symptoms that they exhibit
- Maintain a written infection control/exposure control for the practice – update annually
- Participate in or conduct annual OSHA-required infection control training updates

Mary Govoni, CDA, RDA, RDH, MBA
Mary Govoni brings over 40 years of experience in dentistry. She is a Certified Dental Assistant, a Registered Dental Assistant (MI) and a Registered Dental Hygienist, with experience in general and specialty practices both clinically and as an administrator. Mary is a former dental assisting educator and was a partner in a successful dental staffing service.

For the past 20 years, Mary has focused on speaking and consulting with dental teams on infection prevention, OSHA compliance, ergonomics, chairside efficiency and team communication and development. Recently Mary has added HIPAA compliance and employment law compliance to her areas of expertise. Mary has published numerous articles in professional journals. She is a life member and Past President of the American Dental Assistants Association, and serves on the ADAA Editorial Board as well as the Corporate Council for Dimensions of Dental Hygiene. Mary is also a consultant to the American Dental Association on Dental Practice (ADA) and a featured speaker on the Continuing Education and Lifelong Learning Seminar Series.

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