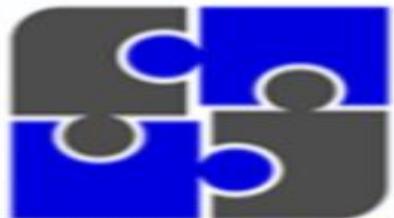




# Infection Control

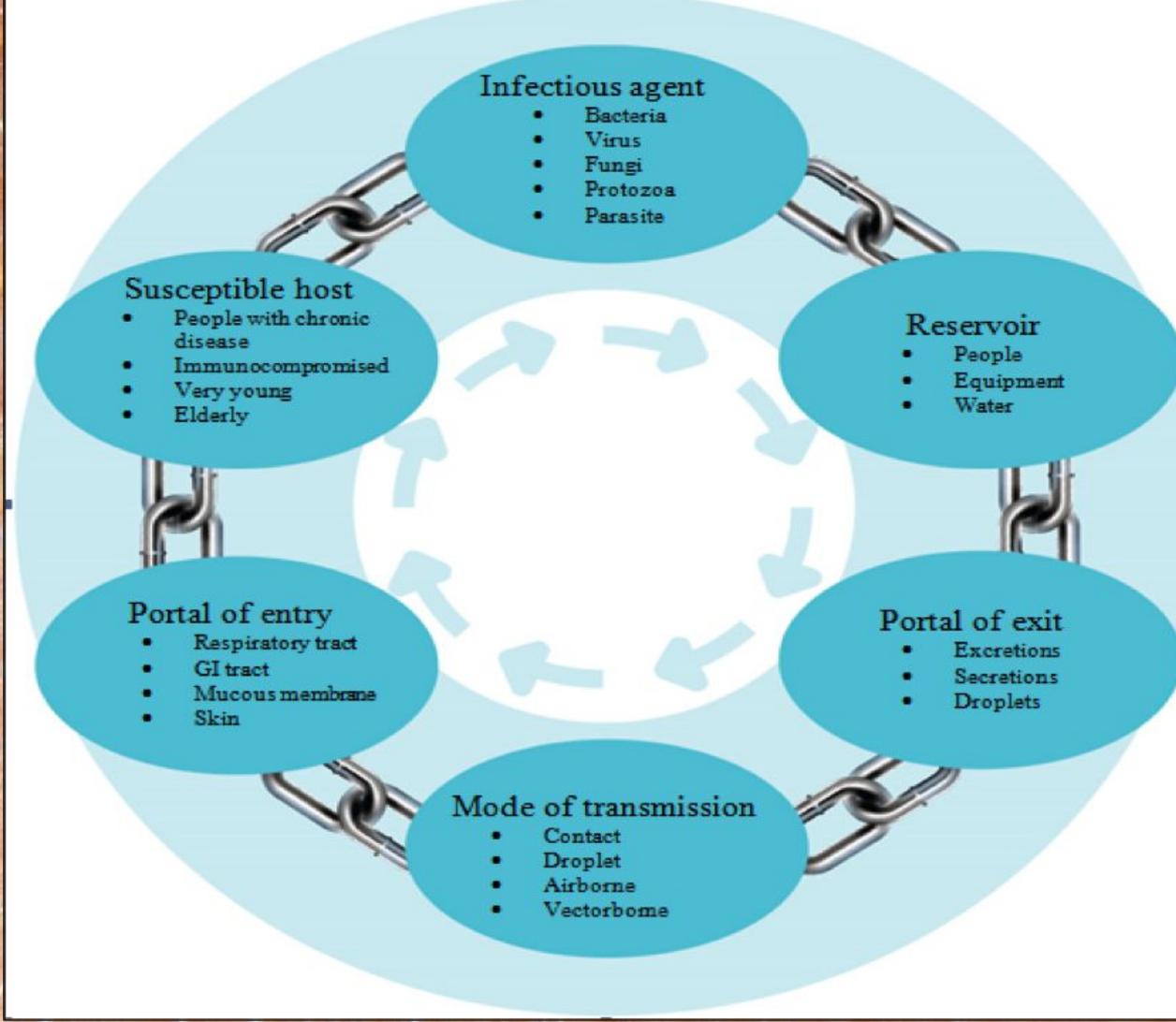


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**DDS**

DYNAMIC DENTAL SAFETY

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- **Source** - places where infectious agents survive (e.g. sinks, hospital equipment, countertops, medical devices).
  - Environment - patient care areas, sinks, hospital equipment, countertops, medical devices.
  - People - patients, healthcare workers, or visitors.
- **Susceptible person** - someone (patient, healthcare worker, or visitor) who is not vaccinated or immune to a particular infectious disease, or an individual with a compromised immune system (ie. immunodeficient)<sup>[10]</sup>.
  - In addition, susceptibility can be heightened in individuals due to underlying medical conditions, medications, and necessary treatments and procedures that increase the risk of infection (e.g. surgery).

- **Transmission -**

- Touch, including via medical equipment or a susceptible person (e.g. MRSA or VRE).
- Sprays or splashes (e.g. pertussis).
- Inhalation of aerosolised particles (e.g. TB or measles).
- Sharps injuries introducing blood-borne pathogens (e.g. HIV, HBV, HCV).

Infection prevention practices used to avoid the transmission of infectious agents

One of the most important strategies to prevent transmission of infectious agents

First line of defense to break the chain of infection

Effectiveness of Standard Precautions depends on how well steps are followed

Used with any patient, regardless of their known or suspected infection status

Assumes any patient's blood or body fluid may be infectious

Consider what type of infection control practices should be used based on the level of anticipated contact with the patient

Selection of PPE is based on the nature of the patient interaction and potential for exposure to infectious material

Put on (don) PPE prior to coming into contact with the patient

Be aware of self-contamination when PPE is used

Perform hand hygiene after PPE removal

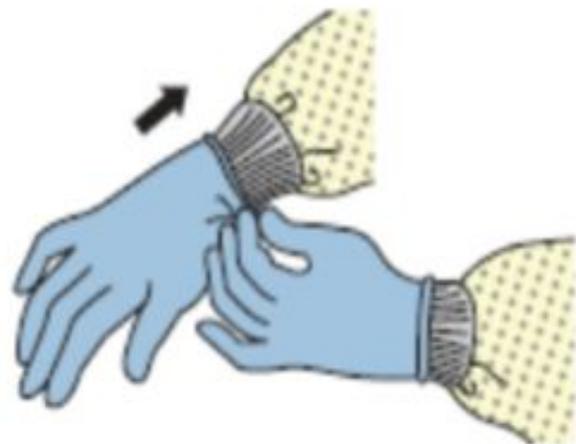
Wear gloves when anticipating contact with a patient's:

- Blood or body substances (i.e., fluids or solids)
- Mucous membranes (e.g., nasal, oral, genital area)
- Non-intact skin (e.g., wound or surgical incision)
- Insertion point of a patient's invasive or indwelling device

Select correct type of glove and size

Extend to cover wrist, over isolation gown if worn

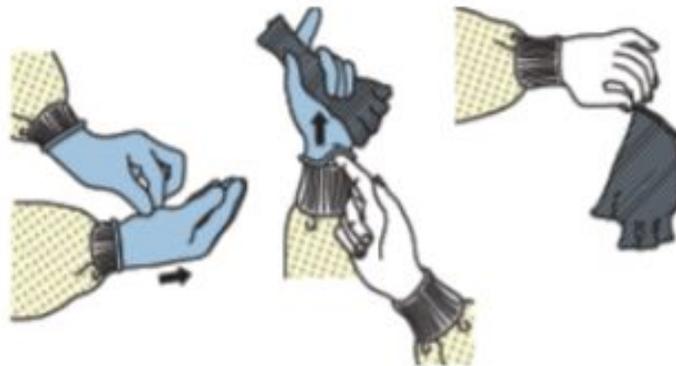
Sequence of PPE donning, ***gloves are often the last item to be put on***



There are a variety of ways to safely remove gloves, one option is:

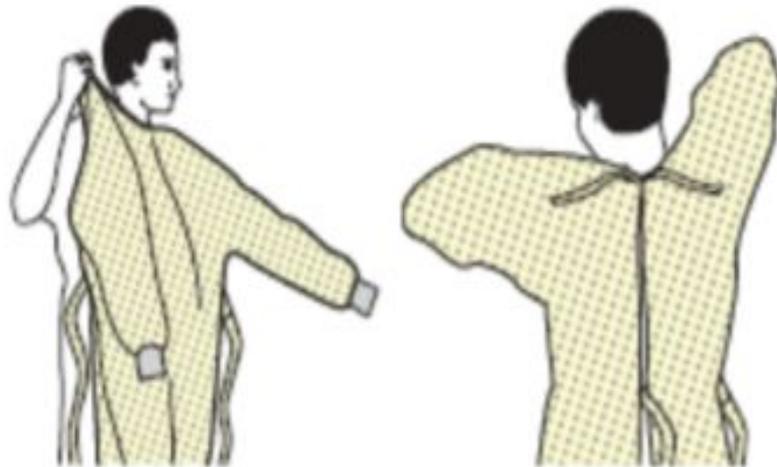
- With the gloved hand, grasp the palm area of the other gloved hand and peel off
- Hold removed glove in gloved hand; slide fingers of ungloved hand under remaining glove at wrist, peel off and discard

Sequence of PPE doffing, **gloves are usually the first item to be removed**



Gowns should cover the torso, the legs to the knees, the arms to end of wrist and wrap around the back

Slide gowns on with the opening at the back, fasten around the back of the neck and the waist



Unfasten gown

Pull away from neck and shoulders, touching inside of gown only

Turn gown inside out

Fold or roll into a bundle and discard

Remove gown and perform hand hygiene before leaving the patient's environment (e.g., exam room)



Wear when anticipating potential splashes or sprays of blood/body substances during patient care

Face Masks—protect nose and mouth

Goggles—protect eyes

Face shields—protect face (i.e., nose, mouth and eyes)

Personal eyeglasses and contact lenses are *not* considered adequate eye protection

Secure ties or elastic bands at middle of head and neck

Flexible band should fit to bridge of nose

Face mask should fit snug to face and below chin

Fit-check respirator



The key for PPE removal is to limit opportunities for environment and self-contamination

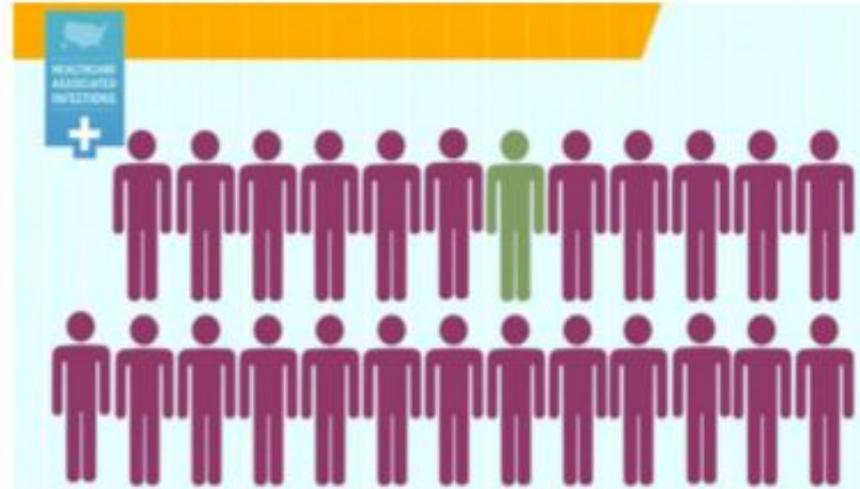
Outside front of the PPE is the area most likely to be contaminated

Perform hand hygiene after PPE removal

An example sequence of doffing PPE is as follows:

- Gloves
- Face shield/goggles
- Gown
- Face Mask

- The microbes that cause healthcare-associated infections (HAIs) can be transmitted on the hands of healthcare personnel
- Hand hygiene is one of the MOST important ways to prevent the spread of infection
- Too often healthcare personnel do not clean their hands
  - In fact, missed opportunities for hand hygiene can be as high as 50%



1 out of every 25 patients has  
a healthcare-associated  
infection

Hand hygiene applies to use of either alcohol-based hand rub or the use of soap and water. Specific methods include:

- **Alcohol-based hand rub**

- Rubbing hands with an alcohol-containing hand hygiene product

- **Handwashing**

- Washing hands with plain soap and water

- **Antiseptic hand wash**

- Washing hands with water and soap or other detergents containing an antiseptic agent

- **Surgical hand hygiene/antiseptis**

- Handwashing with antiseptic soap or using an alcohol-based hand rub before providing surgery



Visitor area: Observation Categories

1 Are hand hygiene supplies readily accessible by visitors in the waiting area?  Yes  No  N/A

2 Are face masks readily available?  Yes  No  N/A

3 Is there visible signage that clearly states that if visitors are ill, they should report to the healthcare team?  Yes  No  N/A

4 Is there visible signage that clearly states what, if any, visitor (children or otherwise) restrictions are in place?  Yes  No  N/A

TOTAL (Total YES and No Only)

|   |  |   |   |   |   |   |
|---|--|---|---|---|---|---|
| 1 | Are functioning sinks readily accessible in the patient care area?                   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 2 | Are all handwashing supplies, such as soap and paper towels, available?              | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 3 | Is the sink area clean and dry?  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 4 | Are any clean patient care supplies on the counter within a splash-zone of the sink? | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 5 | Are signs promoting hand hygiene displayed in the area?                              | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 6 | Are alcohol dispensers readily accessible?   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 7 | Are alcohol dispensers filled and working properly?                                  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |

|   |   |                              |                             |
|---|---|------------------------------|-----------------------------|
| 1 | Is the preprocessing "dirty" area separate from the clean area?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2 | Is adequate space allotted for device inspection?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3 | Are signs visible that include the reprocessing steps and recording requirements?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4 | Is a traffic flow pattern from "soiled" to "clean" clearly delineated in the area in which technicians progress through their reprocessing tasks? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5 | Is there a readily-available supply of personal protective equipment, including gloves, cover gowns, eye and face protection?                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6 | Is an eyewash station available within a 10 second travel distance from chemicals being used?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7 | Is weekly eye wash station maintenance documented, including flushing and temperature validation (60° F to 100° F, or 16° C to 38 °C)?            | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

|    |   |                              |                             |
|----|---|------------------------------|-----------------------------|
| 8  | Are chemical potency test strips stored appropriately and labeled with “opened” and “use by” dates?           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9  | Are opened liquid chemical containers labeled with the date opened and the use-by date?                       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10 | Do log books show test strip quality control recording?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11 | Do log books show results of liquid chemical germicide potency testing?                                       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12 | Are spill kits readily available?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13 | Are safety data sheets (SDS, formerly known as MSDS) available for the chemicals used in the area?            | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14 | Are instrument instructions for use (IFUs) readily available for each equipment item reprocessed in the area? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

|   |   |                              |                             |                              |
|---|---|------------------------------|-----------------------------|------------------------------|
| 1 | Are disinfected instruments stored in a manner to protect them from damage and contamination?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |                              |
| 2 | Is each piece of equipment labeled with the day of most recent disinfection?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |                              |
| 3 | Are scopes, if present, stored in a dedicated area and hung vertically to facilitate drying?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| 4 | <p>Is a log of reprocessed items (paper-based or electronic) maintained that documents:</p> <p>a. The instrument reprocessed and date,</p> <p>b. The technician who performed the reprocessing, and</p> <p>c. An indication of whether or not the reprocessing run passed or failed any necessary chemical or mechanical tests.</p> | <input type="checkbox"/> Yes | <input type="checkbox"/> No |                              |
|   |   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |                              |
|   |   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |                              |

|   |  |   |   |   |   |   |
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| 6 | Are alcohol dispensers readily accessible?   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 7 | Are alcohol dispensers filled and working properly?                                  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |

|   |  |   |   |   |   |   |
|---|--|---|---|---|---|---|
| 1 | Are gloves readily available outside each patient room or any point of care?                           | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 2 | Are cover gowns readily available near each patient room or point of care?                             | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 3 | Is eye protection (face shields or goggles) readily available near each patient room or point of care? | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 4 | Are face masks readily available near each patient room or point of care?                              | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 5 | Are alcohol dispensers readily accessible and functioning?   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |

|   |  |   |   |   |   |   |
|---|--|---|---|---|---|---|
| 1 | Are sharps containers available?   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 2 | Are sharps containers properly secured and not full?   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 3 | Are sharps containers positioned at 52" to 56" above floor?  | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 4 | Are hampers for soiled laundry labeled or color-coded?   | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |
| 5 | Are clean linen supplies spatially separated from soiled areas or waste and covered or contained within a cabinet? | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |

Perform hand hygiene

Use personal protective equipment (PPE) whenever there is an expectation of possible exposure to infectious material

Follow respiratory hygiene/cough etiquette principles

Ensure appropriate patient placement

Properly handle and properly clean and disinfect patient care equipment and instruments/devices  
Clean and disinfects the environment appropriately

Handle textiles and laundry carefully

Follow safe injection practices

Wear a surgical mask when performing lumbar punctures

Ensure healthcare worker safety including proper handling of needles and other sharps

- **Ensure appropriate patient placement** in a single patient space or room if available in acute care hospitals. In long-term and other residential settings, make room placement decisions balancing risks to other patients. In ambulatory settings, place patients requiring contact precautions in an exam room or cubicle as soon as possible.
- **Use personal protective equipment (PPE) appropriately**, including gloves and gown. Wear a gown and gloves for all interactions that may involve contact with the patient or the patient's environment. Donning PPE upon room entry and properly discarding before exiting the patient room is done to contain pathogens.
- **Limit transport and movement of patients** outside of the room to medically-necessary purposes. When transport or movement is necessary, cover or contain the infected or colonized areas of the patient's body. Remove and dispose of contaminated PPE and perform hand hygiene prior to transporting patients on Contact Precautions. Don clean PPE to handle the patient at the transport location.
- **Use disposable or dedicated patient-care equipment** (e.g., blood pressure cuffs). If common use of equipment for multiple patients is unavoidable, clean and disinfect such equipment before use on another patient.
- **Prioritize cleaning and disinfection of the rooms** of patients on contact precautions ensuring rooms are frequently cleaned and disinfected (e.g., at least daily or prior to use by another patient if outpatient setting) focusing on frequently-touched surfaces and equipment in the immediate vicinity of the patient.

## Droplet Precautions

Use Droplet Precautions for patients known or suspected to be infected with pathogens transmitted by respiratory droplets that are generated by a patient who is coughing, sneezing, or talking.

- See [Guidelines for Isolation Precautions](#) for complete details.
- **Source control:** put a mask on the patient.
- **Ensure appropriate patient placement** in a single room if possible. In *acute care hospitals*, if single rooms are not available, utilize the recommendations for alternative patient placement considerations in the Guideline for Isolation Precautions. In *long-term care* and other residential settings, make decisions regarding patient placement on a case-by-case basis considering infection risks to other patients in the room and available alternatives. In *ambulatory settings*, place patients who require Droplet Precautions in an exam room or cubicle as soon as possible and instruct patients to follow Respiratory Hygiene/Cough Etiquette recommendations.
- **Use personal protective equipment (PPE) appropriately.** Don mask upon entry into the patient room or patient space.
- **Limit transport and movement of patients** outside of the room to medically-necessary purposes. If transport or movement outside of the room is necessary, instruct patient to wear a mask and follow Respiratory Hygiene/Cough Etiquette.

## Airborne Precautions

Use Airborne Precautions for patients known or suspected to be infected with pathogens transmitted by the airborne route (e.g., tuberculosis, measles, chickenpox, disseminated herpes zoster).

- See [Guidelines for Isolation Precautions](#) for complete details.
- **Source control:** put a mask on the patient.
- **Ensure appropriate patient placement in an airborne infection isolation room (AIIR)** constructed according to the Guideline for Isolation Precautions. In settings where Airborne Precautions cannot be implemented due to limited engineering resources, masking the patient and placing the patient in a private room with the door closed will reduce the likelihood of airborne transmission until the patient is either transferred to a facility with an AIIR or returned home.
- **Restrict susceptible healthcare personnel from entering the room** of patients known or suspected to have measles, chickenpox, disseminated zoster, or smallpox if other immune healthcare personnel are available.
- **Use personal protective equipment (PPE) appropriately**, including a fit-tested NIOSH-approved N95 or higher level respirator for healthcare personnel.
- **Limit transport and movement of patients** outside of the room to medically-necessary purposes. If transport or movement outside an AIIR is necessary, instruct patients to wear a surgical mask, if possible, and observe Respiratory Hygiene/Cough Etiquette. Healthcare personnel transporting patients who are on Airborne Precautions do not need to wear a mask or respirator during transport if the patient is wearing a mask and infectious skin lesions are covered.
- **Immunize susceptible persons as soon as possible following unprotected contact** with vaccine-preventable infections (e.g., measles, varicella or smallpox).

<https://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html#>

## Example Signs (Posters)

The following are examples of signs for Contact, Droplet, and Airborne Precautions that can be posted outside patient rooms.

- [Contact Precautions - Example Sign \(Print Only\)](#)  [PDF - 1 page]
  - [Spanish Example Sign - Contact Precautions \(Print Only\)](#)  [PDF - 1 page]
- [Droplet Precautions - Example Sign \(Print Only\)](#)  [PDF - 1 page]
  - [Spanish Example Sign - Droplet Precautions \(Print Only\)](#)  [PDF - 1 page]
- [Airborne Precautions - Example Sign \(Print Only\)](#)  [PDF - 1 page]
  - [Spanish Example Sign - Airborne Precautions \(Print Only\)](#)  [PDF - 1 page]

The **ONLY** place with comprehensive advice and training:

- ❖ ***OSHA***
- ❖ ***Infection Control***
- ❖ ***HIPAA***
- ❖ ***State Board Guidelines***
- ❖ ***Dental Coding***
- ❖ ***Risk Management***
- ❖ ***Ethics***
- ❖ ***... much much more ...***



**YOU'VE  
GOT  
WORK**

**WE'VE GOT  
YOUR  
BACK**



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