



## SUMMARY OF INFECTION PREVENTION PRACTICES IN DENTAL SETTINGS: WHAT EVERY CLINICIAN MUST KNOW

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The publication, *Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care* has been released by CDC (March 2016). For those in the dental health profession who have been anticipating this release, the question remains: What new infection control and safety guidelines are being recommended by CDC? The answer: **There are several new recommendations but...There are NO new guidelines!**

### If there are no new guidelines, why did CDC publish this document?

Although disease transmission in the dental setting is rare, there have been a number of breaches in infection control and reported transmissions since the release of the CDC *Guidelines for Infection Control in Dental Health-Care Settings—2003*. However, after much investigation and scrutiny, the conclusion reached by the CDC is that the reported transmissions were a result of human error and/or lack of compliance with the existing Guidelines. As a result, the Summary notes 'the need for comprehensive training to improve understanding of underlying principles, recommended practices, their implementation, and the conditions that have to be met for disease transmission.'

### What is the Summary of Infection Prevention Practices in Dental Settings?

This document was introduced by the CDC as a "plain language" summary of the 2003 Guidelines. The entire Summary reaffirms that Standard Precautions are the foundations for infection prevention. The document is 43 pages in length and focuses upon two major areas of interest:

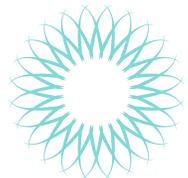
1. **Fundamental elements needed to prevent transmission of infectious agents in dental settings.** Reviews of these elements, key CDC recommendations, links to source documents with relevant recommendations published by the CDC since 2003 and additional resources by topic area are provided.
2. **Infection prevention checklists for dental settings.** These checklists are a companion to the Summary. They assess administrative policies and dental setting practices that should be included in the written infection prevention program, and personnel compliance that fulfill infection prevention expectations for dental health care settings.

### What are Standard Precautions? Have they changed?

Standard Precautions are a set of infection control practices used to prevent transmission of diseases that can be acquired by contact with blood, body fluids, non-intact skin and mucous membranes. The concept of Standard Precautions was adopted by the CDC in 1996 and have not changed. However, several elements of Standard Precautions have been addressed by CDC since the release of the 2003 Guidelines. New recommendations in the area of Standard Precautions are available for the following: Respiratory hygiene/cough etiquette, safe injection practices and sterilization & disinfection of patient care items.

### Who is the Summary of Infection Prevention Practices in Dental Settings intended for?

This document includes basic infection prevention recommendations and is applicable for ALL dental health care settings. This includes: traditional settings (private practice, clinics, dental schools and other dental educational programs) and non-traditional settings (mobile clinics, humanitarian dental missions, clinics in schools for sealant and fluoride placements).



### What are some of the relevant recommendations published by the CDC since 2003?

The CDC continually publishes updated guidelines and recommendations for health and safety. Some of the key topics pertinent to dental health care settings and new recommendations provided in the Summary include:

1. **Administrative measures:** Develop and maintain written infection prevention policies and procedures to be reassessed at least annually and assign at least one trained individual the responsibility of coordinating the program.
2. **Infection prevention education and training:** Maintain training records according to state and federal requirements.
3. **Respiratory hygiene/cough etiquette:** Dental personnel should be educated about the signs and symptoms of respiratory illnesses and make every attempt to minimize transmission of respiratory pathogens via airborne routes in the dental setting.
4. **Safe injection practices:** The concept of safe injection practices is illustrated in the “One and Only Campaign”: Use one needle, one syringe, only one time.
5. **Sterilization and disinfection of patient-care items and devices:** Have manufacturer instructions for reprocessing reusable dental instruments readily available, ideally in/near the reprocessing area. Label sterilized items with the sterilizer used, cycle or load number, and date of sterilization.

### How may this Summary document be utilized?

This Summary may be used for:

- Introducing new dental health care personnel (DHCP) to basic information about infection control in dental health care settings
- Strengthening your current knowledge of infection prevention
- Reviewing the elements of standard precautions as they pertain to dental care
- Ensuring your dental health care setting has appropriate infection prevention policies and practices in place, including appropriate training and education and adequate supplies
- Assessing compliance with the expected infection prevention practices and provide feedback to DHCP regarding performance

### How should the Two-Part Infection Prevention Checklist be used?

The Two-Part Checklist is meant to be a companion to the Summary guide to assess practices and ensure the minimum expectations for safe care are met. Evaluation offers an opportunity to improve the effectiveness of both the infection-control program and dental-practice protocols. If deficiencies or problems in the implementation of infection control procedures are identified, further evaluation is needed to eliminate the problems.<sup>1</sup>

**Section I** focuses on policies and practices of a dental facility. This checklist serves as a tool to enhance understanding of underlying principles, recommended practices and their implementation. It helps the staff assess whether a dental facility has appropriate infection prevention policies and practices in place, appropriate training for team members, and adequate supplies to provide safe care and a safe working environment.

**Section II** of the checklist involves direct observation of personnel and patient-care practices. This checklist provides a review of practices for basic expectations for safe dental care and aids in standardizing infection control protocol, and enhancing compliance with existing CDC Guidelines and provides feedback to dental personnel regarding performance.

### How frequently should the checklist be utilized?

The Summary does not provide specific recommendations regarding frequency of checklist usage. However, CDC provides guidelines (and OSHA provides regulations) regarding initial, additional, and annual training of dental personnel. These checklists may be utilized during any phase of education and training. Recommendations for training include:

#### Initial Training

- Whenever there is a change in responsibilities of staff or infection control manager
- Whenever there is a change in office procedures where there is a potential of an occupational exposure/hazard
- In response to changes in government regulations or recommendations

#### Additional Training

- If there are changes in policies, procedures or products
- If new information is available or if there are changes in recommendations or regulations
- If someone does not follow standard operating procedures

#### Annual Training

- Required for specific OSHA standards such as the Bloodborne Pathogens Standard
- Recommended as good office policy

Reference:

OSHA & CDC Guidelines: Interact Training System, 4th Edition <https://osap.site-ym.com/store/ViewProduct.aspx?id=401844>

### Should dental personnel be intimidated that they will now be directly observed and assessed?

**NO!** This checklist is not intended to be a tool to enhance enforcement by “the infection control police.” Dental health care personnel should address infection control compliance as they do with all other clinical matters—as a well-established team. Within a “culture of safety” all team members feel respected and free to contribute, and lines of communication are opened. When this occurs, barriers to compliance may then be recognized and addressed, and further education and training may be provided to DHCP as needed.

### Is the Summary of Infection Prevention Practices in Dental Settings intended to replace Guidelines for Infection Control in Dental Health-Care Settings—2003?

**NO!** The Summary is not all encompassing. It is not intended to replace more extensive guidelines as it lacks much of the scientific background and detailed discussions regarding specific infection control policies and protocol. Readers of the Summary are encouraged to consult the full Guidelines and source documents for additional background, rationale and scientific evidence behind each recommendation.

### Where may I find more information about the Summary?

*Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care* and other CDC resources may be found at: <http://www.cdc.gov/OralHealth/infectioncontrol/guidelines/index.htm>

The Organization for Safety, Asepsis and Prevention (OSAP) provides an overview of the Summary and a review of its utilization. Links to webinars, online training, toolkits and live lectures regarding the Summary are provided. Ref: <http://www.osap.org/page/NewCDCSummary>

1. Guidelines for Infection Control in Dental Health-Care Settings – 2003  
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm>

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