INFECTION CONTROL IN DENTAL PRACTICE

MAGED LOTFY

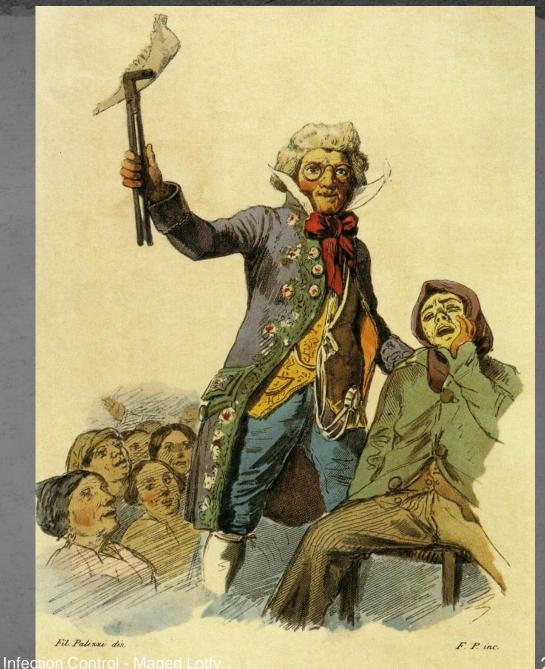
Part I

This was haw the society see the dentist in the 18th and the beginning of the 19th centuries

• Very cruel person

• Do his work on the village market

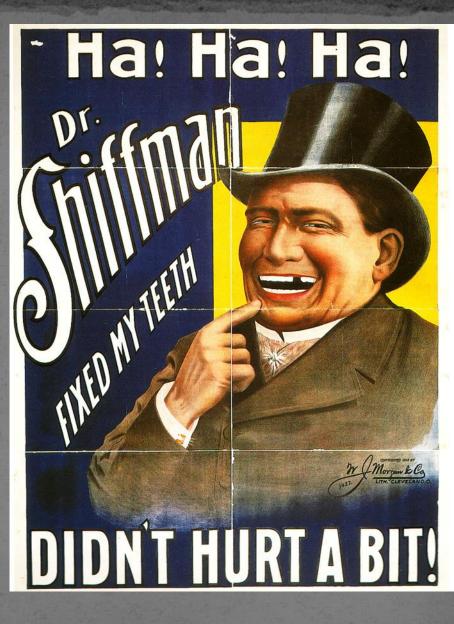
• No trial is done to prevent any contamination



IL CACCIA-MOLE IN CARNEVALE

This is an advertizing that was Very common in the late years of the 19th century and early years of the 20th century.

It emphasis that "Dr Shiffman Fixed his teeth with out any hurt"



The main concern of patient at this time was to avoid the pain that is believed to associated with any dental treatment



This is another drawing from the same era representing what we can considered a dental office ... Note the following

- No patients privacy
- No measures for infection control what so ever (masks, gloves, gowns)

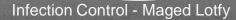
Cross-Infection







Chain of Infection



Route of Entry

Susceptible Host

Composition of the contraction

We are no longer treating teeth in patients but rather patients who have teeth

Patients Today are Different

- Patients with Hepatitis
- Patients with AIDS
- Patients with TB
- Patients with renal failure, dialysis and renal transplant
- Patients with diabetes
- Patients with joint transplant

Many of the diseases that were considered fatal few years ago can now be controlled

Diseases that Can be Transmitted in Dental Clinic

Hepatitis B & C AIDS

Tuberculosis

- Herpes Simplex type 1 & 2
- Organisms causing Upper Respiratory Tract infection

Routes of Disease Transmission

• **Direct Route:**

 Direct contact with patient's blood, saliva and tissue fluids

• Indirect Route:

Contact with contaminated materials

Infection Control Modalities

- Vaccination
- Protective & barrier technique
- Care of hands
- Sterilization of instruments
- Cleaning and disinfection of dental unit and environmental surfaces
 Sterilization of hand pieces

Infection Control is a Team Work

Infection control is the responsibility of all DHCWs as a team any break is the team the whole infection control process will fail

The Dentist

The Cleaners

The Nurse

I. Vaccination

All dental health care workers (DHCWs) must be vaccinated against

Hepatitis B

II. Protection & Barrier Technique

A. Medical Gloves

• Surgical gloves (Sterile) Used in surgery and invasive procedures including single tooth extraction and deep scaling

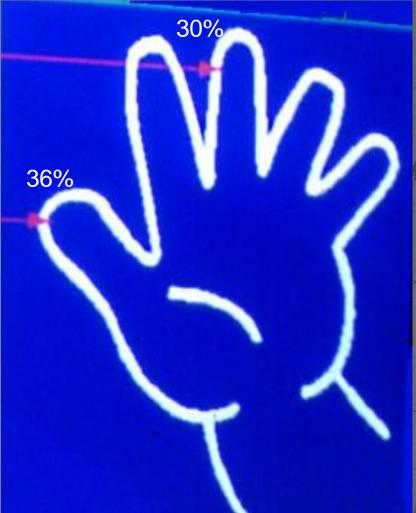


 Non-Surgical Examination gloves (Non-Sterile): Used for examination and noninvasive procedures as filling, prosthodontic and orthodontic work



Multiuse of Gloves

Micro perforations occur on the gloves
Even with prolonged use micro perforations occur in 13% of cases

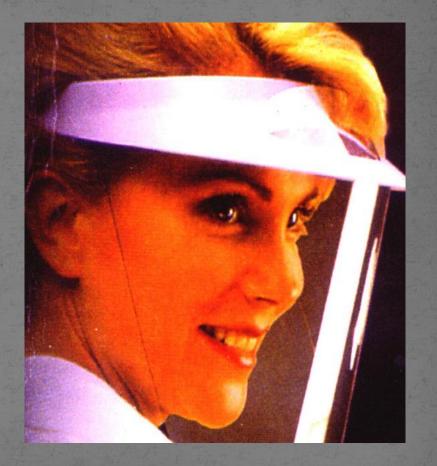


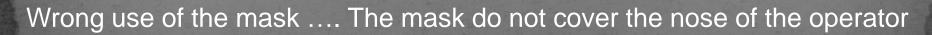
Instructions for Using Gloves

- Wash hands before wearing gloves
- Do not wash hands while wearing gloves
- After treatment discard gloves and wash hands again
- Gloves should not be reused
- If glove torned, punctured or cut during treatment it must be changed

B. Face Protection

- This is achieved by using:
- Chin Length plastic face shield ... or
- Face Mask & Protective Eye Glasses
 - The mask is changed between patients
 - The eye glasses are disinfected between patients



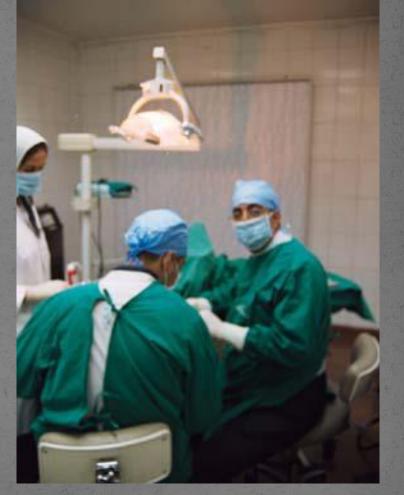




Wrong use of the gloves The operator is wearing her watch under the examination gloves

C. Clothes Protection

- For surgical procedures scrub suit and sterile gowns are used
- Gowns are changed after every patients



• In theater room complete clothes and face protection are essential and should be changed after every operation • All gloves and gowns used must be sterilized

In 1960,s and early 70,s it was accepted to do examination for patients without wearing gloves

Now This is Completely UNACCEPTED



 For noninvasive procedures white coat is used and is changed when apparently not clean

INFECTION CONTROL IN DENTAL PRACTICE

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Part II

III. Care of Hands

- Before and after nonsurgical procedures, hands are washed with water and soap
- Before and after surgical procedure hands are washed with antimicrobial agents as Betadin
- Rings, watches, braces and similar items are not allowed during gloving
- See next slide for proper hand washing technique.



Wet hands with water;



Right palm over left dorsum with interlaced fingers and vice versa;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Dry hands thoroughly with a single use towel;



Apply enough soap to cover all hand surfaces;

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Palm to palm with fingers interlaced;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



Use towel to turn off faucet;



Rub hands palm to palm;



Backs of fingers to opposing palms with fingers interlocked;



Rinse hands with water;



Your hands are now safe.

Handling Sharp Instruments

Needles, Scalpels, Disposable Syringes





Stick with needle contaminated with blood of hepatitis carrier increases risk of transmitting the diseases by 10-30%

•Never use two hands technique to recap the needle

•Always use one hand technique to recap the needle with or without the aid of simple device

Remember

- Use **one hand** technique when recapping the needle
- The needle showed be recapped **before its removal** from the syringe
- Used needles, scalpels, plastic syringes and similar items should be discarded in a puncture resistant container that should be labeled with danger biomaterials label

IV. Sterilization of Dental Items

Critical Items Sterilization

Skin or Mucous membrane penetrating instruments

Semi Critical Items High-level Disinfection

Non penetrating instruments

Non Critical Items Low-Level Disinfection

Instruments that will not come in contact with blood or saliva or other body secretions

Definitions Sterilization

Killing of all forms of microorganisms from an instrument or surface
It is a matter of yes or no No thing can be half sterilized

Disinfection

• Killing of some of the pathogenic microorganisms **But not necessary all** organisms from a surface • Disinfection can be high, intermediate or low level

A golden role for infection controle If A Disposable Is Available Use It



Aprons, Suction tips, 3-way Syringe Disposable Tips or Sleeves Mirrors, Probes, Tweezers, Endodontic Instruments, and others

Critical Items Sterilization

- Extraction forceps
- Surgical instruments
- Periodontal scalars
- Ultrasonic scales tips
- Surgical burs
- Endodontic instruments

Semi-Critical Items High-Level Disinfection

- Examination instruments
- Operative instruments
- Impression trays
- Burs and stones (nonsurgical)
- Orthodontic instruments
- Saliva ejectors and water syringe tips
- Removable and fixed prosthesis when first com from lab

Non-Critical Items Intermediate or low-Level Disinfection

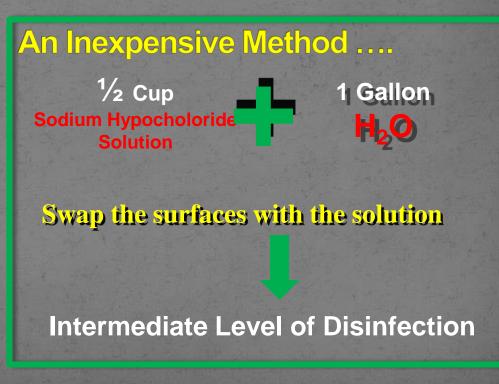
- X-ray tube
- Head rest
- Instruments table
- Handles of saliva ejector and suction
- Handle of light
- The spittoon

V. Cleaning & Disinfection of Environmental Surfaces

The **purpose** is to remove the patients materials that may possibly contaminated the dental unit and the environmental surfaces

Methods

- Disposable cover for the head rest
- Aluminum foils or plastic covers used to cover light handles, control buttons.....
- Germicide spray is used to spry the dental chair and instrument table
- Germicide powder is used to disinfect the tubes of the saliva ejector and suctions

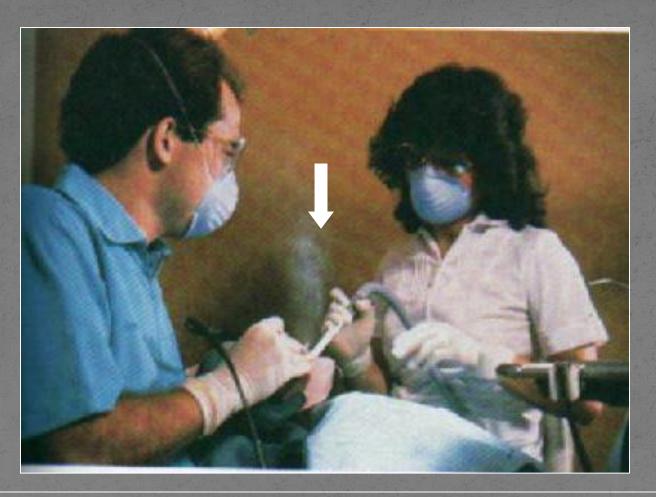


VI. Sterilization of Hand Pieces

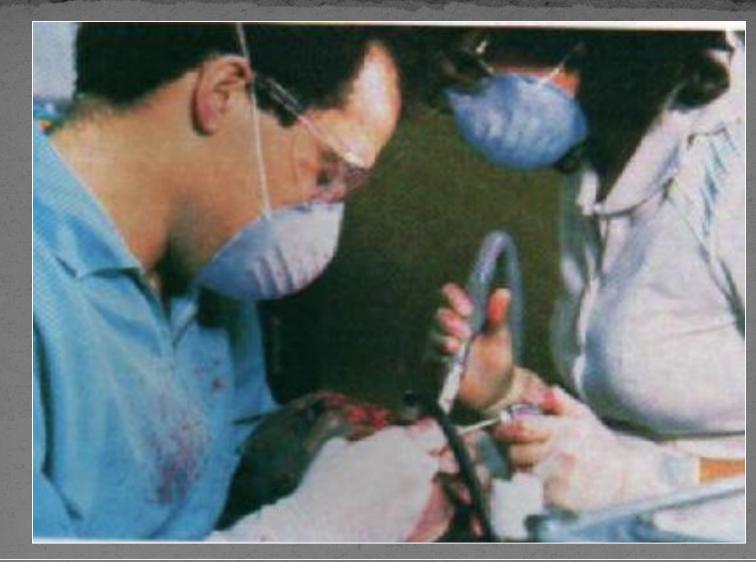
- After each patient allow the HP to work for 20-30 seconds to expel water and air and remove any contaminated materials
- After removal from the unit the HP is cleaned, lubricated, packed and placed in the autoclave



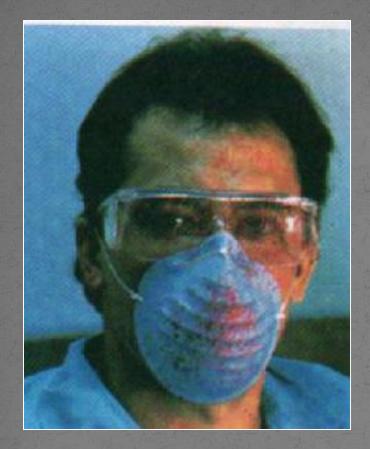
In Dental Practice



• The dentist and his assistant are using the appropriate barrier technique.



A red dye, simulating saliva, is used to demonstrate areas of contamination during single class II cavity preparation on lower molar. The dye was found to splash on the face, hair, gloves and chest of both the dentist and his assistant.



After Completing Cavity Preparation



- The dentist, note the splash on his mask.
- The assistant, note the contamination on her chest and gloves.



The use of a fluorescent light more dramatically demonstrated the contamination that occurred from the red-dyed saliva after completing a single cavity preparation... Infection Control - Maged Lotfy



 Contaminated hands transmit saliva to the mask, glasses and face of the operator or his assistant as well as to the environmental surfaces

METHODS OF STERILIZATION AND DISINFECTION AVAILABLE IN DENTAL PRACTICE

160°C

1.

Heated

Instruments are left inside for

Dry Hot Oven

120 min

Heating time not included

Disadvantages
Long time for sterilization
The presence of cold spots at which temperature do not reach 160°C
No drying cycle and instruments corrosion may occur

2. Steam Autoclave

Steam Under Pressure Steam Under Pressure with Vacuum

135°C

Instruments are left inside for

15-20 min

Instruments should be packed





A modern steam autoclave



A sample for an old fashion container that was used for sterilization of the surgical instruments

The holes in the sides of the box are opened when placed in the autoclave and closed by a sliding piece of metal to keep the instruments sterile for sometime



3. Chemicals (Cold Sterilization) e.g. Cidex

Should be freshly prepared

The solution is prepared by adding an activator powder to the solution in a ratio given by the manufacture

For sterilization Instruments are left inside for

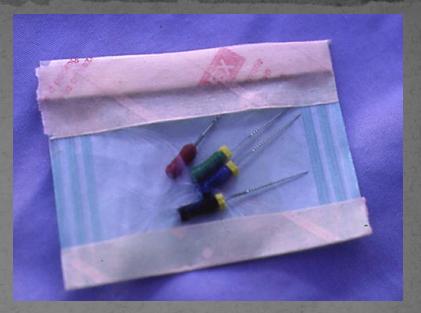
12 Hours

Less than 12 hours some level of disinfection is obtained but not sterilization

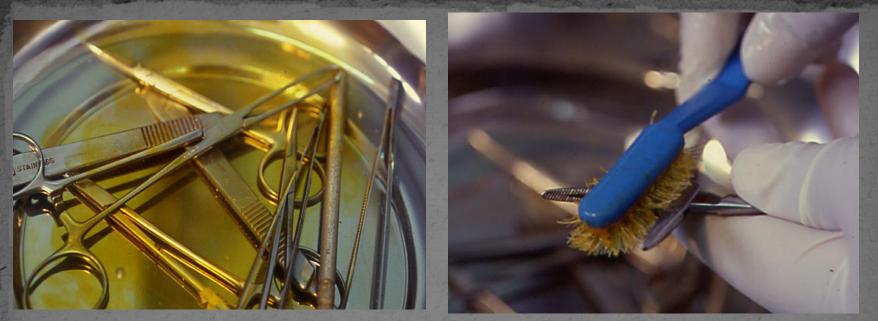








- This old fashion glass pead sterilizer was in common use few years ago.
- It was claimed that placing the instrument in this hot balls of glass affect sterilization in few seconds
- It was mainly used for sterilization of endodontic files
- Researches proved that sterilization can not be affected by using this apparatus



After using the instruments it should be placed in a disinfectant solution until time is suitable for cleaning which can be done using a brush or an ultrasonic cleaner.

<u>Why ?</u>

•To make <u>cleaning easier and more efficient</u> by preventing drying of patients material.

 Reduces the level of <u>airborne contaminants</u> by including them in liquids

 The Holding solution begin the cleaning process by reducing the level of contamination of the instruments





STERI MISR

Why?

•<u>To Protect</u> items and maintain sterility

Unpacked Items

Should be

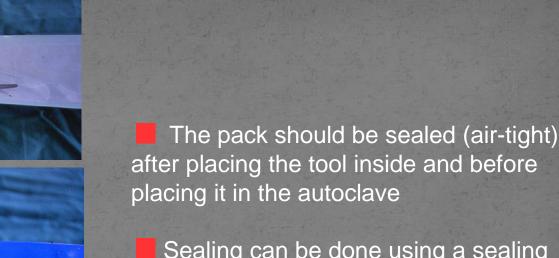
Used Immediately

Exposed to environment and may be contaminated by dust aerosols, improper handling or contact with contaminated surfaces

•The packing papers may be supplied in the form of rolls of different width and length.

•The pack have an color indicator that changes color when in subjected to temperature in the autoclave

•The date at which the pack is placed in the autoclave should be registered on the pack as instruments that has not been used for one month after sterilization should be repacked and re- sterilaized



Sealing can be done using a sealing machine that seal the pack on three successive lines to ensure air-tight sealing

Sealing tape can also be used



Packing and sealing machine

Infection Control In Dental Practice Instruments Recirculation

Maged Lotfy

Head of OMS Dept, Director of OMRSU Ain Shams Dental School Treasurer of EAOMS

1. Protective Equipment



- Gloves
- Face mask
- Protective eyeglasses
- Gown

Why?

To protect dental workers and patients against infectious hazards



Wash Hands and Forearms Before Glove Placement and After Glove Removal

- 1. <u>Wash hands</u> and rinse twice for at least 15 seconds
 - Use soap and tap water
 - Pay attention to fingertips
 - Avoid splashing
 - Keep nails short
- 2. <u>Gloves:</u> Use the proper glove for the proper purpose
- 3. Eyeglasses: Should include side shield or face shield
- 4. Mask: High filtration and close facial fit
- 5. <u>Head and shoe covering:</u> Essential in the steri-center area

6. <u>Wear Personal Protective equipment</u> for the entire sterilization procedure



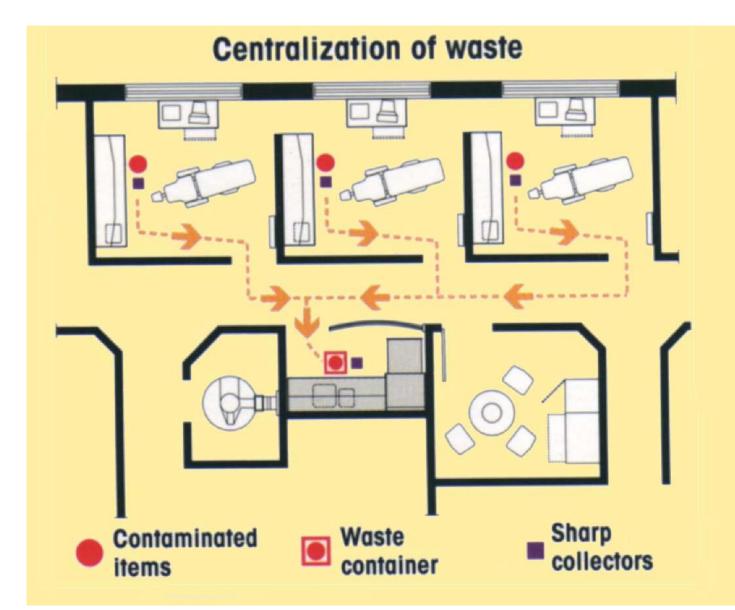
Waste Management

<u>Why ?</u>

•To prevent access to medical waste by unauthorized persons

•To prevent destruction or spillage of waste

•To protect waste from <u>insects</u>



Maintain integrity of containers & Prevents odor

nstrument Recirculation - Maged Lotfy

<u>How ?</u>

1. Sharp Items & Human <u>Tissues:</u> Should be discarded in the operatory room in a special non-puncture container

- <u>Minimize movements</u> with sharp items and biological material

2. Contaminated Items & Biological materials: Should always kept out of sight and discarded immediately according to proper requirements.

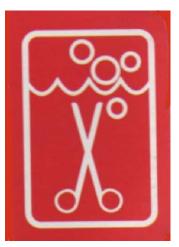


Hands-Free knee opening waste container



High-capacity waste container with disposable collector for sharps and biowaste

Instrument Regireu



3. Pre-Soaking

Why? To make cleaning easier and more efficient by preventing drying of patients material.

 Reduces the level of airborne contaminants by including them in liquids

 The Holding solution begin the cleaning process by reducing the level of contamination of the instruments

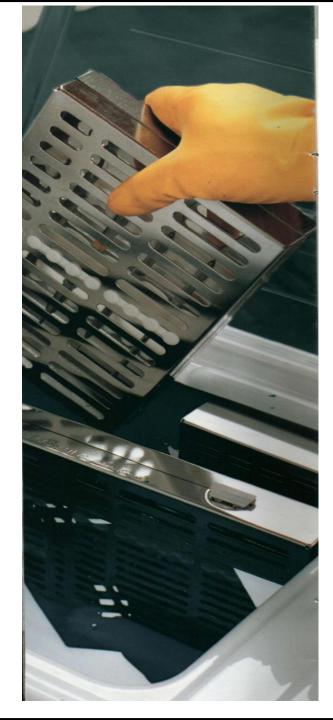
<u>How ?</u>

<u>1. Use a NO-TOUCH technique:</u> To handle instruments for the entire sterilization process by using transfer baskets or cassettes

<u>2. Keep instruments in holding solution: Until time</u>
<u>is available for full cleaning</u>
<u>3. Drain the holding solution and change it daily</u>



Transfer basket for no-touch technique





Transfer basket can be used for chemical sterilization-disinfection and for impression tray and lab appliances disinfection

Instruments Cassette

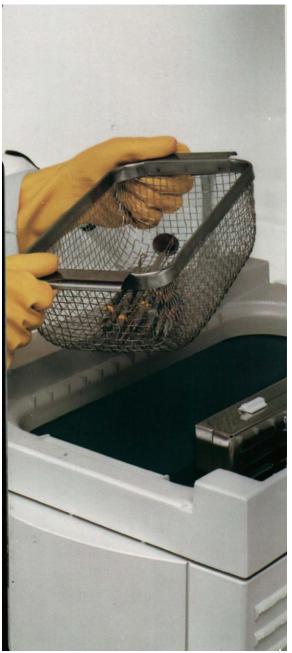


4. Ultrasonic Cleaning

<u>Why ?</u>

•<u>To remove</u> blood saliva, tissue and other complex proteins that may interfere with disinfection or sterilization

•<u>Ultrasonic is recommended</u> as it increases cleaning efficiency and avoid possible splatter during manual brushing



<u>How ?</u>

<u>1. Use basket or cassette: to</u> suspend instruments in tank

2. Always cover tank: To prevent splatter and sonic induced aerosol

<u>3. Drain solution:</u> And **disinfect chamber daily**



5. Rinsing

Why?

•<u>To remove</u> dislodged debris, microorganisms, detergent and residual cleaning solution

It completes the cleaning process



•<u>How ?</u>

•Run tap water

•<u>Rinse instruments in a basket</u> or cassette

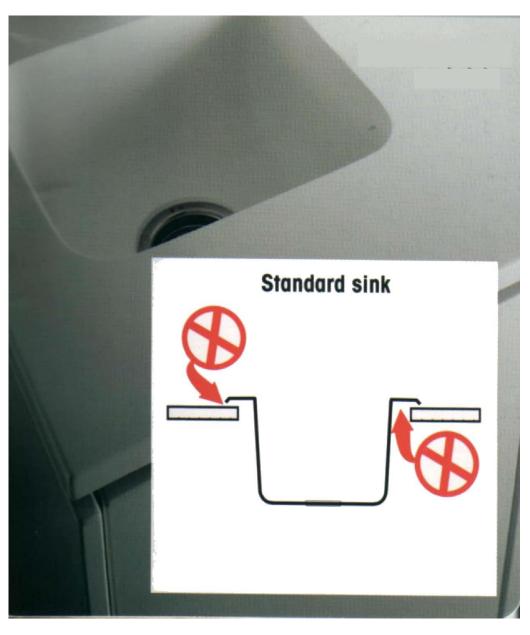
Avoid splashing



Water foot control

Instrument Recirculation - Maged Lotfy

The use of standard sink permit harmful dirt and bacteria deposits

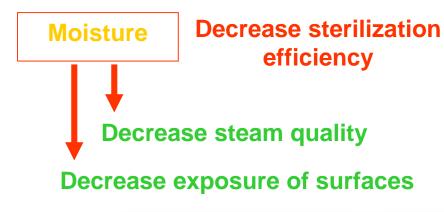


Instrument Recirculation - Maged Lotfy



6. Drying

•<u>Wetness interferes</u> with all sterilization methods



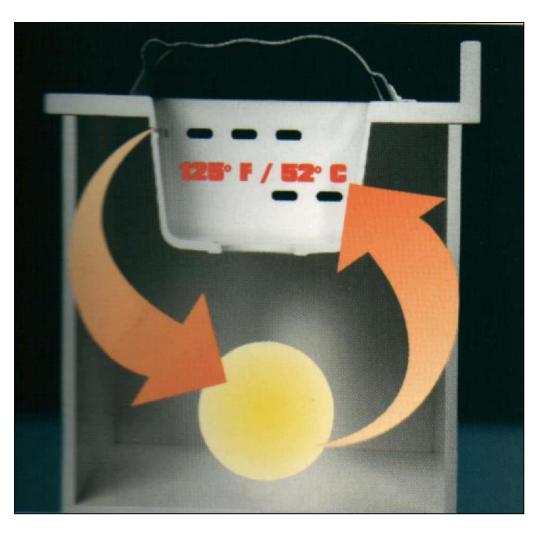
Prevent corrosion, rusting, dulling, spotting of instruments

nstrument Recirculation - Maged Lotfy



How?

- Better to use dryer
- <u>Put instruments in</u> <u>transfer basket or</u> <u>cassette</u>
- <u>Shake instruments</u> to remove excess water





7. Lubrication

<u>Why ?</u>

- Ensure effectiveness
 - of sterilization and longevity of HP
- Help to remove
 - patient's material from inside the HP and add lubricant



<u>How ?</u>

- Disinfect the HP
- <u>Remove burs</u>
- Spray oil in HP
- <u>Apply</u> 2x2 gauze on the head
- <u>Run HP for 20-30 sec</u>





8. Corrosion Control

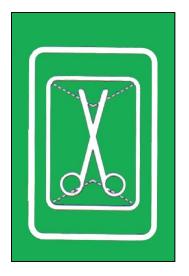
Why? • <u>To Protect</u> items from corrosion and tarnishing

How ? •<u>Put burs</u> in container

•<u>Dip burs</u> in a beaker filled with rust inhibitor

Drain to minimize the moisture





9. Packing

Why? •<u>To Protect</u> items and maintain sterility



Exposed to environment and may be contaminated by dust aerosols, improper handling or contact with contaminated surfaces

<u>How ?</u>

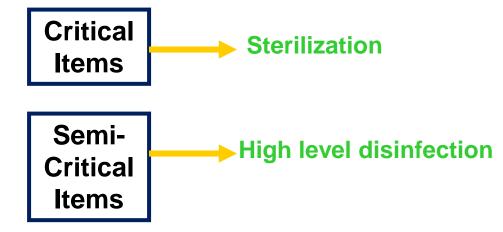
- <u>Make sure</u> that instruments are clean and dry
- <u>Arrange instruments</u> in functional sets to be used in a single patient
- <u>Put chemical indicator</u> inside and in the center of each multiple instruments pack or cassette
- Keep instruments packed until use
- Indicate on the package name of item and date of sterilization





10. Sterilization

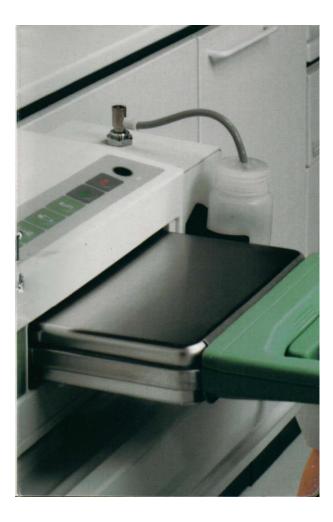
Why? •<u>To Protect</u> dental personnel and patients from infection

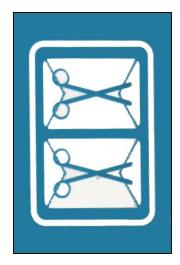




How?

- Sterilize only clean and dry items
- Operate and never interrupt a cycle
- Spore test the sterilizer weekly





<u>Why ?</u>

•<u>To Protect</u> instruments from contamination •Prevent package tear or punctures

11. Storage



Instrument Recirculation - Maged Lotfy

How?

- Storage area should be
 - dray
 - dust free
 - away from heat, water and drain
- <u>Keep items</u> warped until use
- <u>Use "first-in-first-out" system</u>

• <u>After "One month" Resterilize</u> unused paper warped items