# **State of Iowa Department of Corrections Policy and Procedures**

Policy Number: HSP-1003 Applicability: Institutions Policy Code: Public Access Iowa Code Reference: N/A Chapter 6: Health Services

Sub Chapter: Dental

Related DOC Policies: HSP-206, HSP-907, HSP-909, HSP-911, IO-SE-25

Administrative Code Reference: N/A Subject: Dental Infection Control ACA Standards: 5-ACI-6A-17

PREA Standards: N/A

Responsibility: Dr. Michael Riley Effective Date: December 2024

Authority:

## 1. PURPOSE

To provide guidelines which ensure a safe environment for the delivery of dental services to patients.

## 2. POLICY

It is the policy of the Iowa Department of Corrections (IDOC) to provide a safe and healthy workplace for the delivery of dental services.

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## 3. PROCEDURES

## **A. Universal Precautions**

- Hands must be washed before and after providing patient dental services, and immediately if they become contaminated with blood or other bodily fluids.
- 2. OSHA prohibits eating, drinking, applying cosmetics or lip balm, and handling contact lenses in work areas where there is a reasonable likelihood of occupational exposure.

# **B.** Barrier Techniques

- 1. Disposable gloves (single use), protective eyewear with solid side shields and surgical masks are to be worn. Shields are to be worn for all procedures that result in the generation of droplets (bloody sputum) and/or splashing of blood or other bodily fluids.
- 2. Wearing gowns, lab coats or aprons (impervious garment required) when procedures are likely to result in splashing of blood or other bodily fluids, or the generation of bone chips.
- 3. A Rubber Dam technique is recommended in every possible endodontic/restorative dental treatment situation.
- 4. Disposable (single use) gloves shall not be washed or decontaminated for reuse.

## C. Sharps

- 1. Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed, except as noted below. Shearing or breaking of contaminated needles is prohibited.
- 2. Contaminated needles and other contaminated sharps shall not be recapped or removed, unless the employee can document that no alternative is feasible, or that such action is required by a specific medical procedure, e.g., contaminated needles must be recapped due to the possibility they may need to be used again on the same patient during a dental procedure.
- 3. Any necessary needle recapping or removal must be accomplished through the use of a mechanical device or a one-handed technique.
- 4. Immediately, or as soon as possible after use, contaminated sharps shall be placed in appropriate containers until properly reprocessed. These containers shall be puncture resistant; labeled with the biohazard symbol or color coded in red; be leak proof on the sides and bottom; and, handled consistent with applicable institutional housekeeping and infection control policy.
- 5. Broken glassware that may be contaminated shall not be picked up directly with hands; they should be retrieved using mechanical means and placed in a sharps container.

#### **D. Contamination Events**

During a procedure, if a glove is torn or perforated by any sharp object, the glove shall be removed, hands washed, and replaced with a new glove as promptly as patient safety permits. The needle or instrument involved in the incident shall also be removed from the sterile field. For additional assistance in the management of contamination events, please refer to relevant IDOC Health Services Policies. These include **IO-SE-25** Exposure Control Plan for Bloodborne Pathogens, **HSP-206** Employee Health; **HSP-907** General Control Measures, and **HSP-911** Blood and Body Fluid-Tissue Exposure.

Garments contaminated by blood or other potentially infectious material shall be removed immediately, or as soon as possible, and all personal protective clothing shall be removed prior to leaving the work area. These will be placed in an appropriately designated area or container for storage, washing, decontamination or disposal. Each facility shall develop procedures on laundering of contaminated clothing.

## E. Sterilization and Disinfection Practices

Standard sterilization and disinfection practices are considered adequate for reprocessing, disinfecting, and sterilization items contaminated with blood or other bodily fluids. These include:

- 1. Environmental surfaces that have not been contaminated with blood or other bodily fluids require only routine cleaning.
- 2. A disinfectant approved by the Environmental Protection Agency (EPA) for hospital use should be used for all items requiring disinfection, which includes all areas contaminated by blood and other bodily fluids.
- 3. Handpieces must be heat sterilized after each patient's use.
- 4. All dental instruments which are not disposable must be heat sterilized after each patient use.
- 5. Work surface, chair, light, and all hook-ups for air and water, suction, and handpieces must be disinfected after each treatment procedure.

## F. Communication of Hazard

See IDOC Policy **IO-SE-25** Bloodborne Pathogen Exposure Control Plan.

#### G. Sterilizers

Sterilizers will be monitored per CDC guidelines for infection control in dental healthcare settings: Monitor sterilizers at least weekly by using a biological indicator with a matching control (i.e., biological indicator and control from same lot number).

## **H. Extracted Teeth**

Extracted teeth are considered biohazard and must be disposed of in designated biohazard receptables. Extracted teeth are not the property of the patient.

However, if established religious practice requires it, the patient may be requested to provide proof or reason of their faith and/or biblical text. In this case, the extracted tooth will be cleaned of blood, placed in a sterilization pouch, and sterilized in an autoclave. The patient will be required to have the extracted tooth picked up per facility procedure.