

OSHA's mission is to assure the safety & health of America's workers by: • Setting and reinforcing standards • Establishing partnerships • Encouraging continual improvement in workplace safety and health



Employers must:

- Provide workers with training specific to significant hazards
- Retrain annually AND as needed for newly introduced hazards
- Provide PPE (gloves, masks, gowns, protective eyewear)
- Provide an exposure control plan for bloodborne pathogens (we'll cover in more detail later in the program)

### Employee Responsibilities: Making Office Health & Safety a Reality Requires **YOUR** Cooperation

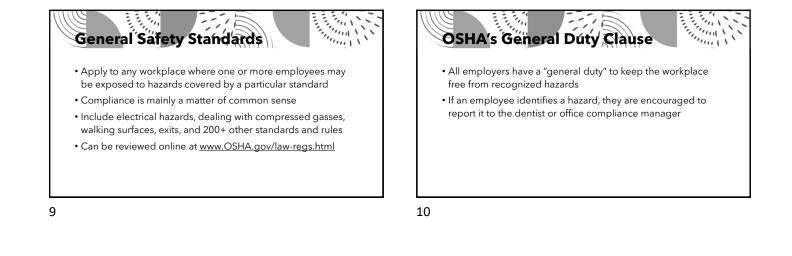
Procedures employees must follow include:

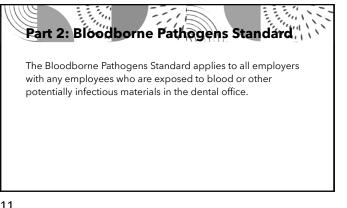
- Using any personal protective equipment as directed by your employer
- Handling contaminated needles and other sharp instruments with care and disposing of them properly
- Promptly reporting any "exposure incidents"
- Bringing any questions or concerns related to workplace safety to the attention of your employer/compliance manager

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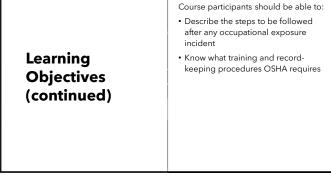


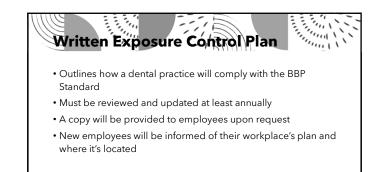
• have emergency phone numbers (fire, police, poison control, etc.) where they can be readily found

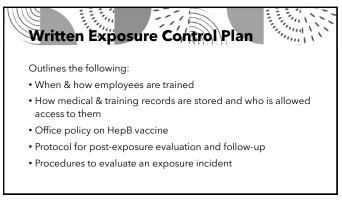




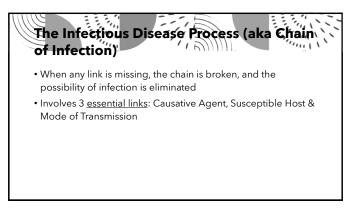
Learning Objectives	Course participants should be able to: • Know the location of the exposure control plan in their office & how it affects their duties • Identify components of the infectious disease process and the role they play in disease transmission
	Distinguish types of occupational exposure & how to prevent them (standard precautions, PPE & more)

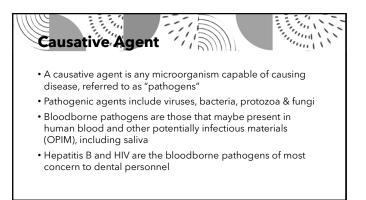


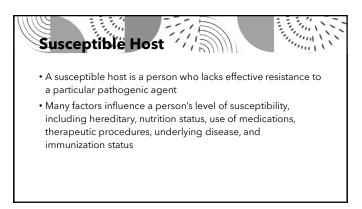


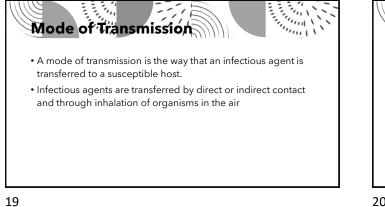


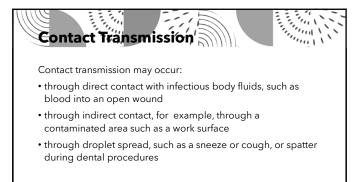


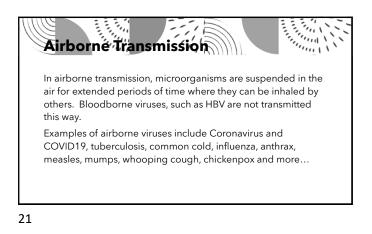


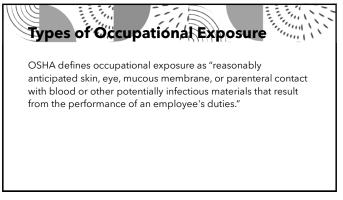




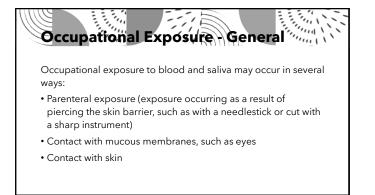


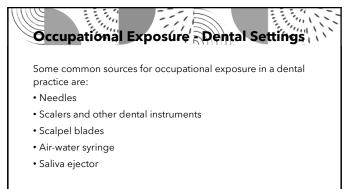












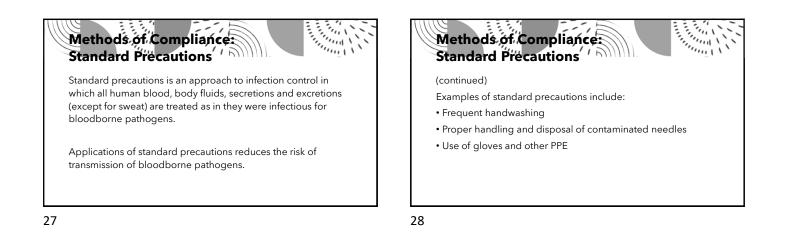


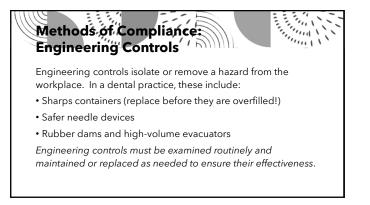
# Occupational Exposúre Dental Settings (continued) • High-speed evacuator

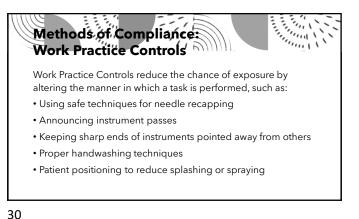
- Surfaces of water lines
- Radiographs
- Light and equipment switches
- Disposables used in patient care
- Surfaces such as chair backs, countertops and drawer handles

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## Methods of Compliance: Work Practice Controls

### **Define Clinical Work Areas**

- Eating, drinking, smoking, applying cosmetics or lip balm, handling contact lenses, and using your cell phone are prohibited in dental office work areas with a reasonable likelihood of occupational exposure.
- Food and drink must not be stored in or on clinical work areas and cannot share refrigerator or freezer space with clinical dental materials or other potentially infectious materials.

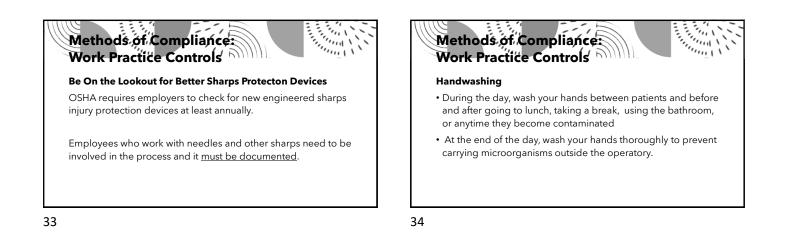
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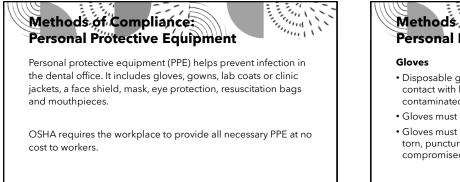


### Handling Contaminated Needles and Other Sharps

To minimize exposure when handling contaminated needles and other sharps, workers should:

- Never bend or break needles before disposal
- Dispose of used needles, blades and other sharps in puncture resistant containers located as close as possible to where the items were used
- DO NOT reach inside a sharps container









#### Gloves

- Always wash your hands after removing gloves
- Do not wash disposable gloves and reuse them
- Utility (dishwashing-type) gloves should be worn when cleaning instruments or performing other household tasks
- Utility gloves can be reused but must be replaced when they become damaged

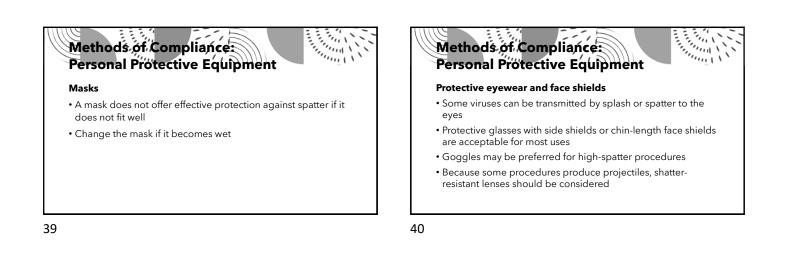
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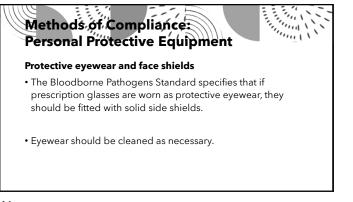


Must be worn whenever splashes, spray, spatter, or droplets of blood or other potentially infectious materials may be generated, and nose or mouth contamination can be reasonably expected.

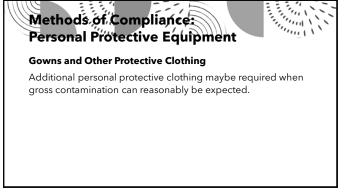
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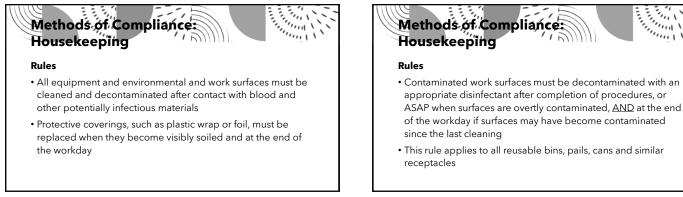












## Methods of Compliance: Housekeeping

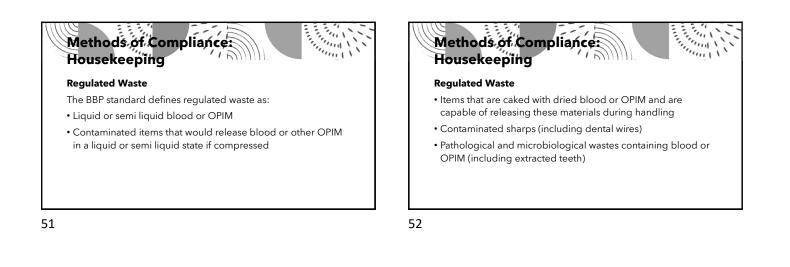
### Rules

- Spills of blood or OPIM must be wiped up immediately, or ASAP, and the area decontaminated using an appropriate disinfectant
- Disinfectants used in the dental office Are chemical germicides that are approved for use as hospital disinfectants and are tuberculocidal when used at recommended dilutions

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picked up by hand even if gloves are used









Sharps containers must NOT be

• Overfilled

 Opened, emptied, or cleaned manually or in any other manner that would expose employees to the risk of percutaneous injury

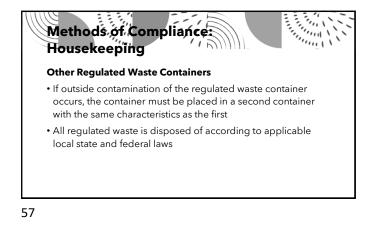
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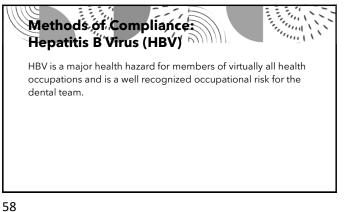


Must be constructed to contain all contents and prevent leakage of fluid during handling, storage, transport, or shipping

• Must be closed before removal to prevent the contents from spilling or protruding from the container during handling, storage, transport, or shipping

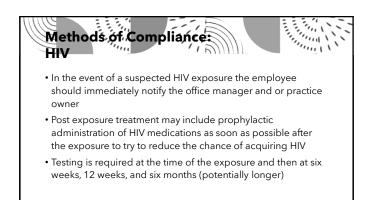
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Methods of Compliance Hepatitis B Virus (HBV) • Employers must offer the HBV vaccine to employees who are potentially exposed to blood or OPIM at work. • The vaccine must be offered without cost within their first 10 working days

- Employees who opt not to have the vaccine must complete a vaccination declination form which is kept in their confidential medical record
- If an employee declines, then later decides they want the vaccine, employers must provide it at no cost



## Methods of Compliance: Post-Exposure Evaluation & Follow-Up

In the event of an exposure incident:

- The employee must report the incident to the practice owner and/or administrator
- A written report of the incident and how it occurred is required
- The employee should be immediately referred to a qualified health care professional for post-exposure evaluation and follow-up
- · A blood test will likely be conducted (employee consent required)

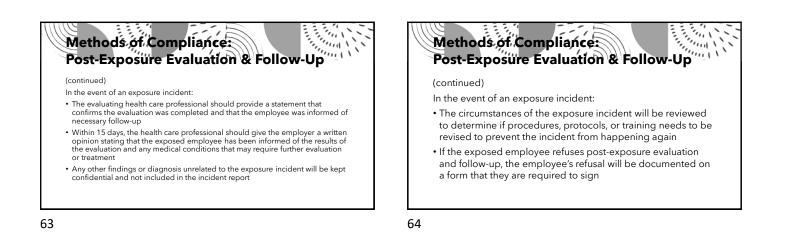
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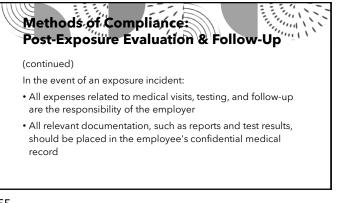
## Methods of Compliance: Post-Exposure Evaluation & Follow-Up

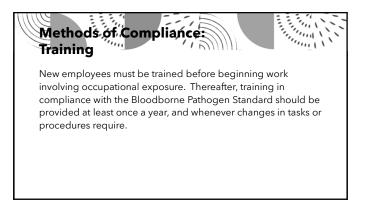
#### (continued)

In the event of an exposure incident:

- Attempt to identify the source individual and ask them to be tested for HIV and HBV unless their status is known
- The incident report, portions of the employee medical record, and the source individual's blood test results will be provided to the evaluating health care professional

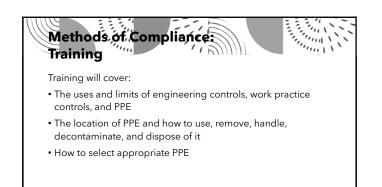


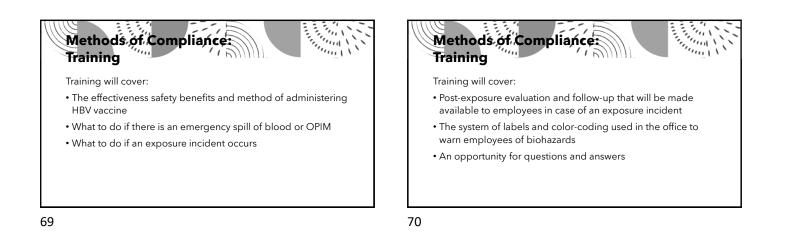


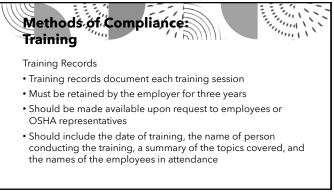




- An explanation of the BBP standard and where a copy of the standard is filed
- Modes of transmission of blood borne pathogens
- An explanation of the office is exposure control plan and how to obtain a copy
- How to recognize tasks involving occupational exposure









### **Hazard Communication Standard**

### Learning Objectives

Course participants should be able to:

- Become familiar with hazardous chemicals in the workplace and know where the hazardous chemicals list is kept
- Know how hazardous chemicals should be labeled in the workplace
- Recognize hazard communication standard pictograms and labels for hazardous chemicals

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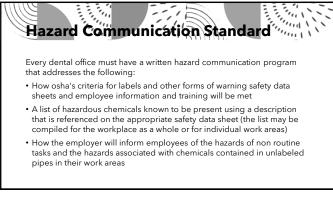
### **Hazard Communication Standard**

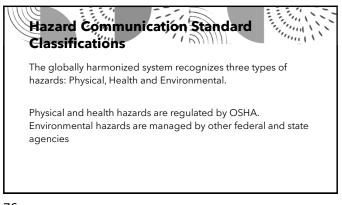
#### (continued) Learning Objectives

Course participants should be able to:

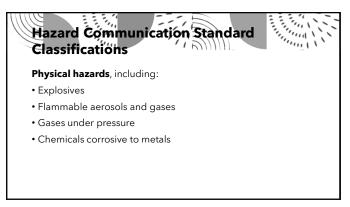
- Understand how to read safety data sheets (SDS), what information is included on them, and where they are maintained in the office
- How to obtain any missing SDS

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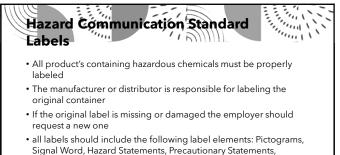




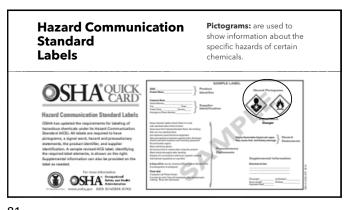




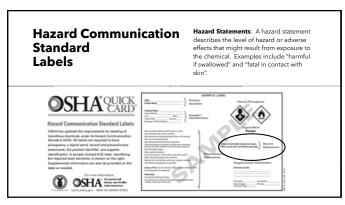


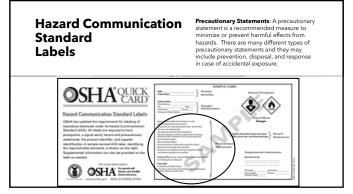


Product Identifier, Supplier or Manufacturer Information



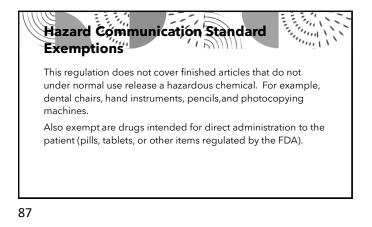


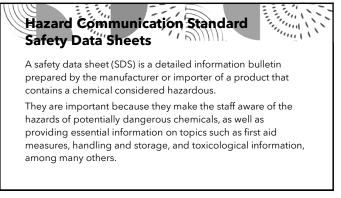


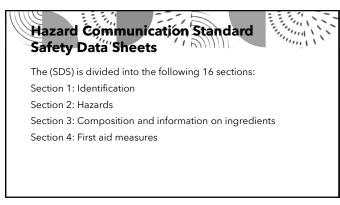


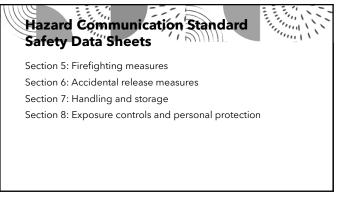






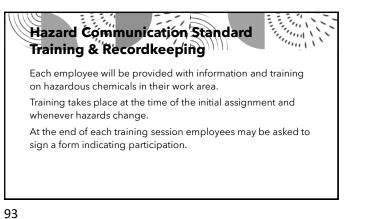


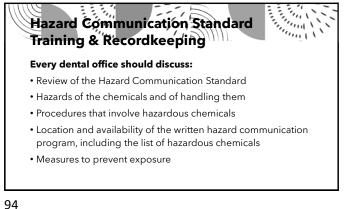


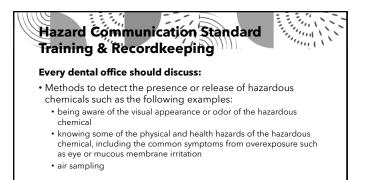




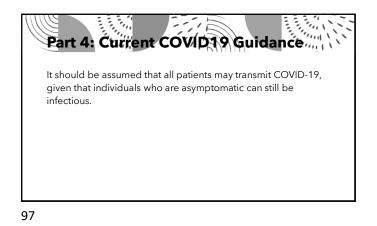


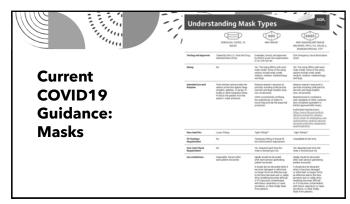


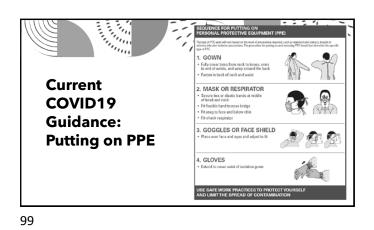


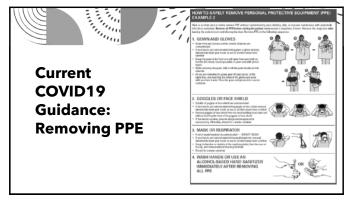


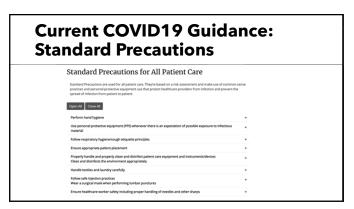


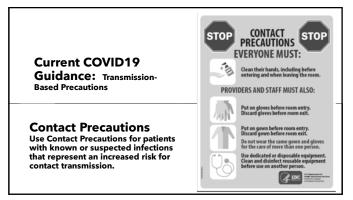














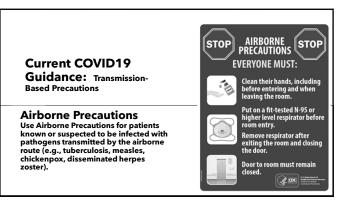
**Current COVID19** 

**Droplet Precautions** 

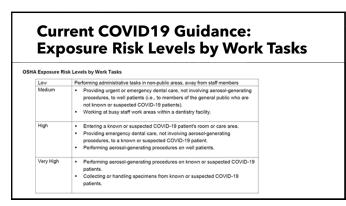
Use Droplet Precutions for patients known or suspected to be infected with pathogens transmitted by respiratory droplets that are generated by a patient who is coughing, sneezing, or talking.

**Based Precautions** 

Guidance: Transmission-

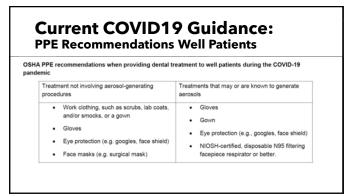


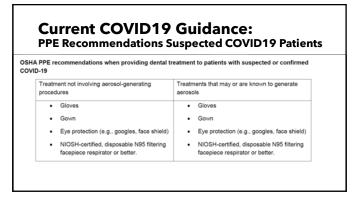
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Current COVID19 Guidance:			
	Well patient	Suspect or confirmed COVID-19	
Treatment not involving aerosol- generating procedures	Standard precaution <u>Contact precaution</u> <u>Droplet precaution</u>	<u>Standard precaution</u> <u>Contact precaution</u> <u>Airborne precaution</u>	
Treatments that may or are known to generate aerosols	<u>Standard precaution</u> <u>Contact precaution</u> <u>Airborne precaution</u>	<u>Standard precaution</u> <u>Contact precaution</u> <u>Airborne precaution</u>	





## **Current COVID19 Guidance: Additional tactics**

Additional tactics to mitigate risk of infection

Elimination: Adhere to guidance from state and local health agencies and professional organizations regarding patient procedures. Makes reference to the CDC recommendation prior to May 19 which recommended postponing elective dental procedures.

Engineering Controls: Recommends use of easily decontaminated physical barriers, local exhaust ventilation to capture and remove aerosols generated during treatment; and use of directional airflow to remove workplace hazards.

Administrative Controls: Recommends strategies such as telephone triage and teledentistry to determine the need for care. Within the office, screening for signs and symptoms, limiting the number of people in the treatment area, and minimizing aerosol-generating procedures used in dental treatment.

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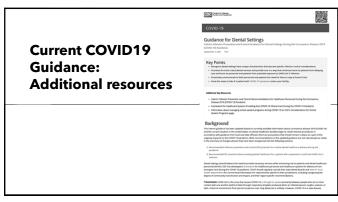
### **Current COVID19 Guidance: Additional tactics**

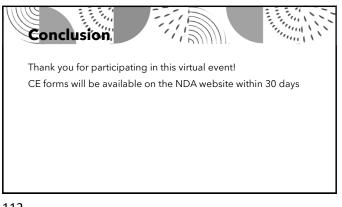
### Safe Work Practices:

- Recommends use of high evacuation suction and dental dams to minimize droplet splatter and release of
  aerosols. In contrast, recommends minimizing use of dental handpieces and air-water syringes and avoiding use of ultrasonic scalers. Use high evacuation suction and dental dams to minimize droplet splatter and erosols.
- Recommends minimizing time spent in the patient care area meaning that activities such as charting, sterilization, and other tasks be performed elsewhere.
- · Reiterates that proper donning and doffing of PPE is essential and that workers avoid touch their eyes, noses, and mouths, especially until they have washed their hands.

<u>Personal Protective Equipment</u>: Proper PPE must be used and that PPE differs depending on whether the work involves providing well patient care or care to a patient with suspected or confirmed COVID-19. "Dentistry works must use proper PPE when exposed to patients. See OSHA PPE standard at <u>29 CFR 1910 Subpart I)</u>.

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