

## PREVENTION OF CROSS-INFECTION IN DENTAL PRACTICE

In these COVID times.....

***In these COVID times, more and more patients are keen to ensure they are not exposed to infection of any sort, particularly when they are attending for medical or dental treatment. This leaflet is designed to provide information and reassurance to our patients, that at NQ Surgical Dentistry, we take the prevention of cross-infection extremely seriously and follow all the regulations, guidelines and procedures to ensure the safety of our patients, the practice staff and thereby protect the wider public.***

### **COVID information and dental practice**

With regards to COVID-19 infection, you are advised to postpone any medical or dental appointment if you are suffering from any of the symptoms of that infection including a fever, cough, shortness of breath, difficulty breathing, persistent tiredness, generalised aches and/or headache, a sore throat or a loss of smell. However, there are other infections that can be transmitted from patients to medical or dental staff, and on to other patients. These may be viral or bacterial infections and include for example, flu, measles, German measles, tuberculosis, herpes cold sores, or any infective condition expressed as oral ulcers in the mouth.

When you attend our practice you should check in using the Queensland App on your smart-phone and complete a COVID attendance form at every appointment. This allows the practice team to ensure that you have not been anywhere that may have been associated with recent outbreaks of COVID infections. Once it has been retained in your notes electronically, you may proceed with your planned appointment.

At times when the risk of COVID infection locally is low, general dental treatment can be provided very much as it has been prior to the pandemic. There are some minor additional precautions that your dental team may take, but treatment will appear very much as it did before COVID.

If the risk of local COVID infection is raised, then the dentist may only offer dental treatment for the alleviation of pain and/or infection. The dentist is aware of the level of risk at any time due to the regular updates they receive from their professional body, the Australian Dental Association (ADA). The ADA have laid down levels of risk and the cross-infection control measures that must be implemented for each level. They also determine what treatment can be provided at each level of local risk. Your dentist will have all the necessary information and will be able to ensure your safety by following the detailed instructions, adhering to the guidelines and implementing the procedures of which they have full knowledge.

Once the local risk level for COVID infection is increased, the dentist must not use any items of equipment that produce a fine mist of liquid droplets from your saliva mixed with the irrigation water of the dental drill. This fine mist is called an aerosol. Any treatment creating an aerosol must be avoided unless it is absolutely necessary to treat acute infection and/or pain. In such circumstances, and in the presence of a raised degree of COVID risk assessment in the local community, the treatment might have to be provided in nominated Queensland Health facilities equipped with additional transmission-based precautions. In Townsville this would be at the Townsville University Hospital by dental healthcare teams who have additional personal protective equipment and in an environment where additional transmission-based precautions can be taken.

### **Cross infection control in dental practices**

Dental practices, like medical practices must follow the same regulations, guidelines and procedures that govern the practice of safe infection control in modern hospitals. These reference texts and the procedures they dictate ensure the safety of patients undergoing invasive treatment. There are numerous examples of how this is achieved. Some of these include the use of sterile packs of single use items including injection needles, local anaesthetic cartridges, sutures, scalpel blades, and other surgical products. Adequate sterilisation is achieved for other re-use items of dental equipment using Class B approved pressurised steam sterilisers called autoclaves. All instruments are tracked and each cycle is checked to ensure the correct steam temperature and pressure is achieved to kill all viruses, bacteria, fungi and other micro-organisms, thereby ensuring the instruments are sterile.

The healthcare team who care for patients in clinical areas of the practice must wear personal protective equipment and as a minimum requirement this includes the wearing of a mask, glasses and clinical gloves. For the provision of invasive surgery or other invasive procedures, the team involved may also wear protective gown and/or head covering. Furthermore there are coverings that are fitted on handles of the dental light and dental chair controls to ensure that gloved hands after working in the mouth cannot deposit bacteria or other infectious agents on the handles and then be passed onto the next patient. This is called cross-infection, and is effectively prevented by the procedures that your dentist follows.

The Australian Dental Association and the Medical Research Council publishes Guidelines in Cross Infection Control. All the texts provide extensive guidance and considerable detail regarding how cross-infection control is to be maintained. It is essential that every practice have a Practice Manual of Cross Infection Control and an Infection Control Management Plan. The manual applies specifically to that practice and the procedures performed there. It is maintained and updated by the Practice Manager who is the Infection Control Officer in this dental practice and it should be read when any new member of staff joins the practice by that new team member and then all team members should re-read the instructions periodically to maintain an up to date knowledge and to maintain the quality of cross-infection control.

References that are current and have been used to formulate all the practice guidelines on the prevention of cross-infection in this dental practice are outlined below:

- Infection Control Guidelines for the Prevention of Transmission of Infectious Diseases in the Health Care Setting (Australian Government Department of Health and Ageing, January 2004).
- Workplace Health and Safety in Contemporary Dental Practice (Prof. Laurence J. Walsh, ADAQ 2005).
- Dental Board of Queensland Policy #4 (Dental Board of Queensland 2003 amended 2005) including Attachment A Infection Control Checklist.
- AS/NZS 4815:2006 Office-based health care facilities not involved in complex patient procedures and processes - cleaning, disinfecting and sterilising reusable medical instruments and equipment, and maintenance of the associated environment (Standards Australia 2001).
- Infection Control for Dental Practice (ADAQ 2006)
- NSW Health Department Infection Control Policy ([www.health.nsw.gov.au/fesd/rmc/cib/circulars](http://www.health.nsw.gov.au/fesd/rmc/cib/circulars))
- Centres for Disease Control and Prevention: Infection Control in Dentistry – Blood borne Disease Transmissions
- Australian Dental Association Victorian Branch Inc. Infection Control Committee Systematic Operation Procedures for Infection Control in Dental Practice. ([www.Ada.org.au](http://www.Ada.org.au))
- Australian Dental Association Guidelines for Infection Prevention and Control Fourth Edition ©2021