

Iowa Western Community College Infection Control and Hazard Communications Policies

Right to Know

Federal and State laws have been passed which are referred to as “The Right to Know Law”. Basically, it says that people have the right to know which chemicals they are using and are being exposed to. They have the right to know if chemicals are flammable, explosive, poisonous, corrosive, radioactive, etc. The program has the right to know which chemicals they are but might be hazardous. This information needs to come from the manufacturer. The program then has the responsibility of sharing this information with appropriate person. The manufacturer supplies this information on what are now as MSDS – Material Safety Data Sheet. MSDS’s will be on file for all hazardous chemicals used in the dental assisting program. MSDS forms are kept in a marked drawer in the Dental Clinic Operatory and inside each cabinet where the materials are stored in the Dental Laboratory.

Protocol for Infection Control and Hazard Communications

1. See special polices posted in labs and in unit packets for detailed procedural instructions.
2. Students are required to wear latex or vinyl gloves, masks and safety eyeglasses when performing chairside procedures, and chairside related procedures.
3. Safety glasses must be worn when performing laboratory procedures.
4. Students are required to wear laboratory coats/scrubs in campus laboratory and clinical classes.
5. Safety glasses, utility gloves and masks must be worn when scrubbing/processing contaminated instruments and with hazardous materials: iodophors, glutaraldehyde, ultra-sonic, oral evacuator and processing. Check special policy postings and packet information for additional solutions.
6. An ADA & EPA approved intermediate-level hospital disinfectant with tuberculocidal claims is used on all hard surfaces.
7. Protective disposable barriers are to be used on equipment whenever possible.
8. All instruments are heat sterilized and wrapped appropriately.
9. Equipment is not to be operated by students without an instructor present in the room.

Hazard Communications Program

PURPOSE: To communicate the program’s Hazard Communication Program to dental assisting students and faculty/staff involved in the program.

OBJECTIVES:

1. To safeguard student/staff health by providing a management guide for compliance.
2. To provide students/staff with the necessary information concerning health and physical hazards of the chemical materials used in the program.
3. To comply with OSHA and Iowa Code.

SCOPE: This compliance program will provide the means for the transmission of information to appropriate person of the chemical products to which they are exposed. It will include the following:

1. Listing of all hazardous chemical products uses by the program will be kept on file by the program coordinator.
2. Hazard determination for all hazardous chemicals used by the program will be kept on file by the program coordinator.
3. Appropriate labels on containers with chemical agents.
4. MSDS's will be available for all hazardous chemicals used by the program. These will be kept on file by the program coordinator.
5. Persons will be trained to recognize and interpret labels, warnings, color-coding, and signs affixed to containers, in order to avoid potential hazards.
6. Person will be trained in the use of MSDS's and their location to avoid potential hazards.
7. Hazardous waste material will be disposed of by incineration or by a method approve by the manufacturer.

Standard Precautions Program

The Dental Clinic has adopted a policy of standard/ universal precautions for treating all dental patients.

PURPOSE: To minimize opportunities for blood/body fluid contact and reduce the risk of injection transmission.

POLICY: All patients pose a potential for the spread of infectious disease, therefore, barriers precautions shall be observed whenever exposure to blood or body fluids is anticipated. In the Dental Clinic, this applies to all patient contact.

PROCEDURE:

1. Hands shall be washed before gloving and after removing gloves. A hand washing agent approved by the ADA and EPA shall be used. If hands come in contact with blood or body fluid, they must be immediately washed.
2. Gloves shall be worn during all procedures that may involve contact with blood or body fluid. Gloves must be changed between patients. If a glove becomes torn during a procedure, you must stop, remove gloves, wash and don new pair.
3. Personal protective attire shall be worn during all patient contact procedures. Uniform scrubs cannot be worn to or from the clinical site.
4. Masks, protective eyewear and gloves shall be worn during all treatment procedures.

5. Sharps shall be handled in such a manner to prevent accidental cuts or punctures. Used needles will be recapped using the scoop method if recappers are not available. Sharps containers will be located in each operatory.
6. Operatory cleanup before and after patient contact will be thorough and complete. Each operatory will have a checklist to be completed as procedures are performed. Chemicals used will be those supplied by the Program and approved by the ADA and EPA for surface disinfection. Utility gloves, masks, and protective eyewear will be worn during the operatory cleanup phase.
7. Instruments taken to the sterilization bay will be placed in a holding solution, then in the ultrasonic cleaner. They are then rinsed, dried, wrapped and sterilized appropriately. Utility gloves will be worn when handling all unsterile instruments in the sterilization bay.
8. Any incident should be reported immediately to the assigned clinical instructor and/or Program Coordinator. An incident report will be completed by those involved and reviewed by the Department Chairperson. Copies of the report will be distributed and filed as necessary.

Bloodborne Pathogens Exposure Control Plan

PURPOSE:

1. To minimize/eliminate the risk to student/faculty of occupational exposure to Bloodborne pathogens.
2. To minimize/eliminate the transmission of microorganisms from all body fluids-secretions and excretions.
3. To establish schedule and method for implementation of the OSHA Bloodborne Pathogen Standards.

DEFINITION: An exposure incident occurs when blood or other body fluid comes in contact with a mucous membrane, eye, or non-intact skin.

PROCEDURE: In the event a student/faculty experiences an exposure incident, the following procedure should be implemented.

1. Immediate decontamination of the affected/exposed and surrounding areas by:
 - a. Washing the skin affected/exposed and surrounding areas thoroughly with soap and water.
 - b. Rinse exposed area-include mucous membranes if indicated-with water.
 - c. Use eyewash to flush eye(s)-if indicated.
2. Report the exposure to your clinical instructor. Complete facility incident report & the IWCC incident report.

3. Post exposure testing will be completed according to facility policy/ contractual agreement.

PREVENTION OF INCEDENTS: Student clinical orientation will include:

1. Availability of personal protective equipment (PPE) (gloves, fluid-resistant gowns.)
2. Proper usage of PPE. According to facility policy.
3. Course content in Principles will include an Infection Control Module.
 - a. Testing with mastery grade of 75% required.
 - b. Hand washing & PPE process evaluation
 - c. Unit preparation process evaluation

Written Hazard Communication Program

GENERAL

The purpose of this notice is to inform interested parties that our facility is complying with the Federal Hazard Communication Standard, (Title 29 Code of Regulations 1910.1200), by compiling a hazardous chemicals list, by using material safety data sheets (MSDS's), by ensuring that containers are labeled and by providing faculty and students with training.

This program applies to all procedures and tasks in our facility where faculty and students may be exposed to hazardous substances under normal working conditions and/or during emergency situation.

Sue Norman is the Safety and Health Coordinator, herein, will be referred to as the Coordinator for our facility, and will have overall responsibility for the program. The program will be reviewed and updated as viewed necessary. The written program will be available to be reviewed in the student clinic manual. Additional copies may be obtained from the Coordinator.

Under this program, faculty and students will be informed of the contents of the Federal Hazard Communication Standard, the potential hazardous properties of the chemicals, products and materials of which they utilize, safe handling procedures and measures for protection from these chemicals. Faculty and students will be informed of the potential hazards associated with non-routine tasks.

HAZARD EVALUATION

Our facility will rely on material safety data sheets obtained from manufacturers, distributors and importers to meet hazard determination requirements.

LIST OF HAZARDOUS CHEMICALS

The coordinator will maintain a list of all products containing hazardous chemicals used in our facility and will update the list as necessary. Our list of chemicals contains

names of chemicals used this facility. It also indicates examples of materials that may contain these chemicals. For specific hazardous chemicals in a product, refer to the MSDS for that product.

MATERIAL SAFETY DATA SHEETS

The MSDS is a government-approved form or equivalent that provides specific information of the chemicals in the products located in this facility.

Program Chairs will be responsible for compiling and maintaining the **Master MSDS File**. They will maintain a file of MSDS's on products for which the manufacturers and/or suppliers consider necessary due to hazards.

The MSDS's will be fully completed OSHA Forms 174 or the equivalent. She is responsible for acquiring and filing our MSDS's as well as contacting manufacturers, suppliers, or dealers if additional information is needed or if the MSDS has not been provided with the initial shipment of the product. A master list of MSDS's is available from the above. The file of MSDS's is accessible to all students. The file will be kept in the dental materials lab. Copies will be available upon request.

Posters identifying the person responsible for maintaining MSDS's and where the MSDS's are located are posted in the dental materials lab. Posters notifying students when new or revised MSDS's are received will be located in the same location. Employees will be notified by the required posters within five (5) days of their receipt.

If a required MSDS is not received, Sue Norman will contact the supplier, in writing, to request the MSDS. If the MSDS is not received after such requests, the Coordinator shall contact the Iowa Department of Public Health (IDPH, (515) 281-5605), Division of Occupational Health or the Iowa Department of Labor (IDOL), Labor Services Division at (515-281-7995), for assistance in obtaining the MSDS.

LABELS AND OTHER FORMS OF WARNING

The Coordinator will ensure that all hazardous chemicals are properly labeled and updated, as necessary. Labels should list, at least, the chemical identity of the material, appropriate hazard warnings, and the name and address of the manufacturer or other responsible party. Containers labeled by the manufacturers do not require additional labels. The manufacturer is responsible for properly labeling the original container. When the chemicals are transferred to other containers (secondary containers) to be used at a later time or by other employees these containers need to be labeled. Examples are containers of alcohol, bleach, disinfectant and radiographic chemicals such as developer and fixer solutions that are transferred from original containers. Copies of the original labels can be used to label these containers. Several examples, used by this facility, are provided at the end of this written program, if photocopying the original label is not feasible.

If employees transfer materials containing a hazardous chemical from a labeled container to a portable container that is intended for immediate use only, no labels are required on that portable container. If employees become aware of any portable or non-portable container holding a product or material containing a hazardous chemical that may be used more than once, it is their responsibility to immediately notify the Coordinator.

Professional products that are regulated by the Food and Drug Administration (FDA) are exempt from the labeling requirement of the Hazard Communication Standard. Examples of such materials are impression materials and composite resins, the labeling of which is approved by the FDA. These labels must not be removed from the containers. Drugs that are in solid form for direct administration to the patient are also exempt from the labeling requirement.

Dental “Devices” Regulated By The U.S. Food And Drug Administration

Abrasive Polishing Agents

**Amalgam Alloy/Dental Mercury
Amalgam Capsules (Unit Dose)
Cavity Vanish
Base Metal Alloys
Bracket Adhesive/Conditioner
Calcium Hydroxide Cavity Liner
Dental Mercury
Tray Material
Composite Resin Filling Material
Composite Resin Coating Material
Dental Cements (All Types)**

Dental Adhesives

**Dental Relining/Repairing Resin
Impression Materials (All Types)
Intraoral Dental Wax
Resin Impression Tray Material
Pit and Fissure Sealants
Precious Metal Alloys
Resin Impression
Root Canal Filling Resin
Temporary Crown/Bridge Resin**

PREPARING LABELS FOR SECONDARY CONTAINERS

The Hazard Communication Standard requires that hazardous chemicals be labeled if they are transferred from their original container to an unlabeled secondary container.

Labels should include the:

**Product name;
Chemical identity of the material;
Appropriate hazardous warnings, and
Name and address of the manufacturer**

EXEMPTION

This regulation does not cover finished articles that do not, under normal use, release a hazardous chemical (e.g., dental chairs, hand instruments, pencils and photocopy machines).

EMPLOYEE/STUDENT INFORMATION AND TRAINING

The Coordinator shall coordinate and maintain records of employee/student hazard communication training.

Before exposure may occur, each new employee/student will attend a hazard communication training class.

This initial training session will provide the following information:

- Chemicals in the workplace and their hazard;
- How to lessen or prevent exposure to these chemicals;
- What the facility has done to lessen or prevent employee exposure

- to hazardous chemicals;
- Procedures to follow if employees are exposed to hazardous chemicals;
- Where to locate MSDS's and who to contact to obtain copies of MSDS's, and
- How to read the interpret labels and MSDS's.

Before any new hazardous chemical is introduced into the workplace, each employee/student who may be exposed to the substances will be given information in the same manner as during the hazard communication training classes.

Non-routine Tasks

When you are required to perform non-routine tasks that involve hazardous chemicals, a special training session will be conducted to provide information about the chemicals to which you may be exposed and the precautions you must take to reduce or avoid exposure.

It is the policy of Iowa Western Community College that no employee/student will begin performance of a non-routine task without first receiving appropriate safety and health training.

Hazardous non-routine tasks, we have at our facility include:

Clean/Maintaining Sterilizers and Radiographic Processing Equipment.

Informing Contractors

It is the responsibility of Accreditation Liaison to provide contractors with employees/ students performing work onsite with the following information if their employees/ students are exposed to our hazardous chemicals.

- Hazardous chemicals they may encounter;
- Measures the employee can take to control or eliminate exposure to the hazardous chemical;
- Where to obtain applicable MSDS's.

It is the responsibility of Accreditation Liaison to obtain chemical information from the contractors when they will expose employees/students to hazardous chemicals they may bring into our workplace.

Pipes and Piping Systems

Information on the hazardous contents of pipes and piping systems will be identified by the name of the content, such as, Oxygen or Nitrous Oxide.

Certificate of Hazard Assessment

Accreditation Liaison will certify that the dental program of Iowa Western Community College was evaluated during the 2010-2011 school year for hazards which are present, or are likely to be present, which necessitate the use of personal protective equipment as outlined on the

Hazard Assessment and Personal Protective Equipment Selection Chart below.

Source of Hazard	Hazard Assessment	Protection Required
Mechanical		
Use of dental lathe, model Trimmer, high and low-speed Handpieces.	Flying fragments, chips and particles.	Safety glasses with side Shields, or chin-length face shield. Lathe and trimmer's guards.
Chemicals		
Liquid chemicals, acids or caustic liquids, hazardous slides or gases.	Splash of hazardous chemicals to eye and face, exposure to skin of hands, inhalation of hazardous vapors	Safety glasses with side shields, or chin-length face shield, chemically-resistant nitrile rubber gloves.
Heat		
Bunsen burner uses, hot glasses with side instruments removal from autoclave.	Burns from open flame, or hot instruments and autoclave steam.	Safety shields, or chin-length face shield, heat-resistant gloves, heat-resistant apron.
Dust		
Use of lathe, dry high or low-speed handpiece. Mixing alginates, plaster and stone mask.	Nuisance dust: plaster, stone, acrylic, alginate or metal	Safety glasses with side shields, or chin-length face Shields; dust nuisance
Light		
Use of composite curing light lenses,	Optical radiation.	Glasses with shaded or hand-held see-through shield.
Biological		
Exposure to BOPIM. sleeve/	Pathogenic Micro-organisms.	Gloves, masks, glasses with Side shields, chin-length face shields, long High collar barriers, Resuscitation masks.
Radiological		
Use of Dental radiographic Unit.	Ionizing radiation.	Lead apron with collar, if unable to stand behind a shield or 6 feet from the Radiographic unit. X-ray monitoring badge