Texas State Board of Dental Examiners Infection Control Checklist

	General Requirements	Level
1	Tierra displaced in sieur of actionts	1-4
1	License displayed in view of patients	3
2	Consumer information Sign display in view of public	3
3	Names of Dentists displayed at entrance	3
4	Review the written infection control plan at least annually to ensure compliance with	3
4	best practices Documentation of blood borne Pathogen training at date of hire and annually	3
5	thereafter	3
	Documentation of training of HCW in selection and use of Personal Protection	
6	Equipment (PPE)	3
7	Document corrective actions for all deviations from written policy	3
8	Up-to-date confidential employee health records	3
	Employee health records kept for	
9	30+ years: Since opening: Date:	3
10	Injury / Incident records	3
11	Emergency telephone numbers posted	3
12	Training records kept for 3+ years	3
13	Informed refusal declination records of indicated immunizations / vaccinations	3
14	Equipment repair and maintenance logs	3
15	Biological weekly monitoring logs	1
16	Post exposure evaluation and follow-up records	3
17	Maintenance log for sterilization equipment is up-to-date	3
	Weekly biological testing logs maintained for	
18	2+ years: Since opening: Date:	3
	Has Written Infection Control Program	
19	Includes a written system of sterilization process monitoring	3
20	Includes a written process for managing semi critical and critical items	3
21	Includes a written process for managing failed chemical, heat or biological monitoring	3
22	Includes written policies for use of personal protective equipment (PPE)	3
	Infection Control Record Keeping	
	Includes documentation of vaccinations offered to HCW with infectious exposure risk	
23	(Hepatitis B, Influenza)	3
24	Includes documentation that vaccinations declined by HCW	3
25	Includes vaccination records for all employees with exposure risk	3
26	Includes written policies and procedures for handling and management of sharps	3
27	Has a Sharps injury log	3
	Includes a written post exposure medical evaluation plan (use CDC: needle stick /	
	sharps injury / exposure protocol) and 24/7 contact phone number for qualified	
28	designated health care provider	3
20	Includes documentation of post exposure follow-up for all sharps injuries involving	2
30	Includes written policies and procedures for medical waste management	3
30	medical waste management	3

31	Licensed waste hauler used for regulated waste – Name and / or telephone number:	3
32	Includes written policies and procedures for aseptic management during patient care	3
	Includes written policies and procedures for surface disinfection and environmental	
33	barrier protection	3
34	Includes written policies and procedures for laboratory procedures	3
	Includes written policy and procedure for patients known to have communicable	
35	disease on arrival (TB, Influenza)	3
36	Comprehensive medical history form in use to evaluate patients	3
37	Ensures patient information routinely review and updated	3
	Has Employee Training and Monitoring Program	T
	Provides and documents appropriate training for all staff assigned to process semi-	
38	critical instruments	2
39	Monitors and documents compliance with use of PPE	
40	Includes a written system of sterilization process monitoring	3
41	Includes a written process for managing semi critical and critical items	3
40	Communicable Disease Control Procedures	1
42	Single use or sterilization for critical items	1
43	Multi-dose vials used	
4.4	If yes, vials are only entered with the new, sterile syringe with a new, sterile needle	1
44 45	Cap of multi-dose vial cleaned with alcohol based wipe before being accessed	2
43	Are multi-use vials discarded when expired or 28 days after initial access (as	
46	applicable) – Must have date when first accessed	3
47	Is initial access dated on multi-use vials	2
48	Fluid infusion and administration sets (IV bags, tubing and connectors) used?	
49	If yes, used only on one patient	1
50	Disposed of after one single use	1
51	Single IV bag is not used to mix medications for more than one patient	1
	Single dose medication / infusions are used for only one patient and discarded after	
52	use	1
	Personnel wear utility gloves when processing contaminated instruments – NOT latex	
53	type for patient care	2
54	Supplies for hand hygiene accessible to employees at point of need	2
55	Soap and water easily accessible	2
56	Alcohol based rubs easily accessible – if used	2
57	Team members display appropriate hand hygiene techniques	1
	Appropriate PPE supplies accessible for employees with exposure risks	
58	Gloves (Latex and Latex free for just Latex free)	1
59	Masks	1
60	Sterile surgical gloves – for surgical procedures	1
61	Safety glasses with side shield or full face shields	1
62	Disposable gowns / laundered gowns offered	1
63	Health care workers display appropriate PPE barriers	2
64	Running water eye wash station accessible	4
65	Appropriate barrier products available (dental dams, protective eyewear, other)	2

85	Proper sterilization loading technique, not overloading Cleaning, Disinfection and Sterilization of patient care devices, instruments	2
84	biological indicator has negative reading	1
83	sterilized after each use Implantable equipment is quarantined and tested with biological indicator until the	1
82	Sterilization cycles are verified with chemical / heat indicator. Both interior and external indicators Critical items (any instrument that penetrates soft tissue or bone) instruments are	2
80	Name: If Independent biological testing, is control processed? Sterilization evelog are verified with chemical / heat indicator. Both interior and	2
79	Is Biological testing of sterilizer completed weekly If independent biological testing service,	1
78	Number of working ultrasound cleaners Endodontic files / instrumentation sterilized or disposed	1
76 77	Number of working flash steam sterilizers (statim)	1 1
75	Number of working dry heat sterilizers	1
73 74	Number of working autoclaves Number of working chemiclaves	1 1
71 72	using detergents or enzymatic cleaners prior to sterilization Sterilization equipment available and fully functional	2 1
	Cleaning, Disinfection and Sterilization of patient care devices, instruments Biofilm and organic matter are removed from critical and semi-critical instruments	
69 70	/ ml) Dental unit water lines not meeting the portable water standard of EPA are treated and retested	4
68	Dental unit water lines are treated to remove biofilm Dental unit water lines are tested to meet the potable water standard of EPA (500 CFU	4
67	Basic first aid products and equipment available (Recommended to include: nitroglycerin, Benadryl, Epi-pen, oxygen, aspirin, albuterol, glucose, glucagon) Dental unit water lines flushed between patients for a minimum of 20 seconds	2

	Chemical used for high level disinfection are dated with expiration dates and discarded				
96	before expiration dates	2			
	Aseptic Technique				
97	Splash shields and equipment guards used on dental laboratory lathes	4			
98	Fresh pumice and a sterilized, or new rag wheel used for each patient	2			
	Are devices used to polish, trim or adjust contaminated intraoral devices being				
99	disinfected or sterilized	2			
	Intraoral items such as impressions, bite registrations, prostheses and orthodontic				
100	appliances are cleaned and disinfected	2			
	Dental radiology aseptic techniques are followed - single-use film or barriers on				
101	electronic sensors	3			
	Environmental Infection Control				
	Semi-critical environmental surfaces (frequently touched surface that could potentially				
	allow secondary transmission to HCW or patients) are decontaminated between				
102	patients using high level surface disinfectant	2			
103	Noncritical environmental surfaces are decontaminated between patients	2			
	Objects and environmental surfaces are disinfected with an EPA registered	_			
104	tuberculocidal disinfectant at beginning of day	2			
105	Objects and environments surfaces are disinfected with EPA registered tuberculocidal	2			
105	disinfectant between patients	2			
106	Objects and environmental surfaces are disinfected with an EPA registered tuberculocidal disinfectant at end of day	2			
100	EPA registered tuberculocidal disinfectants are used at the dilution specified by the				
107	manufacturer	2			
107	All clinical contact surfaces are protected with barriers (especially areas that are				
108	difficult to clean)	2			
109	Clinical contact barriers are changed between patients	2			
110	Decontamination and clean areas separated in the instrument processing area	2			
111	Biohazards waste is disposed of properly	2			
	Sharps				
112	Approved sharps containers utilized and accessible	2			
113	Sharps container taken out of service and processed appropriately	2			
114	Safe recapping techniques / devices used	2			
115	Sharps (needles, blades) are single use	1			
	Employees use engineering controls (e.g., forceps) to retrieve contaminated sharps				
116	from trays or containers	2			
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Disclaimer: The Texas State Board of Dental Examiners established the content of this checklist. This is a replication of the official checklist they use for inspecting dental offices. The questions have not been altered. Furthermore, there are questions that do not reflect OSHA's partial exemptions for dentists. The lower the level numbers in the right-hand column the more severe the penalty associated with the violation. This information is provided for educational purposes and is not intended to serve as legal advice. If you need legal advice contact your attorney.