

FREE Guide: 3 Tips For Team Success

A trusted, compliant, and efficient dental practice is built on a strong infection prevention and control (IPAC) foundation. Every team member—from new hires to seasoned staff—plays a vital role in maintaining a safe environment.

This FREE guide provides 3 key pillars to strengthen your team's infection control approach, ensuring compliance, improving patient safety, and boosting your practice's reputation.

DAILY CHAIR SIDE INFECTION CONTROL CHECKILIST

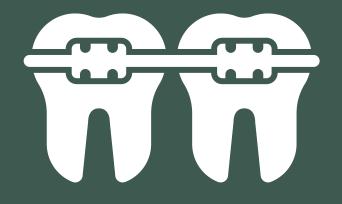


Consistency is key in infection prevention. Use this daily checklist to ensure your team follows best practices.

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	Perform hand hygiene before setting up the operatory. Ensure PPE (gloves, masks, eye protection, gowns) is available. Disinfect all surfaces (e.g., chairs, counters, trays) with an approved disinfectant. Set up sterilized instruments, with their packaging still intact, and confirm expiry dates.	
During the Procedure:		
	Perform hand hygiene before donning PPE and assisting the patient.	
	Perform a point-of-care risk assessment to determine what PPE is required for the task.	
	Dispose of sharps immediately in a designated sharps contained Perform hand hygiene when moving between different tasks.	
After the Appointment:		
	Remove PPE and perform hand hygiene before cleaning and disinfection.	
	Replace barriers on all hard-to-clean surfaces (e.g., keyboards and handpieces).	
	Disinfect all patient-contact surfaces.	
	Place used instruments in a covered transport container for reprocessing.	

EMERGENCY IPAC RESPONSE GUIDE



Be prepared for unexpected infection control breaches with this quick response plan:

Ctarilization Failure

I.	Sterilization Failure.
	Immediately quarantine affected instruments and do not use them. Quarantine the affected sterilizer. Notify staff and reschedule patients if necessary. Document findings and corrective actions. Contact the local regulatory authority for further instructions, if required.
2.	Needlestick or Sharps Injury:
	Perform immediate first aid: wash with soap and water, apply antiseptic, and cover the wound. Report to the designated health and safety representative, and complete an incident form. Seek medical assessment and follow-up for possible post-exposure prophylaxis.
3.	Blood or Body Fluid Exposure:
	Remove contaminated clothing or PPE. Wash exposed skin thoroughly; for eye/mouth exposure, flush with water for at least 15 minutes. Notify the health and safety representative and complete documentation.
	Determine if follow-up medical care is required.

INFECTION CONTROL RISK ASSESSMENT



How well does your practice control infection risks? Use this quick assessment

Hand Hygiene: Are team members performing hand hygiene at the right moments? (e.g., before/after patient care, before donning PPE, after doffing PPE, etc.) Yes No
PPE Use: Are PPE (e.g., masks, gloves, gowns, and eyewear) being used and changed appropriately? Yes No
nstrument Reprocessing: Are sterilized instruments stored correctly in a clean area? Are complete sterilization logs maintained? Yes No
Surface Disinfection: Are patient-contact areas properly disinfected between patients? Is the contact time of the disinfectant being followed? Yes No
Sharps Disposal: Are sharps containers used correctly and not overfilled? Are sharps disposed of at the point of use? Yes No

If you answered "no" to any of these, it's time to reinforce best practices in your team!

YOUR JOURNEY TO DENTAL COMPLIANCE STARTS WITH US



INFECTION CONTROL FOR DENTAL TEAMS

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