

1st Revision: July 2019

#### IPAC CHECKLIST FOR DENTAL PRACTICE

# Reprocessing of Dental/Medical Equipment/Devices

#### When to use this checklist?

This Infection Prevention and Control (IPAC) checklist:

- helps guide public health units (PHUs) and regulatory colleges in conducting inspections/assessments/investigations related to IPAC practices.
- supports dental practices in examining, evaluating (e.g., self-assessment) and comparing their current IPAC practices using provincial recommendations.
- does not replace legislative requirements.

Public Health Ontario (PHO) has developed this Checklist for Reprocessing of Dental Equipment/Devices in Dental Practice in collaboration with the Royal College of Dental Surgeons of Ontario (RCDSO), the College of Dental Hygienists of Ontario (CDHO), and the Ministry of Health and Long-Term Care (MOHLTC).

The content of this checklist is based on the Provincial Infectious Disease Advisory Committee's (PIDAC) Best Practices for Cleaning, Disinfection and Sterilization of Medical Equipment/Devices, May 2013 and consolidates legislation, published standards, and recommendations from government, agencies, regulatory bodies and professional associations, as relevant to the dental context.

For more information about this IPAC Checklist, please contact ipac@oahpp.ca.

#### Legend

- Legislated Requirement (LR): Must be compliant with the relevant Act or regulation (e.g., Occupational Health and Safety Act).
- **High Risk (H):** Immediate health hazard exists. Correct the specific high risk activity/activities immediately. The act or failure to act immediately may lead to the transmission of infection or risk of illness or injury.
- Medium Risk (M): Correct the medium risk activity/activities. Timelines for compliance or agreement on alternate process to be determined during the inspection.
- Inform and Educate (IE): Provide information on best practices and mandatory legislated practice requirements (where applicable). Just-in-time education may be provided.

These categorizations represent the minimum risk level. Based on judgment and circumstance, public health units or any others using the IPAC Checklist may increase the risk category.

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Setting Name:	
Setting Address:	
Self-Assessment	Inspection
Date:	Time:
Name(s) and Designation of Inspector/Investigator/Asses	ssor:

LR: Legislated Requirement R: Risk C: Compliant NC: Not Compliant NA/NR: Not Applicable/Not Reviewed

**Setting Contact Name(s) and Phone Number(s)** 

# 1. Record keeping

1	Record keeping	LR	R	С	NC	NA NR
1.1	<ul> <li>A log of test results during sterilization is maintained and reviewed. Information to be recorded includes:         <ul> <li>load control label (sterilizer number, load number, and date of sterilization)</li> <li>chart/printout of physical parameters of the sterilization cycle;</li> <li>load contents;</li> <li>person responsible for the sterilization cycle;</li> <li>chemical indicator (CI) monitoring results; and</li> <li>biological indicator (BI) monitoring results.</li> </ul> </li> <li>Resources: Refer to the sections on: <a href="Sterilization of Reusable Medical Equipment/Devices">Sterilization of Reusable Medical Equipment/Devices</a></li> </ul> <li>Additional Resources: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).</li> <li>PHO logs: <a href="Sterilization monitoring log for tabletop steam sterilizers.">Sterilization monitoring log for tabletop steam sterilizers.</a></li>		Н			

1	Record	d keeping	LR	R	С	NC	NA NR
1.2		logs (e.g., efficacy testing and maintenance) are ained, as per manufacturer's instructions for use in the second of the second		M			

**Section 1 - Notes and recommendations:** 

# 2. Personal protective equipment (PPE)

2	Personal protective equipment (PPE)	LR	R	С	NC	NA NR
2.1	PPE is available and readily accessible in appropriate sizes.  Resource: For items 3.1 and 3.2, refer to the section on Personal Protective equipment.  Additional Resource: Occupational Health and	LR	M			
	Safety Act, RSO 1990, c O.1, s.25, Reg. 851 s.					
2.2	PPE (gloves, gown, mask, eye protection) is worn for procedures (e.g., instrument cleaning) that are likely to result in splashes or sprays of blood or other body fluids.  Additional Resource: Occupational Health and Safety Act, RSO 1990, c 0.1, s.28, Reg. 851.	LR	M			

#### **Section 2- Notes and recommendations:**

# 3. Physical space

3	Physical space	LR	R	С	NC	NA NR
	There is a designated reprocessing area that is separated into distinct areas for:					
3.1	<ul> <li>receiving, cleaning, and decontamination;</li> <li>preparation and packaging;</li> <li>sterilization; and</li> <li>storage.</li> </ul>		M			
	Resource: Refer to the section on Environmental Requirements for Reprocessing Areas.					
	Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).					
3.2	There is a one-way work flow from dirty to clean to prevent cross-contamination.					
3.2	Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		н			
	There is a sink sufficient in size and depth for cleaning medical equipment/devices in the reprocessing area.					
3.3	Resource: Refer to <u>Appendix C: Space</u> <u>Recommendations</u> .		M			
	Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).					

3	Physical space	LR	R	С	NC	NA NR
3.4	There are sufficient flat, cut-resistant, seamless, and non-porous work surfaces that can be cleaned, disinfected, and dried to handle the volume of work.  Resource: Refer to Appendix C: Space Recommendations.  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		М			
3.5	Dedicated hand washing sinks and/or alcohol-based hand rub dispensers are conveniently located in or near all reprocessing and preparation areas.*  Resource: Refer to Appendix C: Recommendations for Physical Space for Reprocessing.  *Note: Z314-18 recommends designated hand washing sinks at entrances to, and exits from, the decontamination area.		M			
3.6	There is a puncture-resistant sharps container at point-of-use and/or sharps are transported to the reprocessing area in a covered container (e.g., plastic tray with hard plastic cover) or cassette.  > Resource: Refer to the section on Transportation and Handling of Contaminated Medical Equipment/Devices.  > RCDSO, Standard of Practice Infection Prevention and Control in the Dental Office (2018)  > CDHO Infection Prevention and Control (IPAC) Guidelines (2018)		М			
3.7	There is a regular schedule for environmental cleaning in the designated reprocessing area that includes a written policy and procedure and clearly defined responsibilities.  Resource: Refer to the section on Environmental Cleaning in Sterile Processing Departments.  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		M			

#### **Section 3 - Notes and recommendations:**

# 4. Single use dental/medical equipment/devices

4	Single use dental/medical equipment/devices	LR	R	С	NC	NA NR
	Critical and semicritical dental/medical equipment/devices labelled as single-use are not reprocessed and/or reused. Some items, such as prophylaxis angles, high-volume suction tips and air/water syringe tips are commonly available in single-use forms or reusable forms.					
4.1	<ul> <li>Resource: Refer to the section on Single-Use         Medical Equipment/Devices.     </li> <li>RCDSO, Standard of Practice Infection Prevention         and Control in the Dental Office (2018)     </li> <li>CDHO Infection Prevention and Control (IPAC)         Guidelines (2018)     </li> </ul>		Н			

**Section 4 - Notes and recommendations:** 

# 5. Cleaning of semicritical and critical dental/medical equipment/devices

5	Cleaning of semicritical and critical dental/medical equipment/devices	LR	R	С	NC	NA NR
	Newly purchased, non-sterile critical and semicritical dental/medical equipment/devices are inspected and reprocessed prior to use, according to their intended use, as per MIFU.					
5.1	Resource: Refer to PIDAC Best Practices for Cleaning, Disinfection and Sterilization in All Health Care Settings, May 2013. See section on Purchasing and Assessing Medical Equipment/Devices and/or Products for Disinfection or Sterilization Processes.		Н			
	Contaminated dental/medical equipment/devices are kept separate from clean dental/medical equipment/devices.					
5.2	Resource: For 5.2 to 5.16, refer to the section on <u>Disassembly, Inspection and Cleaning of Reusable</u> <u>Medical Equipment/Devices</u> .		н			
5.3	Immediately after use, the dental/medical equipment/devices are pre-cleaned (e.g., wiped, gross soil removed manually) at the point of use before transport for further manual or mechanical cleaning.		M			
	Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).					
5.4	If cleaning cannot be done immediately, the dental/medical equipment/devices are kept moist in a transport/holding container by using a product specifically intended for this use and in accordance with the MIFU.		M			
5.5	All dental/medical equipment/devices consisting of multiple components are disassembled according to the MIFU and/or opened for cleaning and sterilization.		н			
	Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).					

5	Cleaning of semicritical and critical dental/medical equipment/devices	LR	R	С	NC	NA NR
5.6	<ul> <li>Dental/medical equipment/devices that have lumens:</li> <li>Are cleaned with a brush, according to the MIFU;</li> <li>Are manually or mechanically flushed with a detergent solution;</li> <li>Receive a final rinse using commercially prepared sterile, pyrogen-free water;</li> <li>Are checked for obstructions and leakage; and</li> <li>Are dried with compressed air that has been filtered and dried.</li> <li>Additional Resource: Refer to the section on Factors Affecting the Efficacy of the Reprocessing Procedure.</li> </ul>		н			
5.7	Dental/medical equipment/devices are cleaned manually, using friction, with a detergent or an enzymatic solution.  Alternatively, mechanical cleaning is done with a washer/disinfector or ultrasonic cleaner.  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		н			
5.8	Cleaning equipment (e.g., brush) is, at a minimum, cleaned, disinfected, dried, and stored after each use or else discarded.		M			
5.9	Ultrasonic cleaners, if used, are tested for sonification performance at least weekly or preferably each day it is used, using a commercial method or foil test in accordance with MIFU.  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		М			
5.10	The ultrasonic cleaning solution is changed, as per ultrasonic cleaner and/or solution MIFU or more frequently when visibly soiled (e.g., with every cycle).  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		M			_
5.11	Dental/medical equipment/devices are completely immersed in the ultrasonic cleaning solution and not bound together.  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		н			

5	Cleaning of semicritical and critical dental/medical equipment/devices	LR	R	С	NC	NA NR
5.12	Washer/disinfectors are tested for cleaning efficacy using commercially available indicators or test kits in accordance with MIFU; daily and weekly maintenance is carried out, as per MIFU.  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		M			
5.13	Ultrasonic cleaners and washer/disinfectors receive documented preventative maintenance, as per MIFU.		IE			
5.14	Dental/medical equipment/devices are thoroughly rinsed with water after cleaning to remove residues.		M			
5.15	Dental/medical equipment/devices are dried prior to sterilization (e.g., using lint-free cloth).  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		M			
5.16	Detergent or enzymatic cleaning solution is discarded, as per the MIFU.		M			

**Section 5 - Notes and recommendations:** 

# 6. Chemical products for disinfection

6	Chemical products for reprocessing	LR	R	С	NC	NA NR
6.1	<ul> <li>Chemical products used for disinfection/sterilization are:</li> <li>licensed for use in Canada;</li> <li>prepared and used according to MIFU for dilution, temperature, water hardness, use, shelf life and storage conditions;</li> <li>labelled with expiry date;</li> <li>stored in a manner that reduces risk of contamination; and</li> <li>compatible with medical equipment/devices being reprocessed, according to MIFU.</li> <li>Resource: For items 6.1 to 6.5, refer to the section on Methods Of Disinfection For Semicritical Medical Equipment/Devices – Liquid Chemical Disinfection</li> </ul>		Н			
6.2	Disinfectants are not used past expiry date.		M			

**Section 6 - Notes and recommendations:** 

## 7. Sterilization

7	Sterilization	LR	R	С	NC	NA NR		
	Critical and semicritical dental/medical equipment/devices* are either disposable or sterilized using an approved sterilization process.  *All critical and semi-critical instruments used in dentistry, including handpieces, are available in heat-tolerant and/or single-use (disposable) forms. All heat-tolerant reusable critical and semi-critical instruments must be heat-sterilized between uses. All single-use items must be disposed of				н			
7.1	following use.  Resources: For items 7.1 to 7.20, refer to the section on Sterilization of Reusable Medical  Equipment/Devices and  CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).  RCDSO, Standard of Practice Infection Prevention and Control in the Dental Office (2018).  CDHO Infection Prevention and Control (IPAC)  Guidelines (2018).		Н					
7.2	The MIFU are followed for installation, operation, and preventative maintenance of sterilizing equipment.		М					
7.3	Qualification or re-qualification of sterilizers is done, as per MIFU.		M					
7.4	Dental/medical equipment/devices are packaged according to the MIFU for both the packaging and the dental/medical equipment/devices.		M					
7.5	Dental/medical equipment/devices are packaged for sterilization in such a way that the steam can move around and through the item(s) and contact all surfaces.		н					
7.6	Dental/medical equipment/devices are disassembled for sterilization, unless otherwise stated in the MIFU.		H					
7.7	Dental/medical equipment/devices are in the unlocked and open position for sterilization.		Н					
7.8	Each package is labelled with date processed, sterilizer used, cycle or load number and the health care provider's initials in a manner that does not puncture or dampen the package. If the medical equipment/devices are not visible, package contents are labelled.		M					

7	Sterilization	LR	R	С	NC	NA NR
7.9	Cls are placed appropriately in (internal – minimum Type 4) and on (external – Type 1) each package, if not built into the pouch/package.		н			
7.10	Packaged dental/medical equipment/devices are placed in the sterilizer according to sterilizer's MIFU.		н			
7.11	Dental/medical equipment/devices are sterilized in accordance with the MIFU (e.g., recommended cycle parameters).		н			
7.12	Sterilizer mechanical display, print out, or USB is checked, verified, and signed for each cycle by the person sterilizing the medical equipment/devices.  If the sterilizer does not have a printer, there is a plan to replace it; in the meantime, time and temperature are recorded at intervals during each cycle and a type 5 CI is placed in every package.		н			
7.13	Sterilizer is tested with a BI in a process challenge device (PCD) each day the sterilizer is used and with each type of cycle used that day.		н			
7.14	A control BI from the same lot number as the test BI and unexposed to sterilant is incubated according to the MIFU each day that routine BIs are incubated.		M			
7.15	A BI in a PCD is included in every load containing implantable devices and devices are not released until the result of the BI is available.		н			
7.16	Dental/medical equipment/devices are only released when the BI results are available; if quarantine pending BI results is not possible, evaluation of a Type 5 or 6 CI in a PCD and the specific cycle physical parameters are used to justify the release of routine loads.		M			
7.17	There are contingency plans (i.e., recall policy and procedure) in the event of reprocessing failures.		IE			
7.18	If a pre-vacuum sterilizer is used, an air-detection PCD (e.g., Bowie-Dick test pack) is done, in an empty chamber, every day the sterilizer is used.		н			
7.19	Processed packages are allowed to dry inside the sterilizer chamber before removing and handling.		M			

7	Sterilization	LR	R	С	NC	NA NR
7.20	Processed packages that are unsealed, damaged, wet, visibly soiled or have been dropped on the floor are considered contaminated and are reprocessed through the full reprocessing cycle.		M			
7.21	Sterilized dental/medical equipment/devices are not used until the CIs are checked.  Resource: Refer to the section on Routine Monitoring of Sterilizers.		н			
7.22	If a failed CI is found, the contents of the package are reprocessed again before use.  Resource: Refer to the section on Continued Monitoring and System Failures.  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		н			
7.23	Sterilizer MIFU are followed for performance qualifications for lumen sterilization that include written instructions and limitations, such as load configuration and weights, length of lumens, materials (e.g., stainless steel, cellulose*), barrier systems (e.g., packaging), and conditions that could cause a cycle cancellation.  > Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018)  > *Note: Examples of cellulose-based items can include cotton towels, gauze or wood.		Н			

**Section 7 - Notes and recommendations:** 

# 8. Storage

8	Storage	LR	R	С	NC	NA NR
	Sterile dental/medical equipment/devices are stored in their sterile packaging until time of use.					
8.1	Resource: For items 10.1 & 10.2, refer to the section on <u>Storage and Use of Reprocessed Medical</u> <u>Equipment/Devices</u> .		H			
8.2	Packaged, sterilized dental/medical equipment/devices are stored securely in a manner that keeps them clean, dry, and prevents contamination (e.g., not under a sink, away from potential splashing).		Н			
	Dental/medical equipment/devices, which have been reprocessed, are differentiated from equipment/devices, which have not been reprocessed (e.g., observed colour changes in external and internal chemical indicators).					
8.3	<ul> <li>Resource: Refer to the section on <u>Transportation</u> and <u>Handling of Contaminated Medical</u> <u>Equipment/Devices</u>.     </li> <li>Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).</li> </ul>		Н			

**Section 8 - Notes and recommendations:** 

# 9. Education and training

9	Education and training	LR	R	С	NC	NA NR
9.1	The level of education, training, and certification of staff is based on the volume and complexity of the reprocessing activity, as determined by an organizational risk assessment.  Resource: For items 9.1 to 9.4, refer to the section on Education and Training.  Additional Resource: Recommendations for Education, Training and Certification for Reprocessing in Clinical Office Settings  RCDSO, Standard of Practice Infection Prevention and Control in the Dental Office (2018)  CDHO Infection Prevention and Control (IPAC) Guidelines		IE			
9.2	Staff assigned to reprocess dental/medical equipment/devices receive device-specific reprocessing instructions from the device manufacturer to ensure proper cleaning and sterilization.		M			
9.3	There is a policy that specifies the requirements for, and frequency of, education and training at regular intervals (e.g., orientation and continuing education), as well as competency assessment for all personnel involved in the reprocessing of medical equipment/devices.		IE			
9.4	Continuing education programs for reprocessing are provided at regular intervals, as needed, so that personnel can review and update their knowledge and skills; records of training and continuing education are maintained.  Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).		IE			
9.5	In settings where surgical procedures are done (including IHF, OHP, Dental Surgical Facility) and where reprocessing is performed on site, there is a designated individual(s) responsible for reprocessing, with training to the level that is required for the volume and complexity of the equipment to be reprocessed.  > Resource: Refer to PIDAC – Infection Prevention and Control for Clinical Office Practice, June 2013. See section on Requirements for Staff Training.		M			

#### **Section 9 - Notes and recommendations:**

# 10. Policies and procedures

10	Policies and procedures	LR	R	С	NC	NA NR
10.1	There is a written policy and procedure that says if dental/medical equipment/devices cannot be reprocessed according to the manufacturer's instructions for use (MIFU), they are not to be purchased or they are designated as single-use.		IE			
	Resource: For items 10.1 and 10.2, refer to the section on <u>Purchasing and Assessing Medical</u> <u>Equipment/Devices and/or Products for Disinfection</u> <u>or Sterilization Processes.</u>					
10.2	There are written policies and procedures for all aspects of reprocessing that are based on current recognized standards/recommendations/MIFU and these are reviewed regularly and/or as new information becomes available.		IE			
	Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).					
10.3	There is a policy and procedure for the recall of improperly reprocessed equipment that includes notification of the principle dentist(s)/dental hygienist(s)/denturist(s)/owner(s)/operator(s), as well as assessment of patient risk, and potential notification of patients, other facilities, and/or regulatory body/bodies.					
10.3	<ul> <li>Resource: Refer to the section on Recalls.</li> <li>Additional Resource: Roles and Responsibilities in Community Health Care Settings During Potential Infection Prevention and Control Lapse Investigations; Information for Public Health Units and Stakeholders.</li> </ul>		IE			

10	Policies and procedures	LR	R	С	NC	NA NR
10.4	There is a policy and procedure that requires scheduled preventative maintenance of cleaning and sterilization equipment with written documentation that this has occurred.  Resource: Refer to the section on Policies and		IE			
	Procedures.					
10.5	There is a policy and procedure for quality monitoring and documentation of the reprocessing process (e.g., biological indicators (BI), chemical indicators (CI)).		IE			
	Resource: Refer to the section on Policies and Procedures.					
10.6	There is a policy and procedure regarding single-use dental/medical equipment/devices.					
10.6	Resource: Refer to the section on <u>Single-Use</u> <u>Medical Equipment/Devices</u> .		IE			
	There is a policy and procedure outlining the process for removing from use faulty dental/medical					
	equipment/devices until repaired or replaced.		IE			
10.7	Resource: Refer to the section on Policies and Procedures.					
	<ul> <li>Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018)</li> </ul>					

**Section 10 - Notes and recommendations** 

## 11. Other considerations

11	Other considerations	LR	R	С	NC	NA NR
11.1	There is a process for receiving and disseminating dental/medical equipment/devices alerts and recalls originating from the manufacturer(s) or government agencies and there is a process in place to ensure recall has occurred within the practice.  > Resource: Refer to the section on Continued Monitoring and System Failures.  > Additional Resource: CAN/CSA – Z314-18 Canadian medical device reprocessing (2018).  > Government of Canada Recalls and Safety Alerts		M			

**Section 11 - Notes and recommendations:** 

LR: Legislated Requirement R: Risk C: Compliant NC: Not Compliant NA/NR: Not Applicable/Not Reviewed

Please print and sign:
Owner/Operator (print name):
Signature:
Date:
Inspector/Assessor/Investigator Signature:
Additional Inspector/Assessor/Investigator Signature(s):
Additional notes:

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