

### Precision Ceramics Quality Assurance:

We are registered with the Medical Devices Agency registration number: 6551, so that you can be sure that the alloys and materials we use are of the highest standards and meet all legal requirements.

### Preparing to Work

- A separate work area is set aside in the laboratory to receive all incoming work.
- The work area is thoroughly disinfected before commencing with preparing outgoing work for postage or delivery.
- The person handling incoming work shall not be interrupted by unrelated tasks -answering the telephone, tracing work in the laboratory etc - because of the danger of contaminating other items and the possibility of missing an incoming item or disinfecting it incorrectly. □  
The person carrying out this work shall not, eat, drink or smoke whilst processing this incoming work.

### The Use of Personal Protective Clothing and Equipment

On hand at the bench shall be a variety of items to enable the technician or laboratory assistant handling the incoming work to carry out their work in a safe manner. Before handling any of the incoming work from the surgery or from the public (i.e. repairs) the technician or laboratory assistant should ensure that they are wearing appropriate protective equipment and clothing. □ Eye protection - Goggles

- Gloves
- Waterproof apron to protect the clothing from bleach splashes.

### Preparing the Work Area

The workbench should be wiped down with disinfectant at the beginning and end of each workday. On hand at the work surface shall be:

- Disinfectant containing sodium hypochlorite - a bottle of household bleach is suitable or a product specifically designed for the disinfection of impressions
- Suitable containers with lids - to place impressions in disinfectant solution.
- A pair of suitable plastic tongs to handle the impressions or other items in the disinfection solution.

### Preparing for Disinfection

Only ever open and handle work from the surgery when wearing full protective equipment and clothing - goggles, gloves and plastic apron.

- Tag and mark the items with appropriate identification prior to being disinfected so that they will be returned to the correct pan after having been disinfected and rinsed.
- Discard all wrappings, packing material etc and anything that has been in contact with the impression as contaminated Clinical Waste, unless otherwise identified.

### Disinfecting

It is the duty of the dental surgery to disinfect impressions prior to sending them to the laboratory. If not:

- Follow the guidelines set out in the BDA Advice Sheet A12 - Infection Control in Dentistry.
- Rinse the impressions etc under running tap water. Do not use a sink with a plaster trap in it.

Plaster traps are ideal breeding grounds for germs.

- Items should be placed in the disinfection solution by using suitable plastic tongs provided. Use a timer to note how long the impression has been in the solution for.
- Place the lid on the container to control the fumes from the disinfecting solutions which can be unpleasant and may cause irritation to the eyes.

### Alginates/Polyether's - a special case.

These impression materials are more delicate and require careful handling. Long-term immersion with water should be avoided.

- After careful rinsing, dip the impressions in a suitable solution of disinfectant for a few seconds.
- Rinse and dip again. Wrap in gauze which has been soaked in the disinfectant solution for ten minutes.
- Place the wrapped impression in an airtight environment such as a closed airtight plastic container for ten minutes.

If using a proprietary brand of impression disinfectant, always follow the manufacturer's instructions.

### Following Disinfection

Following disinfection, impressions and other items should be forwarded to the appropriate production area. The prescription that accompanies the item should be protected by placing in a suitable plastic bag so that it does not contaminate the freshly disinfected item or become wet when in contact with it.

### Cross Infection Control in Production Areas

All work benches, sinks and model trimmers in the lab benefit from being wiped down daily with a disinfection solution.

Work pans to be cleaned after use and disinfected. There should be strict controls in place to avoid finished work ready to be returned to the surgery from being placed in pans that have just held work that was still contaminated.

All staff are instructed not to eat, drink or smoke at the bench. Staff are encouraged to practise strict hygiene. Anti-microbial soap is available in the toilet for washing hands. All cuts and lesions on hands are immediately covered up with appropriate wound dressing.

As far as is reasonably practical the laboratory should be kept as clean as possible. Walls and work surfaces and flooring are capable of being wiped clean.

### Pumice

Where the polishing lathe is constantly used, it is important that the items to be polished are free of bacteria when brought to the area. This is particularly important when dealing with items like repairs. If the repaired prosthesis has not been disinfected it may transfer bacteria into the pumice which will then be used on new appliances.

The pumice is changed on a regular basis and the pan holding the pumice is disinfected before putting fresh pumice into it.

As pumice always produces a contaminated splatter and aerosol, a liquid disinfectant (5 parts sodium hypochlorite to 100 parts distilled water) is used as the mixing medium in pumice.

### Rag Wheels and Brushes

Wear a dust/mist-type facemask and eye protection when operating a moel trimmer, brush trimmer or rag wheel with pumice.

Rag Wheels and brushes are to be soaked for ten minutes after use and left to dry overnight.

### Returning Work to the Surgery

Ideally appliances being returned to the surgery and items which have been repaired for patients visiting the laboratory should be disinfected prior to return.

### Dealing with The Public Items for repair

Members of the Public visiting the laboratory often bring along items for repair.

Technicians should only accept items for repair whilst wearing gloves. The item should then be disinfected immediately in a hypochlorite solution as used for disinfecting impressions.

### Shade taking

Occasionally a patient may visit for shade taking. As there may be a small degree of contact with the patient's mouth, make sure that you wash their hands with bactericidal liquid soap. Suitable Gloves should also be worn. These gloves should be disposable and changed between patients.

Whilst attending the patient, it is important not to go off and do unrelated work. Cross contamination could occur and you will be putting the patient at risk. As the shade guide is likely to have contact with the patient's mouth this also needs to be disinfected between patients.

### Recommended Training Programme

- New and existing employees to be trained to understand how and why cross infection takes place.
- All employees must be trained to be aware of when, where and how Personal Protective Clothing and Equipment should be worn. They should be trained to be aware that PPE has limitations and should not be seen as working as an absolute safeguard against cross-infection. □ All employees are made aware of the importance of seeking Hepatitis B Vaccination
- All employees should be trained to disinfect impressions and other items that have been returned to the laboratory such as try-ins or items for repair or adjustment that have had contact with the patient's mouth.
- New employees to receive cross infection control training as part of their induction.