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| CONTROL OF INFECTION COMMITTEE | Effective | July 2017 |
| | From | |
| STANDARD OPERATING PROCEDURE (SOP) | Review Date | July 2019 |
| DECONTAMINATION OF DENTAL IMPRESSIONS (DI) | Version | 1 |
| DENTAL APPLIANCES (DA) | | |
| & DENTAL LABORATORY WORK(DLW) | | |

The most up-to-date version of this SOP can be viewed at the following website: www.nhsggc.org.uk/your-health/infection-prevention-and-control/

This SOP applies to all staff employed by NHS Greater Glasgow & Clyde (NHS GG&C) and locum staff on fixed term contracts and volunteer staff.

SOP Objective

To ensure that Healthcare Workers (HCW) are provided with guidance that when followed will minimise risk of cross contamination from other sources.

Document Control Summary

| Approved by and date | Board Infection Control Committee 31 st July 2017 |
|--|---|
| Date of Publication | 31st July 2017 |
| Developed by | Dental Nurse Managers, Oral Health Directorate (OHD) |
| Related Documents | Standard Infection Control Precautions (SICPS)-(HPS National IPC Policy) NHS&GGC Hand Hygiene(Standard Precautions) 2015 NHS&GGC COSHH Policy 2015 COSHH <i>Perform ID</i> document |
| Distribution/ Availability | NHSGGC Infection Prevention & Control Manual www.nhsggc.org.uk/your-health/infection-prevention-and-control/ |
| Implications of Race Equality and other diversity duties for this document | This SOP must be implemented fairly and without prejudice whether on the grounds of race, gender, disability, sexual orientation or religion. |
| Lead Manager | Clinical Service Manager, Oral Health |
| Responsible Director | Board Medical Director |

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& DENTAL LABORATORY WORK(DLW)

| Aim | To ensure that Healthcare Workers (HCW) are provided with guidance that when followed will minimise risk of cross contamination from other sources. |
|--------------|---|
| Statement | All HCW must adhere to policy for decontamination of DI, DA and DLW. |
| Requirements | Dental Nurse Team Leaders should ensure staff have the necessary equipment available. A room with a designated clinical wash hand basin for hand hygiene only and a sink for any other purposes. HCW are trained in the procedure. Personal protective equipment (PPE) (visor, apron and gloves). A suitable rigid container with tight fitting lid must be used. Manufacturers guidelines for frequency of solution change / duration of product stability must always be followed when preparing approved immersion disinfection product (i.e. Perform). |
| Location | All dental surgeries, clinics and dental laboratories across NHS GG&C. |



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Procedure Prior to dental/laboratory procedures involving (DI) (DA)and(DLW): Staff should wear appropriate PPE. • DI DA and DLW must be immersed in prepared immersion disinfection solution following manufacturers recommendation (i.e. Perform for ten minutes). Following removal from immersion disinfection solution DI DA and DLW must be rinsed under cold running water. This procedure **must** not be carried out in the designated wash hand basin Laboratory record card must be completed to indicate disinfection procedure has been followed. Following dental/laboratory procedures involving (DI) (DA)and(DLW): DI DA and DLW must be rinsed in cold running water to remove visible contamination e.g. blood and saliva. This procedure **must not** be carried out in the designated wash hand basin. DI DA and DLW must be immersed in prepared immersion disinfection solution, following manufacturer's recommendation (i.e. Perform for ten minutes). Following removal from immersion disinfection solution DI DA and DLW must be rinsed under cold running water. This procedure **must not** be carried out in the designated wash hand basin. Laboratory record card must be completed to indicate disinfection procedure has been followed. After care There are no specialised requirements needed for disposal of immersion disinfection product as per local Perform ID COSHH document. It should **not** be disposed via the designated wash hand basin. Ensure manufacturer's recommended approved immersion disinfection product is stored appropriately according to NHS GG&C COSHH Policy.