

AMENDATORY SECTION (Amending WSR 95-21-041, filed 10/10/95, effective 11/10/95)

WAC 246-817-601 Purpose. The purpose of WAC 246-817-601 through ~~((246-817-630))~~ 246-817-660 is to establish requirements for infection control ~~((in dental offices))~~ everywhere dentistry is provided to protect the health and well-being of the people of the state of Washington. ~~((For purposes of infection control, all dental staff members and all patients shall be considered potential carriers of communicable diseases. Infection control procedures are required to prevent disease transmission from patient to doctor and staff, doctor and staff to patient, and from patient to patient. Every dentist is required to comply with the applicable standard of care in effect at the time of treatment. At a minimum, the dentist must comply with the requirements defined in WAC 246-817-620 and 246-817-630.))~~ The Center for Disease Control and Prevention (CDC) Guidelines for Infection Control in Dental Health-Care Settings 2003, MMWR Vol. 52, No. RR-17, and the Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care, March 2016, are the basis for these rules. Case reports and public health events regarding the transmission of diseases from patient to patient, dental health care provider (DHCP) to patient, and patient to DHCP have been published that demonstrate risks that were either unrecognized in the past or new. This includes people accompanying patients and visitors. A strong educational component is necessary to prevent disease transmission from patient to DHCP, DHCP to patient, and patient to patient.

AMENDATORY SECTION (Amending WSR 95-21-041, filed 10/10/95, effective 11/10/95)

WAC 246-817-610 Definitions. The following definitions pertain to WAC 246-817-601 through 246-817-660 ~~((which supersede WAC 246-816-701 through 246-816-740 which became effective May 15, 1992))~~.

~~((**"Communicable diseases"** means an illness caused by an infectious agent which can be transmitted from one person, animal, or object to another person by direct or indirect means including transmission via an intermediate host or vector, food, water or air.~~

~~**"Decontamination"** means the use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.~~

~~**"Direct care staff"** are the dental staff who directly provide dental care to patients.))~~ (1) **"Critical"** is a category given to patient care items (dental instruments, devices, and equipment) depending on the potential risk for infection associated with the intended use. Critical items used to penetrate soft tissue, contact bone, enter into or contact the bloodstream or other normally sterile tissue must be sterilized by heat.

(2) **"Dental health care provider (DHCP)"** means a licensed dentist, licensed dental hygienist, a licensed expanded function dental

auxiliary, a certified dental anesthesia assistant, and a registered dental assistant.

(3) "Disinfect" means the use of a chemical agent used on inanimate objects to destroy recognized pathogenic microorganisms, but not necessarily all microbial forms.

(4) "Hand hygiene" means the use of soap and water when hands are visibly soiled; otherwise an alcohol-based hand rub may be used.

(5) "Noncritical" is a category given to patient care items (dental instruments, devices, and equipment) depending on the potential risk for infection associated with the intended use. Noncritical items used to contact intact skin must be disinfected with Environmental Protection Agency registered hospital disinfectant or detergent.

(6) "Semicritical" is a category given to patient care items (dental instruments, devices, and equipment) depending on the potential risk for infection associated with the intended use. Semicritical items used to contact mucous membranes or nonintact skin must be sterilized by heat if heat-tolerant. If a semicritical item is heat-sensitive, it must be processed with high-level disinfection.

(7) "Sterilize" means the use of a physical or chemical procedure to destroy all ((microbial—life)) microorganisms including ((highly)) substantial numbers of resistant bacterial ((endospores)) spores.

NEW SECTION

WAC 246-817-615 Administrative, education and training, and program evaluation. (1) A licensed dentist shall develop and maintain written infection prevention policies and procedures appropriate for the dental services provided by the facility. Bloodborne pathogens training may not count as infection control training.

(2) All DHCPs shall have at least two hours of job or task specific infection prevention education upon initial hire and training annually by a qualified individual.

(3) All DHCPs shall have at least one hour of infection prevention training annually by a qualified individual.

(4) A licensed dentist shall review with all DHCPs the office infection prevention policies and procedures annually.

(5) A licensed dentist shall maintain documentation for a period of five years.

NEW SECTION

WAC 246-817-625 Personnel safety. A DHCP shall comply with the applicable requirements of the Washington Industrial Safety and Health Act under chapter 49.17 RCW.

NEW SECTION

WAC 246-817-635 Hand hygiene. A DHCP shall perform hand hygiene appropriately in any of these situations:

- (1) When hands are visibly soiled;
- (2) After barehanded touching of instruments, equipment, materials, and other objects likely to be contaminated by blood, saliva, or respiratory secretions;
- (3) Before and after treating each patient; or
- (4) Before putting on gloves and again immediately after removing gloves.

NEW SECTION

WAC 246-817-640 Personal protective equipment. (1) A DHCP shall wear gloves whenever there is a potential for contact with blood, body fluids, mucous membranes, nonintact skin, or contaminated equipment.

- (a) New gloves are required for each patient.
 - (b) Gloves must not be washed or reused.
 - (c) Gloves selection must be based on the performance characteristics of the glove in relation to the task to be performed as applicable in WAC 296-800-16065 and 296-823-15010.
- (2) A DHCP shall wear mouth, nose, and eye protection during procedures that are likely to generate splashes or splattering of blood or other body fluids.
- (3) A DHCP shall comply with Washington state occupational exposure to bloodborne pathogens WAC 296-823-150.

NEW SECTION

WAC 246-817-645 Respiratory hygiene and cough etiquette. (1) A licensed dentist shall post signs at entrances with instructions to patients with symptoms of respiratory infection to:

- (a) Cover their mouth/nose when coughing or sneezing;
 - (b) Use and dispose of tissues;
 - (c) Perform hand hygiene after hands have been in contact with respiratory secretions.
- (2) A licensed dentist shall provide tissues and no-touch receptacles for disposal of tissues.
- (3) A licensed dentist shall offer masks to coughing patients and accompanying individuals.

NEW SECTION

WAC 246-817-650 Safe injection and sharps safety. (1) A DHCP shall follow the CDC *Summary of Infection Prevention Practices in Den-*

tal Settings: Basic Expectations for Safe Care, March 2016, guidelines for safe injection practices in dental settings.

(2) A DHCP shall use either a one-handed scoop technique or mechanical device designed for holding the needle cap when recapping needles. Do not recap used needles by using both hands or any other technique that involves directing the point of a needle toward any part of the body.

(3) A DHCP shall place used disposable syringes and needles, scalpel blades, and other sharp items in appropriate puncture-resistant containers.

NEW SECTION

WAC 246-817-655 Sterilization and disinfection, environmental infection prevention and control. A DHCP shall:

(1) Follow the *CDC Guidelines for Infection Control in Dental Health-Care Settings* 2003, MMWR Vol. 52, No. RR-17, Appendix C for Methods for Sterilizing and Disinfecting Patient-Care Items and Environmental Surfaces, including:

(a) Clean and reprocess (disinfect or sterilize) reusable dental equipment (critical, semicritical, and noncritical) appropriately before use on another patient.

(i) Sterilization of low-speed hand piece motors after use on a patient is required by March 1, 2020.

(ii) Sterilization is not required for low-speed hand piece motors that are battery operated or not connected to air lines, unless the manufacturer instructions recommend sterilization. Motors listed in this subsection that are not sterilized must be disinfected.

(b) Clean and reprocess (disinfect or sterilize) reusable dental equipment (critical, semicritical, and noncritical) according to manufacturer instructions.

(c) Disposable or single use items placed on a surface ready for use with a patient shall not be cleaned or reprocessed (disinfected or sterilized) including, but not limited to, anesthetic carpules.

(2) Sterile instruments must be bagged or wrapped in packages, containers, or cassettes.

(a) Store sterile instruments and supplies in covered or closed cabinets.

(b) Wrapped packages, containers, or cassettes of sterilized instruments must be inspected before opening and use to ensure the packaging material has not been compromised.

(c) Wrapped packages, containers, or cassettes must be opened in front of the patient.

(d) Instruments flash sterilized or sterilized for immediate use are not required to be bagged or wrapped during an adverse event.

(3) Use all mechanical, chemical, and biological monitors according to manufacturer instructions to ensure the effectiveness of the sterilization process.

(4) Test sterilizers by biological spore test method on at least a weekly basis when scheduled patients are treated.

(a) In the event of a positive biological spore test, the licensed dentist shall take immediate remedial action.

(b) A licensed dentist shall record biological spore tests and results either in the form of a log reflecting dates and person(s)

conducting the testing or copies of reports from an independent testing entity. A licensed dentist shall maintain this documentation for a period of five years.

(5) Thoroughly rinse items such as impressions contaminated with blood or saliva. Place and transport items such as impressions to a dental laboratory in an appropriate case containment device that is properly sealed and labeled.

(6) Use surface barriers to protect clinical contact surfaces and change surface barriers between patients.

(7) Clean and disinfect clinical contact surfaces that are not barrier-protected with disinfectant after treating each patient.

(8) Disinfect using an intermediate-level disinfectant (i.e., tuberculocidal claim) when a surface is visibly contaminated with blood.

(9) Use only United States Environmental Protection Agency registered disinfectants or detergents/disinfectants with label claims for use in health care setting, following the manufacturer instructions.

(10) Use high volume evacuation (HVE) whenever possible in all clinical situations reasonably expected to produce large amounts of aerosol or spatter. HVE equipment must be installed and maintained to manufacturer's specifications to ensure proper suction. HVE tips must be used and intended for HVE.

NEW SECTION

WAC 246-817-660 Dental unit water quality. (1) A licensed dentist shall use water that meets United States Environmental Protection Agency regulatory standards for drinking water.

(2) A licensed dentist shall test the water delivery system for acceptable water quality quarterly. After system changes or remedial action to the water lines, a licensed dentist shall test the water delivery system five to ten days and again at twenty-one to twenty-eight days.

(a) The water delivery system must be tested. All water lines must be tested and may be processed as a single sample.

(b) In the event of an unacceptable level of biofilm, a licensed dentist shall take immediate remedial action.

(c) A licensed dentist shall record the water delivery system testing and maintenance either in the form of a log reflecting dates and person(s) conducting the test or maintenance or copies of reports from an independent testing entity. A licensed dentist shall maintain this documentation for a period of five years.

REPEALER

The following sections of the Washington Administrative Code are repealed:

WAC 246-817-620 Use of barriers and sterilization techniques.

WAC 246-817-630 Management of single use items.