

# Policy documents for immunization cell

During dental procedures, as dental health care worker is in contact with body fluids like, air droplets, saliva and blood. So cross contamination can occur from doctor to patient and vice versa so risk of spread of communicable diseases like hepatitis B, hepatitis C, HIV, COVID-19 and others.

So for prevention of these communicable diseases there are protocols to be followed in dental scenario.

1. Immunization against hepatitis B, COVID-19
2. Prevention protocol for HIV /Hep.B/ Hep. C
3. Patient safety measures

## Immunization schedule

1. Immunization against hepatitis B
2. Immunization against COVID-19

For hepatitis B- Vaccination to be given to

1. All fresh students getting admission into BDS and MDS courses.
  2. All medical, dental, nursing and paramedical staff.
  3. All faculty members
- If they are vaccinated earlier, proof document to be submitted to the principal office.

Schedule for Hepatitis B

Dose schedule is dose 0, dose 2 after 1 month, dose 3 after 6 months. Then booster dose after every 5 years.

Table – student list for immunization

Sr. no.	Name of student	Roll no.	Dose 1 Day 1	Dose 2 After one month	Dose 3 5 month After 2 <sup>nd</sup> dose


  
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Table – faculty list for immunisation

Sr. no.	Name	Deptt.	Post	Dose 1	Dose 2	Dose 3

Table – other dental / medical health worker

Sr. no.	Name	Dose 1	Dose 2	Dose 3

Hosp[ital]. needs to arrange vaccine .

Circulars issued from principal office given to all deptt. , student groups and others for the vaccine including date , time , venue and amount written on that.

students and others needs to submit their name for vaccination at least 5 day before vaccination day.

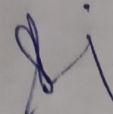
Immunization for covid -19

As per govt . guidelines vaccination scheduled

## Prevention protocol for HIV/hepatitis B / Hepatitis C for dental clinicians

Consider every patient as may be infected with communicable diseases . so prevention protocol to be followed for all patients.

1. Personal protective measures – like gloves, mask, head cap, eye glasses.  
Always wear gloves while directly handling saliva and blood or indirect handling like cleaning and washing.
2. Always use disposable needles .  
Carefully use needles while injecting local anesthesia  
Be alert while capping and uncapping needles

  
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If needle stick injury occurs follow protocol and report immediately .

3. Always follow proper handwashing and gloving techniques
4. Wash hand immediately after every procedure
5. Proper disposal of waste according to BMW protocol
6. While doing dental procedures do not touch light handles and other unsterile areas after wearing gloves or use disposable sleeves.
7. Biohazard spill kit for spill of blood and body fluids and biohazardous/ chemical hazardous material ( amalgam , acrylates, formaldehyde and xylene) - to be available in all clinical areas = containing several old newspapers , several pairs of gloves , safety eyewear or glasses , absorbent material , autoclavable biohazard waste bags, dust pan , scoop or tongs for broken glasses, and house hold bleach.

Place spill kit in a labelled bag or bucket and keep in easily accessible areas.

## Sterilization protocol for instruments and contaminated surfaces and pipes for dental health workers

1. Use personal protective equipments
2. Dental health workers always use heavy duty rubber gloves for cleaning and washing purposes to prevent hand injuries  
Instruments should be cleaned properly first remove debris by scrubbing with brush and clean with soap , detergent or mechanical devices like ultrasonic cleaner for cleaning sharp instruments .  
Injury with needles or sharp instruments should be managed and reported as per protocol
3. Instruments should be routinely and properly sterilized with autoclave. Sterilization tapes to be placed over each pack and later on stuck to sterilization record register.
4. All contaminated surfaces to be cleaned with disinfectant after every patient or use disposable covering for dental chair light handles and other areas.
5. For known hepatitis B/C or HIV cases patients instruments kept and washed separately and dipped in sodium hypochlorite solution overnite and then autoclaved twice before use.
6. Dental clinic staff disinfect and clean contaminated objects like dental chairs and other surfaces in sequential manner like least dirty items and surfaces first then more contaminated surfaces (dusting first then cleaning of floor)
7. Proper disposal of biomedical waste according to protocol and follow segregation at origin only.
8. Fumigation / fogging of dental clinics atleast once in a week with fogging solution for half an hour period after the clinics is closed for the day.  
Fogging and needle stick injury and sterilization record register to be maintained in all departments and cross checked and signed by HOD every month.

  
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## Patient safety measures

While doing dental procedures patient safety is also very important

1. Prevention of transmission of communicable diseases like hepatitis B/C/ HIV/ Covid - 19 . so follow proper PPE, sterilization and disinfection protocol.  
Always and always use disposable needles
2. Radiation errors-to be prevented like overexposure of radiations. Proper diagnosis before taking X-ray . use lead apron and thyroid collar
3. Diagnostic errors like wrong side tooth treatment to be prevented by proper diagnosis , proper record maintenance and treatment planning.,
4. Sanitizers placed at reception areas for prevention of infections.
5. Fire exit plan

## Needle stick injury record register

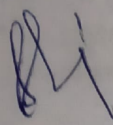
Name of department

Month

Mention date , time of injury , name of doctor / health care worker and patient name

Stamp and sign of  
HOD at month end.

Needle stick injury record of all deptt. To be maintained in principal office also on monthly basis.

  
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## Fogging record register

Name of deptt.

Month

Sr.no.	Date	Area specified UG/PG	Duration (timing)	Sign (incharge)	Sign (staff)

Stamp and sign of  
HOD at month end.

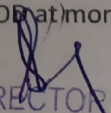
## Sterilization record register

Name of department

Month

Date	Sterilization tape	Sign (incharge)	Sign (staff)

Stamp and sign of  
HOD at month end.

  
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Infection control procedures in dental operatory – check list

Department name-

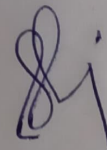
Month

Name of disinfectant

Date	Dental chair	Chair light	Provider stool	Floor /walls	Other dental equipment	Furniture	Autoclave	Suction/waterline /spittoon	Signature
1									
2									
3									

Remarks – monthly basis

HOD – sign and date



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**Step-1**



Rub palms together

**Step-2**



Rub the back  
of both hands

**Step-3**



Interlock fingers  
and rub the  
hands together.

**Step-4**



Interlock fingers and  
rub the back of fingers  
of both hands

**Step-5**



Rub thumb in a rotating manner  
followed by the area between  
index finger & thumb.

**Step-6**



Rub fingertips  
on palm for both hands

**Step-7**



Rub both wrists in  
a rotating manner  
rinse and dry thoroughly.

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# Hand Washing Technique

WITH SOAP AND WATER



Wet your hands with water



Apply soap



Rub palm to palm



Rub palm to palm with fingers interlaced



Rub back of each hand with the palm of the other



Rub each thumb using a rotational movement



Circularly rub the tips of your fingers in each palm



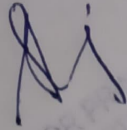
Rub each wrist with your other hand



Rinse both hands well with water



Dry your hands thoroughly with a towel

  
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## Protocol for needle stick injury

- After needle stick or injury from sharp instruments
  - immediately remove from gloves
  - Wash hand in running water with soap or hand wash
  - Do not press or pinch the injured area
  - Inform deptt. Authority
  - Now there are two conditions of patients
  - First known case of HIV / HEPatitis B/C
  - Second Not a known case of HIV / HEPatitis B/C
  - Check serology of both doctor and patient for all 3.
- 
- After post exposure of known case of HIV / HEPatitis B/C/ unknown = follow up the serology of staff for 3 months, 6 months and 12 months . Monitor follow-up and keep documents .

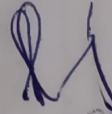


### Steps

- 1. If patient known case of HEPatitis B or serology positive for hep. B . Check vaccination status of injured person  
if vaccinated check HBSAg titre .  
if not vaccinated provide hepatitis vaccine immediately  
if patient is + case check HBSAg titre  
if Hbs Ag titre value < 10 provide immunoglobulin within 24 hours

2. If patient known case of HIV +ve – consult concerned physician and start antiretroviral therapy (ART) as soon as possible

3. If patient is HCV positive provide immunoglobulin with 24 hrs. consult concerned physician

  
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# Healthcare Fire Safety

There are **four** essential steps to take if you discover a fire:

## R



**Rescue**  
anyone in immediate  
danger of the fire.

## A



**Alarm**  
Activate the nearest fire  
alarm **and** call  
your fire response  
telephone number.

## C



**Contain**  
fire by closing all  
doors in the fire area.

## E



**Extinguish**  
small fires. If the fire  
cannot be extinguished,  
leave the area and  
close the door.

**You should know:**

- Locations of nearest fire extinguishers and alarm pull boxes
- The fire location - room number and building
- All fire exits in your work area

## How to properly operate a Fire Extinguisher

## P



**Pull**  
the pin, release a  
lock latch or press a  
puncture lever.

## A



**Aim**  
the extinguisher at the  
base of the fire.

## S



**Squeeze**  
the handle of the fire  
extinguisher.

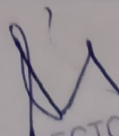
## S



**Sweep**  
from side-to-side at the  
base of the flame.

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# IN CASE OF FIRE



**1 REMOVE PATIENT(S) IN IMMEDIATE DANGER**

**2 REPORT FIRE & LOCATION**

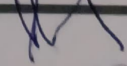
**3 CLOSE ALL DOORS AND WINDOWS TO ISOLATE FIRE**

**4 EXTINGUISH FIRE**

 **SSI DEVELOPMENT SOCIETY**  
Phone: 26242038



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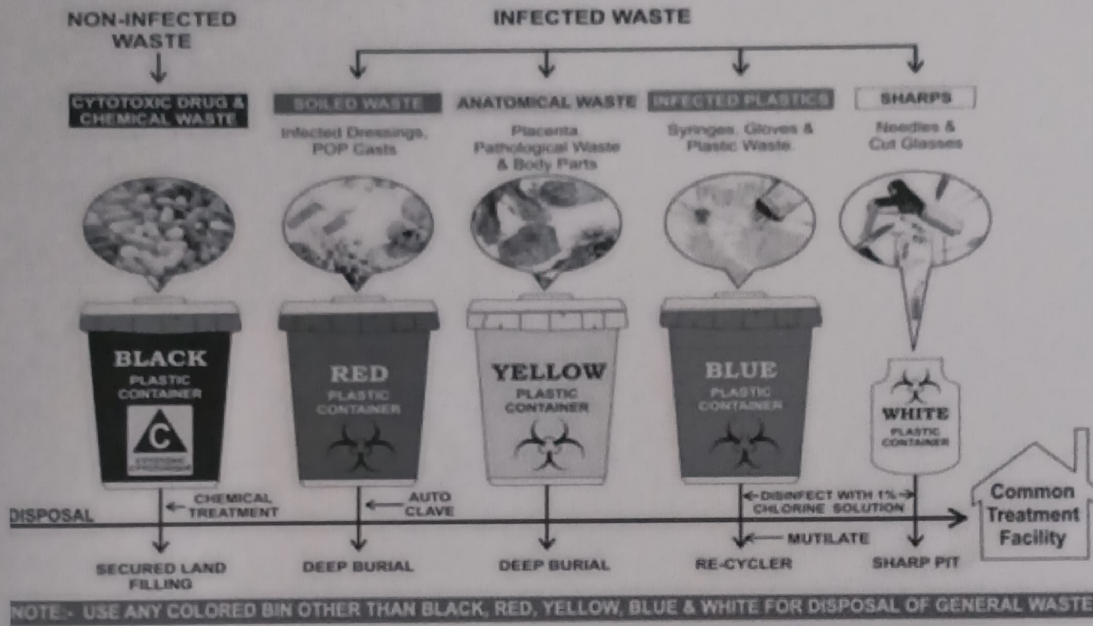


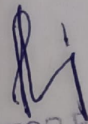
## BIO-MEDICAL WASTE SEGREGATION CHART

Category	Type of Waste
<b>YELLOW</b>  	<ul style="list-style-type: none"><li>• Pathological Waste</li><li>• Cotton Waste</li><li>• Dressing Materials</li><li>• Beddings</li><li>• Body Fluid Contaminated Paper and Cloth</li><li>• Face Mask, Cap</li><li>• Cytotoxic, Expired &amp; Discarded Medicines</li><li>• Microbiology, Biotechnology Lab Waste</li></ul>
<b>RED</b>  	<ul style="list-style-type: none"><li>• Syringe with out needles</li><li>• I.V. Set</li><li>• Catheters</li><li>• Gloves</li><li>• Urine Bag</li><li>• Dialysis Kit</li><li>• IV Bottles</li><li>• Plastic wastes</li><li>• Goggles</li></ul>
<b>WHITE (Translucent)</b>  	<ul style="list-style-type: none"><li>• Needles</li><li>• Syringes with fixed needles</li><li>• Blades</li><li>• Scalpels</li></ul> <p>* Use 1% Hypochlorite Solution for disinfecting Glass &amp; Metal Sharps</p>
<b>BLUE</b>  	<ul style="list-style-type: none"><li>• Glass<ul style="list-style-type: none"><li>- Broken Glass</li><li>- Ampoules</li><li>- Lab Slides</li></ul></li><li>• Metals<ul style="list-style-type: none"><li>- Nails</li><li>- Metallic Body Implants</li><li>- Scissors</li></ul></li></ul> <p>* Use 1% Hypochlorite Solution for disinfecting Glass &amp; Metal Sharps</p>

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## SEGREGATION OF SOLID BIO-MEDICAL WASTE



  
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