

Good Samaritan Health & Wellness Center
Policies and Procedures

Subject: Occupational Safety and Health	Policy # 7.6
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7.6 Occupational Safety and Health

POLICY:

Good Samaritan Health & Wellness Center Dental Clinic's policy is to establish standards and set forth responsibilities relative to occupational health and safety within the work environment of the dental clinic. It is applicable to all dental staff.

RESPONSIBILITIES:

- The Dental Director is responsible for providing professional guidance and to develop and maintain an Occupational Health and Safety program current with applicable Occupational Safety and Health Administration (OSHA) guidelines.
- Establish a written hazard communications (HAZCOM) program.
- Supervise the activities of the Dental Department's OSHA program and ensure briefings, inspections, surveys and documentation requirements are performed as required and that appropriate follow up action is taken when required.
- Ensures all personnel receive the HAZCOM program training.

- Monitors day-to-day operations of the OSHA program, ensures discrepancies are identified and corrective action is initiated as required.

I PROCEDURES—Mercury Vapor:

- Mercury Vapor – The vapor given off by mercury is toxic. Mercury must be used in a safe and hygienic way. The following instructions help keep occupational exposure to this agent to a minimum among personnel involved in its use.
- Pre-capsulated amalgam will be the material of choice at Good Samaritan Health & Wellness Center. This will insure minimum possibility of a mercury spill. If capsule is opened and a mercury spill occurs, contact the Dental Director immediately and prepare to contain and clean up the spill.
- Reassemble the capsules immediately (when possible) after removing the freshly triturated amalgam mass.
- Skin contact with mercury of freshly mixed amalgam is to be avoided.
- Do not heat dental amalgam or mercury as hazardous vapors may result. Careful milling with the high-speed hand piece and air/water spray may unclog the amalgam carrier.
- In the event of a mercury spill, immediately evacuate and close off the immediate area and notify the Dental Director.
- All personnel will be briefed annually on the potential hazards of mercury.
- Dental staff will collect amalgam scrap and turn it into the dental supply area.

- Avoid spreading scrap amalgam into the bracket tray or patient towel while carving new restorations. If this occurs, try to discard as much as possible into the suction to avoid accumulation of particles on the floor and in chair seams.
- Any droplets or scrap retained in the tray should be discarded into the central suction.
- If scrap amalgam is retrieved from suction traps it should be disinfected prior to putting it into the scrap amalgam holding bottle.

II PROCEDURE—Ionizing Radiation

Every effort must be made to minimize patient and personnel exposure to ionizing radiation under ALARA Program (As Low As Reasonably Achievable). All guidelines for safety procedures in dental radiology will be followed.

RESPONSIBILITIES:

- All patients will be protected from ionizing radiation by use of a lead protective apron.
- Lead patient protective aprons will be inspected monthly by the dental staff member in charge of dental supply ordering. Any lead apron, determined by any staff member, showing signs of holes, cracking or in a tattered condition will be replaced.

III PROCEDURE—Injury By Projectile

Patients and personnel can be injured by projectiles or debris by cutting, scaling, polishing or irrigating procedures. Aspiration of broken instrument tips or projectiles by patients is also a possible hazard.

RESPONSIBILITIES:

- Staff and patients will wear protective eyewear when accomplishing any procedure with the exception of routine examinations and radiograph exposure.
- Protective eyewear will be worn by all dental staff operating any equipment during grinding and polishing procedures.
- Dental Staff members must familiarize themselves with the location of the emergency eyewash station.

IV PROCEDURE: VISIBLE LIGHT

With the advent of composite restorations, polymerization through the use of visible light has become routine. Protective lenses are available for technicians and operators.

Light Requirements—Dental facility lighting specifications should be followed to decrease visual problems such as eye fatigue or headaches.

Burned out fluorescent/light bulbs should be replaced immediately; notify maintenance staff for replacement.

Defective light/fixtures should be reported immediately to the maintenance staff.

V PROCEDURE: NOISE HAZARDS

High speed hand pieces and ultrasonic scalers are the most threatening causes of hearing loss to dental personnel. Hearing loss is directly

related to the noise intensity, duration of exposure, and the sensitivity of the individual. Because these noise hazards are normally of limited duration they usually do not pose a hearing hazard. Careful attention to hand piece maintenance will insure proper operation and reduce noise hazard.

RESPONSIBILITY: ELIMINATION OF HAZARDS

Many patients or personnel may be sensitive or allergic to materials used in dental facilities such as dust, disinfectants, sterilizer solutions, solvents, acrylic resins, impression materials, waxes, investment materials, etc.

- Prior to use of any dental material read the label on container and adhere to manufacturer's instructions for proper use, storage, clean up and disposal.
- Insure adequate ventilation, filtration, and air cleaning where indicated by material use.
- Use masks, shields, rubber gloves, aprons, and eyewear as recommended by manufacturer's guidelines.

VI PROCEDURE: CARCINOGENIC SUBSTANCES

Certain dental materials have been identified as potential carcinogens; substances under this category include asbestos, beryllium dust and certain hydrocarbons.

RESPONSIBILITIES:

- Use asbestos substitutes.
- Use an evacuation system when grinding on metals.

- To eliminate trauma or microbial contamination of the eyes, always use safety glasses or goggles when operating a lathe.

VII PROCEDURE: NEEDLESTICK PROTOCOL

Handle needles, blades, and other sharp instruments carefully. Any accidental puncture or cut with a contaminated instrument or needle should be thoroughly washed with disinfectant soap immediately. An Incident Statement will be completed and the Dental Director notified. He will advise as to the treatment protocol. New coming personnel will be briefed during the initial orientation briefings concerning this procedure and all other staff members will be briefed on an annual basis.