Clinical Contact Surfaces: surfaces that may be touched frequently with gloved hands during patient care or that may become contaminated with blood or other potentially infectious material and subsequently contact instruments, devices, hands, or gloves.

Examples: Light handles, switches, dental radiography equipment, chairside computers, reusable containers of dental materials, drawer handles, faucet handles, countertops, pens/pencils, telephone handle

When cleaning and disinfecting surfaces in patient-care areas consider the:
- potential for direct patient contact;
- degree and frequency of hand contact; and
- potential contamination of the surface with body substances or environmental sources of microorganisms (e.g., soil, dust, or water).

Barriers vs. Cleaning & Disinfection

✓ Usually a combination of barriers and cleaning & disinfection is used to effectively manage surfaces in the operatory.

Barriers
Using barriers to protect surfaces and equipment is useful, especially if the surfaces are
- touched frequently by gloved hands during patient care,
- likely to become contaminated with blood or OPIM, or
- difficult to clean (e.g., chair control panels, air/water syringe buttons, light handles).

✓ Remove and discard barriers between patients, while wearing gloves.
✓ Place clean barriers on surfaces before the next patient.
✓ It is not necessary to clean and disinfect a properly covered surface between patients unless the barrier fails or the surface became accidentally contaminated during barrier removal.

Cleaning & Disinfecting
✓ Use appropriate personal protective equipment (PPE).

Reminder: Chemical- and puncture-resistant utility gloves offer more protection than patient examination gloves when using hazardous chemicals.

✓ Clean the surface(s).

Reminder: If a surface is not cleaned first, the success of the disinfection process can be compromised because blood or debris can shield underlying microorganisms from the disinfecting agent. When a surface cannot be cleaned adequately, it should be protected with barriers.

✓ Disinfect the cleaned surface(s).

Reminder: If barriers are not used, surfaces must be cleaned and disinfected between patients by using an EPA-registered hospital disinfectant with a tuberculocidal claim (i.e., intermediate-level disinfectant).

Abbreviations: EPA=Environmental Protection Agency; OPIM=Other Potentially Infectious Material

If you want more info
• CDC Guidelines for Infection Control in Dental Health-Care Settings (www.cdc.gov/oralhealth).