

INFECTION CONTROL SNAPSHOT

PPE: Back to the Basics



Personal protective equipment, or PPE, is designed to protect the skin and the mucous membranes of the eyes, nose, and mouth of DHCP from exposure to blood or OPIM. Use of PPE is dictated by the exposure risk posed by the procedure, not by the known or suspected serologic status of the patient. The type of PPE used will vary based upon the dental procedure. Wearing PPE in specified circumstances to reduce the risk of exposures to bloodborne pathogens is mandated by the OSHA.

Examples

- gloves
- protective eyewear (e.g., glasses with side shields, face shields)
- shoe covers
- surgical masks
- protective clothing (e.g., long-sleeved gowns, jackets)
- head covers

Masks and Protective Eyewear

- Wear a surgical mask and eye protection with solid side shields (e.g., glasses, face shield) during procedures likely to generate splashing or spattering of blood or other body fluids.
 - Change masks between patients or during patient treatment if the mask becomes wet.
 - When wearing a face shield, wear a mask, too.

Protective Clothing

- Wear protective clothing (e.g., long-sleeved reusable or disposable gown, clinic jacket, laboratory coat) that covers clothing and skin (e.g., forearms) likely to be soiled with blood, saliva, or OPIM.
- Procedures likely to result in spattering of blood or OPIM that require long-sleeved protective clothing include, but are not limited to: the use of high- or low-speed handpieces or sonic or ultrasonic scalers; manipulation with sharp cutting instruments during periodontal and prophylaxis treatments; spraying water and air into a patient's mouth; oral surgical procedures; and manual instrument cleaning.
 - Change protective clothing if visibly soiled; change immediately or as soon as feasible if penetrated by blood or other potentially infectious fluids.



Gloves

- Wear new gloves for each patient when a potential exists for contacting blood, saliva, OPIM, or mucous membranes.
 - Remove gloves that are torn, cut, or punctured as soon as feasible and wash hands before regloving.
 - Do not wash medical gloves before use or wash, disinfect, or sterilize gloves for reuse.

Head and Shoe Covers—optional, but consider using....

- head covers when exposure to blood and OPIM in the form of droplet, spray, and spatter are anticipated. Situations that meet these criteria include, but are not limited to, the following: sonic or ultrasonic scaling; surgical procedures using rotary or ultrasonic instrumentation; and manual decontamination of dental instruments where spray and spatter may be generated.
- shoe covers when contamination of footwear is anticipated (e.g., surgical procedures where unusually heavy bleeding).



Abbreviations: DHCP=dental health-care personnel; OPIM=other potentially infectious materials; OSHA=Occupational Safety & Health Administration

Just a few things to think about

- What types of PPE do you have available in your clinic?
- Do you always wear a mask when using a face shield?
- Do you change your mask between patients?
- Do you always change your gloves if you notice they are torn or cut?

If you want more info

- CDC Guidelines for Infection Control in Dental Health-Care Settings (www.cdc.gov/oralhealth).
- InControl Fact Sheet: Using Personal Protective Equipment: http://airforcemedicine.afms.mil/idc/groups/public/documents/afms/ctb_109777.pdf.
- OSHA Bloodborne Pathogen Standard: www.osha.gov.
- USAF Guidelines for Infection Control in Dentistry (<http://airforcemedicine.afms.mil/decs>).

