

OSHA

Dental Office Compliance With OSHA Regulations

September 2009

As in many health care workplaces, OSHA safety regulations for dental offices are detailed and designed to protect the health and safety of both employees and patients. Enforcement of violations in general under OSHA has been more stringent under the Obama administration than previously, and more funding is available for OSHA inspections and the mechanisms for making sure OSHA regulations are being followed.

The most often cited violation of OSHA by dental offices has to do with blood borne pathogens, or microorganisms in blood that can transmit infectious disease in humans. Compliance with the OSHA statute requires a written exposure control plan which must be reviewed and updated annually that includes information on use of precautions such as hand washing, the prohibition of food and drink in areas where blood or other bodily fluids are handled, the proper use and sterilization of needles and sharp dental tools (“sharps”), the proper utilization of personal protective equipment such as gloves, face and eye protection and gowns, the processing of regulated waste properly through sharps disposal containers and other waste containers, and the use of proper procedures for cleaning contaminated laundry. There must be detailed policies regarding the protective clothing and equipment. Gloves must be worn whenever there is a possibility of contact with contaminated areas, and disposable gloves must never be reused. Utility gloves may be decontaminated as long as there is no evidence that any protection provided by them has been compromised by punctures or tears or in any other way that contamination could exist with their use. The wearing of appropriate eye and face protection is important, and rules must be in place that make the possibility of splashing or spraying of blood or other contaminated liquids minimal. The limitation of the spread of infectious blood borne diseases such as HIV and hepatitis B has been more effective in recent years, and since 1992 there have been no incidents of the transfer of HIV from a dentist or dental office employee to a patient, and since 1987 there has not been a case of the transmission of hepatitis B from patient to dental care provider.

Training of all employees in these procedures is an essential part of the written exposure plan. A variety of programs have been set up by various private companies for training employees to be knowledgeable about these regulations, and OSHA consultants are available from the government as well. It is important that employees be well informed of regulations and that the implementation of them is easily managed, for the chances of disgruntled employees complaining to OSHA about violations that are overlooked during inspections is something to be avoided in dealing with employee relations.

A written hazard communication program must be stated which informs employees which hazardous materials are evident in the workplace and copies of the Material Safety Data Sheets (MSDSs) on each of those chemicals must be shown to employees. An emphasis on exposure to the chemicals beryllium and silica became apparent during the Bush administration.

In the case of offices which have x-ray machines there must be information about the presence of radiation present in the workplace from those machines. There must be restricted areas for

employees which is intended to limit exposure to radiation, personal radiation monitors such as film badges or pocket dosimeters must be worn, and caution signs must be set out in appropriate areas that the use of radiation may be present from the use of x-rays.

Keeping patients aware of the rigid compliance with OSHA requirements by the dental office is important, for word can travel fast and have a lasting and devastating effect on a practice if violations are made known to any patients. Thus, going beyond just compliance with government regulations is a good business aspect of the practice. The necessity of the prominent display of the required OSHA poster so that the public is aware of the office compliance is a good idea. Dental offices are often a target of OSHA officials because of the contact with bodily fluids such as blood and saliva, and so a well run program of ensuring compliance is essential.

Federal Regulations for Hazardous Materials

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Dental offices must comply with specific federal regulations under OSHA for hazardous materials such as chemicals associated with the practice of dentistry. Those regulations require that all employees have access to Material Data Safety Sheets for particular chemicals. Also a written hazard communication program must be in place which informs the employees of the possibility that particular chemicals may be hazardous if not handled correctly in working within a dental office.

OSHA penalties for non compliance, in case an inspection occurs which does not reveal compliance or when complaints are made about particular incidents, can be significant. Fines recently levied have been ranged anywhere from \$1,100 to \$7,000 per day per employee to \$76,500 in one case. Hazardous materials compliance is just one of the many regulations for OSHA that dentists must be aware of in making sure they will not be in danger of receiving these fines. After that \$76,500 incident, which occurred in a New Hampshire dental office, the ADA and OSHA announced on September 26, 2008 that they had renewed an alliance to focus on the development and dissemination of information and resources to promote health and safety in the dental practice work environment.

There are plans and guidelines available for dentists to use in complying with hazardous materials requirements. In fact in the section of the OSHA code dealing directly with hazardous materials, 29 CFR 1910.1200 lays out specific advisory guidelines for following and maintaining an appropriate MSDS procedure. Here are what those communication standards are:

1. Designation of person(s) responsible for obtaining and maintaining the MSDSs;
2. How such sheets are to be maintained in the workplace (e.g. in notebooks in the work area(s) or in a computer with terminal access), and how employees can obtain access to them when they are in their work area during the work shift;
3. Procedures to follow when the MSDS is not received at the time of the first shipment;
4. For producers, procedures to update the MSDS when new and significant health information is found;
5. Description of alternatives to datasheets in the workplace, if used.

It is important that MSDSs be obtained for particular chemicals used in dental offices, including alcohol, disinfectants, anesthetic agents, sterilants, and mercury. The dental products that can contain particular chemicals that must have MSDSs include, for example: air polishing power, ammonia inhalant, prophylaxis paste, etching gel, bonding prep, cavity liner, disclosing solution, 2-tone or trace disclosing solution, lubricants, surgical milk, aerosols, and stannous fluoride. Each manufacturer must make a copy of the MSDS for products with chemicals which meet the definition of a hazardous material.

Proper labeling of hazardous materials is an important OSHA requirement that dental offices should be particularly aware of. The federal regulations under 29 CFR 1910.1200 has specific guidelines

attached to the regulations themselves that detail what a compliance officer will be looking for as far as fulfilling labeling requirements:

1. Designation of person(s) responsible for ensuring labeling of in-office containers;
2. Designation of person(s) responsible for labeling of any shipped containers;
3. Description of labeling system(s) used ;
4. Description of written alternatives to labeling office containers; and
5. Procedures to review and update label information when necessary.

Finally, training program requirements need to be included in a written hazardous materials plan, including:

1. Designation of person(s) responsible for conducting training;
2. Format of the program to be used (audiovisuals, classroom instruction, etc.);
3. Elements of the training program; and
4. Procedure to train new employees about hazardous chemicals and training about new chemicals that are introduced.

OSHA Training for Dental Office Staffs

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Dental offices, like most health care providers, have to meet annual training requirements set up by the very detailed federal safety standards set up by the Occupational Safety and Health Administration. The federal standards require employee training in several different areas, including communication on handling hazardous materials, sterilization and disinfection methods, exposure to blood borne pathogens, and bio medical waste disposal. There are also state laws that apply when considering the formation of a training plan. There has to be detailed record keeping that covers the details of however the office decides to train their staffs whether it is done all through an outside contractor or whether some in-house support is used. All employees must have access to the details of the regulations involved, mostly in the Code of Federal Regulations sections under OSHA and blood borne pathogens or hazardous materials communications, and the records must be kept for inspection by government officials.

The **hazard communication plan** is assisted in large part by the suppliers of chemicals used in the office which provide Material Data Safety Sheets (MSDS) showing the make up of the substances, the toxicities and possible effects on health, and various ways the substances should be handled. The MSDS Manual for each office must be made readily available to all employees and be updated whenever new substances are introduced into the practice. That Manual also sets out the labeling process for the storage and use of substances, which generally have labels in four colors: 1) White—when protective gear is to be worn, 2) Blue—health hazard present, 3) Red—flammability and 4) Yellow—reactivity with water.

All offices must have a written **exposure control plan** which deals with the proper handling of bloody waste. The OSHA regulations have a specific section devoted to blood borne pathogens, and the requirements placed on dental offices are complicated and numerous. Basically, it is essential to note that all possibilities of contact with splatters or spillage of blood must be accounted for, and all trash which has been exposed must be put aside separately from other trash in marked red bags. The exposure control plan also details who has exposure to what blood borne pathogens, to what degree and what the risks of exposure are.

A **biomedical waste plan** must be in written which sets out who the office uses for a Registered Bio Hazard Waste Handler, what written contingency plan the office has in case the contracted service provider cannot service your office and what bio hazard waste, certificates the office has.

A **sterilization and disinfection** plan must deal with all the areas and procedures in the office having to do with the storage and handling of infectious waste. There are several monitors that must be maintained on a regular basis. Spore strip tests are run in the sterilizer and then sent to a certified monitoring lab for a report for every 40 hours of use. Bio hazard waste pick-up receipts are kept in chronological order showing when the pick ups were made or when logged in if a different method of disposal is used. A log must be maintained showing when cold sterile solutions changes are made in order to meet product specification requirements for time periods within which they must be changed.

All employees must have training in the types, proper use, location, handling, decontamination and disposal of personal protective equipment such as gowns, gloves and masks. The training must include explanations of methods used to limit or protect against exposure, including engineering

controls and work practices. There must be made available information on various infectious diseases and possibilities of illness among employees or patients from various workplace practices, as well as benefits from vaccinations.

Emergency and incident reporting procedures must be part of any training program, and the importance of the availability of the details on the practice's meeting of OSHA regulations must be stressed. The annual training of employees is one of the more stringent statutory requirements imposed on dental offices and so the selection of the right system is an important one