HIVAIDS Precautions – Dental – Fact Sheet



WHAT PRECAUTIONS SHOULD I TAKE WHEN EMPLOYED IN THE DENTAL FIELD?

Consider blood, saliva and gingival fluid from all dental patients as having the potential for infection. Refer to Routine Practices for preventing transmission of bloodborne infectious diseases.

Use rubber dams in restorative dentistry whenever possible.

Report immediately suspect fluid exposure, or a needlestick or sharp injury to a designated person or health care professional.

WHAT PERSONAL PROTECTION SHOULD I USE?

Wear gloves:

- If you have open or healing wounds, or skin infections.
- When in contact with saliva, mucous membranes, or blood.
- When in contact with blood-soiled items, body fluids or surfaces contaminated by them.
- When examining all oral lesions.

Replace torn or punctured gloves immediately.

Use new gloves for every patient.

Wear gowns when blood or body fluids are likely to soil clothing.

Change gowns daily or when visibly soiled with blood or body fluids.

Wear masks, face/eye protection or chin-length plastic face shields (with safety glasses or goggles) to protect your mouth and nose (oral and nasal mucosa) from the splatter of blood, saliva or gingival fluid.

Wash hands:

- Between patients.
- After completing a procedure and before leaving work area.

- Before and immediately after removing gloves.

WHEN SHOULD I DISPOSE, DECONTAMINATE, OR STERILIZE INSTRUMENTS AND EQUIPMENT?

- Use disposable materials. Dispose in plastic bags.
- Place needles and sharp instruments in puncture-resistant containers before disposal.
- Check with local municipality for disposal of contaminated waste.
- Routinely sterilize instruments used in all dental procedures.
- Store in sterile packs or pouches.
- Sterilize after each use any other dental instruments that come in contact with oral tissues such as amalgam condensers, plastic instruments of handpieces and burs. High-level disinfect if sterilization is not possible.
- Cover equipment and surfaces that may become contaminated and are not easy to clean with impervious-backed paper, tin foil or clear plastic wrap. Remove and replace the covering for each patient.
- Thoroughly clean blood and saliva from supplies used in mouth (impression material, bite registration). Clean and disinfect.

HOW SHOULD I DECONTAMINATE OF ENVIRONMENTAL SURFACES?

- Use absorbent paper towelling to remove blood or saliva.
- Use a medical grade disinfectant to disinfect all potentially contaminated objects and surfaces.
- Follow safe work procedures as stated in the safety data sheets (SDSs) for handling and disposal.

WHAT IF THERE IS AN ACTUAL OR SUSPECTED EXPOSURE TO HIV?

The decision to begin a post-exposure prophylaxis (PEP) for HIV infection is based on the judgment of a health care professional and should be a joint decision with the exposed worker. PEP often involves taking a combination of 2 or 3 antiretroviral drugs for about 4 weeks. PEP can help reduce, but not eliminate, a person’s risk of infection. The PEP should begin as soon as possible, as it may be less effective if started more than 72 hours after exposure.

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