

Use our FREE CROSS INFECTION Check List to Monitor YOUR Practice

Infection Control Check List	Y/N	Action to be taken
1		Is a Medical History obtained from all patients?
2		Is a Cross Infection Statement displayed?
3		Is there a Patient Confidentiality Policy in place?
4		Is there an Exposure-prone procedure in place?
5		Is the staff trained in Infection Control procedures?
6		Is the Surgery well designed clean and dirty areas designated?
7		Does the surgery have good ventilation?
8		If not what changes can be made?
9		Is the Floor covering adequate?
10		If not describe what changes are required?
11		Work surfaces – Was there any damage to the surfaces and edges?
12		If so describe the action to be taken?
13		Choice of Equipment – Is the equipment fit for the purpose?
A		What equipment is not suitable?
B		Is all equipment CE marked?
C		Can it be easily be decontaminated?
D		Is there any damage to the chair coverings?
C		Are all chair controls foot operated?
E		If not what control measures can be put in place?
14		Water Supplies – Do all water lines have an ANTI-RETRACTION valve fitted?
A		Are disinfectants introduced into the bottle water tubing to reduce biofilm or within the water supply to reduce microbial load?
15		Sterilisation Procedures
A		Is there a system of Pre-Sterilisation Cleaning in place?
B		Is it sufficient?
C		Are washer-disinfector's used?
D		Are Ultrasonic Cleaners used
E		Are Instruments cleaned by hand?
F		Are all instruments checked before sterilisation takes place?
G		Sterilisation Type – Vacuum / Steam?

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H		Records – Are they kept correctly?
I		Are TST strips used?
J		Are print-out records retained?
16		Storage of Instruments
A		Are the sterilised instruments stored with lids on the trays?
B		Are the instruments stored in a dry condition?
17		Single use Instruments
A		Are these used in this Practice?
18		Surface Cleaning and Disinfection
A		Was the standard of cleaning and disinfection sufficient?
19		Impressions and Orthodontic Appliances
A		Are impressions washed firstly under the tap?
B		Are the impressions disinfected after cleaning?
C		Are the impressions sprayed with disinfectant or dipped?
D		Is confirmation INCLUDED that disinfection has taken place when sent to the Lab?
20		Disposal of Clinical Waste
A		Is waste segregated into Clinical and non-clinical?
B		Were the clinical waste bags no more than ¾ full, Tied and not knotted and labelled?
C		Were the Sharps boxes of the correct standard?
D		Was the clinical waste stored securely in a locked bin or room?
E		Were the waste notices / company details checked and recorded?
F		Were the Developer and fixer if used, considered as hazardous waste?
G		Were the Clinical waste bins suitable in each surgery? (foot operated)
21		Waste Amalgam
A		Was each surgery fitted with an Amalgam Separator?
B		Is the waste collected under contract?
21		Blood Spillages
A		Having had their procedure explained, was this correct?

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22	Biopsy Specimens sent in the Post		
A	Having discussed their procedure, with them, was this correct?		
23	Personal Protection		
A	Immunisation – Hep B Are all staff immunised against Hep B?		
B	Are records maintained by the practice?		
24	Hand Protection		
A	Were disposable gloves worn by all clinical staff within the surgeries?		
B	Are Rings, Jewellery and Watches removed (fob watches included)?		
C	Was the system of hand washing sufficient?		
D	Has consideration been given to Latex allergies? (Patients and staff)		
25	Eye Protection and Face Masks		
A	Were all operative staff wearing the CORRECT Eye Protection?		
B	If not who (name) and what was worn if any?		
C	Were the patient provided with Eye Protection?		
D	Were the patients requested to wear eye protection?		
E	Were the patient glasses tinted?		
F	Were the glasses cleaned after each patient?		
G	Did the Dentist wear a face mask?		
H	Did the Nurse wear a face mask?		
I	Was the mask changed between patients?		
J	Was it pulled down and reused during your visit?		
26	Surgery Clothing		
A	Did the Dentist wear protective clothing?		
B	Did the Dentist wear protective clothing?		
C	Did any of the protective clothing worn have long sleeves?		
D	Was any of the Dentists or Nurses clothing exposed below the sleeves of the protective clothing?		
27	Hot Water Available within the surgeries and Taps		
A	Was there Hot running water available within each surgery?		

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B	Were the taps suitable for use in each surgery?		
28	Aerosol & Saliva / Blood Splatter		
A	Were the aspirators and Tubing cleaned and disinfected or changed after each patient?		
B	Is the use of a Rubber Dam available for use?		
29	Needle Stick Injuries		
A	Was the procedure known with respect to what to do if a Needle Stick Injury were occur?		
B	Were contact details available of the local Communicable Disease Control consultant or the Medical Microbiologist available for advice on post exposure prophylaxis?		