

**S B PATIL INSTITUTE FOR DENTAL  
SCIENCE AND RESEARCH BIDAR.**

**1. CENTRAL STERILE SUPPLIES  
DEPARTMENT REGISTRE MAINTAINED  
2022-2023**

  
**PRINCIPAL**  
**S.B. Patil Institute for  
Dental Science & Research  
NAUBAD, BIDAR-585402  
(Karnataka)**

May

S.No	Date	Autoclave morning	Timing afternoon	Staff Signature
18	24/5/2022	✓	✓	✓
19	25/5/2022	✓	✓	✓
20	26/5/2022	✓	✓	✓
21	27/5/2022	✓	✓	✓
22	28/5/2022	✓	✓	✓
23	29/5/2022	✓	✓	✓
24	31/5/2022	✓	✓	✓

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 (Karnataka)

June 2022

S.No	Date	Autoclave morning	Timing afternoon	Staff Signature
1	1/6/2022	✓	✓	✓
2	2/6/2022	✓	✓	✓
3	3/6/2022	✓	✓	✓
4	4/6/2022	✓	✓	✓
5	6/6/2022	✓	✓	✓
6	7/6/2022	✓	✓	✓
7	8/6/2022	✓	✓	✓
8	9/6/2022	✓	✓	✓
9	10/6/2022	✓	✓	✓
10	11/6/2022	✓	✓	✓
11	13/6/2022	✓	✓	✓
12	14/6/2022	✓	✓	✓
13	15/6/2022	✓	✓	✓
14	16/6/2022	✓	✓	✓
15	17/6/2022	✓	✓	✓
16	18/6/2022	✓	✓	✓
17	20/6/2022	✓	✓	✓

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June - 2022

S.No	Date	Autoclave morning 9:30 - 10 AM	Timing afternoon 1:30 - 2 PM	Staff Signature
18	21/6/2022	✓	✓	<del>Signature</del>
19	22/6/2022	✓	✓	<del>Signature</del>
20	23/6/2022	✓	✓	<del>Signature</del>
21	24/6/2022	✓	✓	<del>Signature</del>
22	25/6/2022	✓	✓	<del>Signature</del>
23	27/6/2022	✓	✓	<del>Signature</del>
24	28/6/2022	✓	✓	<del>Signature</del>
25	29/6/2022	✓	✓	<del>Signature</del>
26	30/6/2022	✓	✓	<del>Signature</del>

Hemantha  
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July - 2022

S.No	Date	Autoclave morning 9:30 - 10 AM	Timing afternoon 1:30 - 2 PM	Staff Signature
1	1/7/22	✓	✓	<del>Signature</del>
2	2/7/22	✓	✓	<del>Signature</del>
3	4/7/22	✓	✓	<del>Signature</del>
4	5/7/22	✓	✓	<del>Signature</del>
5	6/7/22	✓		<u>Legal</u>
6	7/7/22	✓	✓	<u>Legal</u>
7	8/7/22	✓	✓	<u>Legal</u>
8	9/7/22	✓	✓	<u>Legal</u>
9	11/7/22	✓	✓	<u>Legal</u>
10	12/7/22	✓	✓	<u>Legal</u>
11	13/7/22	✓	✓	<u>Legal</u>
12	14/7/22	✓	✓	<u>Legal</u>
13	15/7/22	✓	✓	<u>Legal</u>
14	16/7/22	✓	✓	<del>Signature</del>
15	18/7/22	✓	✓	<del>Signature</del>
16	19/7/22	✓	✓	<del>Signature</del>
17	20/7/22	✓	✓	<del>Signature</del>

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August-2022

S.No	Date	Autoclave morning 9:30 - 10AM	Timing afternoon 1:30 - 2PM	Staff Signature
18	21/7/22	✓	✓	
19	22/7/22	✓	✓	
20	23/7/22	✓	✓	
21	25/7/22	✓	✓	
22	26/7/22	✓	✓	
23	27/7/22	✓	✓	
24	28/7/22	✓	✓	
25	29/7/22	✓	✓	
26	30/7/22	✓	✓	

*H. Mahabadi*  
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S.No	Date	Autoclave morning 9:30 - 10:00 AM	Timing afternoon 1:30 - 2:00ppm	Staff Signature
01	1/8/22	✓	✓	
02	2/8/22	✓	✓	
03	3/8/22	✓	✓	
04	4/8/22	✓	✓	
05	5/8/22	✓	✓	
06	6/8/22	✓	✓	
07	8/8/22	✓	✓	
08	10/8/22	✓	✓	
09	11/8/22	✓	✓	
10	12/8/22	✓	✓	
11	13/8/22	✓	✓	
12	16/8/22	✓	✓	
13	17/8/22	✓	✓	
14	18/8/22	✓	✓	
15	19/8/22	✓	✓	
16	20/8/22	✓	✓	
17	22/8/22	✓	✓	

*H. Mahabadi*  
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195-24244

SEPTEMBER-2022

S.No	Date	Autoclave morning 9:30-10:00 AM	Timing afternoon 1:30-2:00 pm	Staff signature
18	23/8/22	✓	✓	[Signature]
19	24/8/22	✓	✓	[Signature]
20	25/8/22	✓	✓	[Signature]
21	26/8/22	✓	✓	[Signature]
22	27/8/22	✓	✓	[Signature]
23	29/8/22	✓	✓	[Signature]
24	30/8/22	✓	✓	[Signature]

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S.No	Date	Autoclave morning 9:30-10:00 AM	Timing afternoon 1:30-2:00 pm	Staff signature
1	1/9/22	✓	✓	[Signature]
2	2/9/22	✓	✓	[Signature]
3	3/9/22	✓	✓	[Signature]
4	5/9/22	✓	✓	[Signature]
5	6/9/22	✓	✓	[Signature]
6	7/9/22	✓	✓	[Signature]
7	8/9/22	✓	✓	[Signature]
8	9/9/22	✓	✓	[Signature]
9	10/9/22	✓	✓	[Signature]
10	12/9/22	✓	✓	[Signature]
11	13/9/22	✓	✓	[Signature]
12	14/9/22	✓	✓	[Signature]
13	15/9/22	✓	✓	[Signature]
14	16/9/22	✓	✓	[Signature]
15	17/9/22	✓	✓	[Signature]
16	19/9/22	✓	✓	[Signature]
17	20/9/22	✓	✓	[Signature]

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2022-10-01

October - 2022

S.No	Date	Autoclave morning 9:30-10:00 AM	Timing afternoon 1:30-2:00pm	Staff signature
18	21/9/22	✓	✓	Shame
19	22/9/22	✓	✓	↓
20	23/9/22	✓	✓	Shame
21	24/9/22	✓	✓	Shame
22	26/9/22	✓	✓	↓
23	27/9/22	✓	✓	↓
24	28/9/22	✓	✓	↓
25	29/9/22	✓	✓	↓
26	30/9/22	✓	✓	↓

*Smadhabe*  
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S.No	Date	Autoclave morning 9:30-10:00 AM	Timing afternoon 1:30-2:00pm	Staff signature
1	1/10/2022	✓	✓	↓
2	3/10/2022	✓	✓	↓
03	06/10/22	✓	✓	↓
04	07/10/22	✓	✓	↓
05	08/10/22	✓	✓	↓
06	10/10/22	✓	✓	↓
07	11/10/22	✓	✓	↓
08	12/10/22	✓	✓	↓
09	13/10/22	✓	✓	↓
10	14/10/22	✓	✓	↓
11	15/10/22	✓	✓	↓
12	17/10/22	✓	✓	↓
13	18/10/22	✓	✓	↓
14	19/10/22	✓	✓	↓
15	20/10/22	✓	✓	↓
16	21/10/22	✓	✓	↓
17	22/10/22	✓	✓	↓

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December-2022

S.No	Date	Autoclave morning 9:30 - 10:00am	Timing afternoon 1:30 - 2:00pm	Staff Signature
01	1/12/2022	✓	✓	✓
02	2/12/2022	✓	✓	✓
03	3/12/2022	✓	✓	✓
04	4/12/2022	✓	✓	✓
05	6/12/2022	✓	✓	✓
06	09/12/22	✓	✓	✓
07	08/12/22	✓	✓	✓
08	09/12/22	✓	✓	✓
09	10/12/22	✓	✓	✓
10	12/12/22	✓	✓	✓
11	13/12/22	✓	✓	✓
12	14/12/22	✓	✓	✓
13	15/12/22	✓	✓	✓
14	16/12/22	✓	✓	✓
15	17/12/22	✓	✓	✓
16	19/12/22	✓	✓	✓
17	20/12/22	✓	✓	✓

December-2022

S.No	Date	Autoclave morning 9:30 - 10:00am	Timing afternoon 1:30 - 2:00pm	Staff Signature
18	21/12/2022	✓	✓	✓
19	22/12/22	✓	✓	✓
20	23/12/22	✓	✓	✓
21	24/12/22	✓	✓	✓
22	25/12/22	✓	✓	✓
23	27/12/22	✓	✓	✓
24	28/12/22	✓	✓	✓
25	29/12/22	✓	✓	✓
26	30/12/22	✓	✓	✓
27	31/12/22	✓	✓	✓

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January-2023

S.No	Date	Autoclave morning 9:30-10:00AM	Timing afternoon 1:30-2:00pm	Staff Signature
01	02/01/2023	✓	✓	✓
02	03/01/2023	✓	✓	✓
03	04/01/2023	✓	✓	✓
04	05/01/2023	✓	✓	✓
05	06/01/2023	✓	✓	✓
06	07/01/2023	✓	✓	✓
07	09/01/2023	✓	✓	✓
08	10/01/2023	✓	✓	✓
09	11/01/2023	✓	✓	✓
10	12/01/2023	✓	✓	✓
11	13/01/2023	✓	✓	✓
12	14/01/2023	✓	✓	✓
13	16/01/2023	✓	✓	✓
14	17/01/2023	✓	✓	✓
15	18/01/2023	✓	✓	✓
16	19/01/2023	✓	✓	✓
17	20/01/2023	✓	✓	✓

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S.No	Date	Autoclave morning 9:30-10:00AM	Timing afternoon 1:30-2:00pm	Staff Signature
18	21/01/2023	✓	✓	✓
19	23/01/2023	✓	✓	✓
20	24/01/2023	✓	✓	✓
21	25/01/2023	✓	✓	✓
22	27/01/2023	✓	✓	✓
23	28/01/2023	✓	✓	✓
24	30/01/2023	✓	✓	✓
25	31/01/2023	✓	✓	✓

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7 March - 2023

S.No	Date	Autoclave Morning 9:30 - 10 am	Tinning Afternoon 1:30 - 2:00 pm	Stays Signature
01	1/3/2023	✓	✓	↓
02	2/3/2023	✓	✓	↓
03	3/3/2023	✓	✓	↓
04	4/3/2023	✓	✓	↓
05	6/3/2023	✓	✓	↓
06	7/3/2023	✓	✓	↓
07	9/3/2023	✓	✓	↓
08	10/3/2023	✓	✓	↓
09	11/3/2023	✓	✓	↓
10	13/3/2023	✓	✓	↓
11	14/3/2023	✓	✓	↓
12	15/3/2023	✓	✓	↓
13	16/3/2023	✓	✓	↓
14	17/3/2023	✓	✓	↓
15	18/3/2023	✓	✓	↓
16	20/3/2023	✓	✓	↓
17	21/3/2023	✓	✓	↓

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 (Kamlatika)

8 March - 2023

S.No	Date	Autoclave Morning 9:30 - 10:00 am	Tinning Afternoon 1:30 - 2:00 pm	Stays Signature
18	23/3/2023	✓	✓	↓
19	24/3/2023	✓	✓	↓
20	25/3/2023	✓	✓	↓
21	27/3/2023	✓	✓	↓
22	28/3/2023	✓	✓	↓
23	29/3/2023	✓	✓	↓
24	30/3/2023	✓	✓	↓
25	31/3/2023	✓	✓	↓
26				

H. Kamlatika  
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 (Kamlatika)

April - 2023

S.No	Date	Autoclave Morning	Timing Afternoon	Staff Signature
01	1/4/23	✓	✓	↓
02	2/4/23	Sunday		—
03	3/4/23	✓	✓	↓
04	4/4/23	Mahavir Jayanti Holiday		—
05	5/4/23	✓	✓	↓
06	6/4/23	✓	✓	↓
07	7/4/23	Good Friday Holiday.		—
08	8/4/23	✓	✓	↓
09	9/4/23	Sunday Holiday.		—
10	10/4/23	✓	✓	↓
11	11/4/23	✓	✓	↓
12	12/4/23	✓	✓	↓
13	13/4/23	✓	✓	↓
14	14/4/23	Dr. Ambedkar Jayanti Holiday.		—
15	15/4/23	✓	✓	↓
16	16/4/23	Sunday Holiday.		—
17	17/4/23	✓	✓	↓

April - 2023

S.No	Date	Autoclave Morning	Timing Afternoon	Staff Signature
18	18/4/23	✓	✓	↓
19	19/4/23	✓	✓	↓
20	20/4/23	✓	✓	↓
21	21/4/23	✓	✓	↓
22	22/4/23	Ramzan Holiday		—
23	23/4/23	Sunday - Sunday.		—
24	24/4/23	✓	✓	↓
25	25/4/23	✓	✓	↓
26	26/4/23	✓	✓	↓
27	27/4/23	✓	✓	↓
28	28/4/23	✓	✓	↓
29	29/4/23	✓	✓	↓
30	30/4/23	Sunday - Sunday.		—

*K. Prakash*  
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May - 2023

S.No	Date	Autoclave Morning 9:30 - 10:00 am	Timing Afternoon 1:30 - 2:00 pm	Staff Signature
01	1/5/23	International	Labor Day	
02	2/5/23	✓	✓	↓
03	3/5/23	✓	✓	↓
04	4/5/23	✓	✓	↓
05	5/5/23	✓	✓	↓
06	6/5/23	✓	✓	↓
07	7/5/23	Sunday	Sunday	
08	8/5/23	✓	✓	↓
09	9/5/23	✓	✓	↓
10	10/5/23			↓
11	11/5/23	✓	✓	↓
12	12/5/23	✓	✓	↓
13	13/5/23	✓	✓	↓
14	14/5/23	Sunday	Sunday	
15	15/5/23	PRINCIPAL S.B. Patil Institute for Dental Science & Research NAUBAD, BIDAR-585402 (Karnataka)	✓	↓
16	16/5/23	✓	✓	↓
17	17/5/23	✓	✓	↓

May - 2023

S.No	Date	Autoclave Morning 9:30 - 10:00 am	Timing Afternoon 1:30 - 2:00 pm	Staff Signature
18	18/5/23	✓	✓	↓
19	19/5/23	✓	✓	↓
20	20/5/23	✓	✓	↓
21	21/5/23	Sunday	Sunday	
22	22/5/23	✓	✓	↓
23	23/5/23	✓	✓	↓
24	24/5/23	✓	✓	↓
25	25/5/23	✓	✓	↓
26	26/5/23	✓	✓	↓
27	27/5/23	✓	✓	↓
28	28/5/23	Sunday	Sunday	
29	29/5/23	✓	✓	↓
30	30/5/23	✓	✓	↓
31	31/5/23	✓	✓	↓

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(Karnataka)

June-2023

S.N.	Date	Autoclave Morning 9:30 - 10:00 am	Autoclave Afternoon 1:30 - 2:00 pm	Staff Signature	S.N.	Date	Autoclave Morning 9:30 - 10:00 am	Autoclave Afternoon 1:30 - 2:00 pm	Staff Signature
01	1/6/23	✓	✓	↓	18	18/6/23	Sunday	Sunday	↓
02	2/6/23	✓	✓	↓	19	19/6/23	✓	✓	↓
03	3/6/23	✓	✓	↓	20	20/6/23	✓	✓	↓
04	4/6/23	Sunday	Sunday	↓	21	21/6/23	✓	✓	↓
05	5/6/23	✓	✓	↓	22	22/6/23	✓	✓	↓
06	6/6/23	✓	✓	↓	23	23/6/23	✓	✓	↓
07	7/6/23	✓	✓	↓	24	24/6/23	✓	✓	↓
08	8/6/23	✓	✓	↓	25	25/6/23	Sunday	Sunday	↓
09	9/6/23	✓	✓	↓	26	26/6/23	✓	✓	↓
10	10/6/23	✓	✓	↓	27	27/6/23	✓	✓	↓
11	11/6/23	Sunday	Sunday	↓	28	28/6/23	✓	✓	↓
12	12/6/23	✓	✓	↓	29	29/6/23	Holiday	Holiday	↓
13	13/6/23	✓	✓	↓	30	30/6/23	✓	✓	↓
14	14/6/23	✓	✓	↓					
15	15/6/23	✓	✓	↓					
16	16/6/23	✓	✓	↓					
17	17/6/23	✓	✓	↓					

Principal  
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(Karnataka)

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- 2. Provides Personal Protective Equipment (PPE) while working in the Clinic**



Estd.: 1991

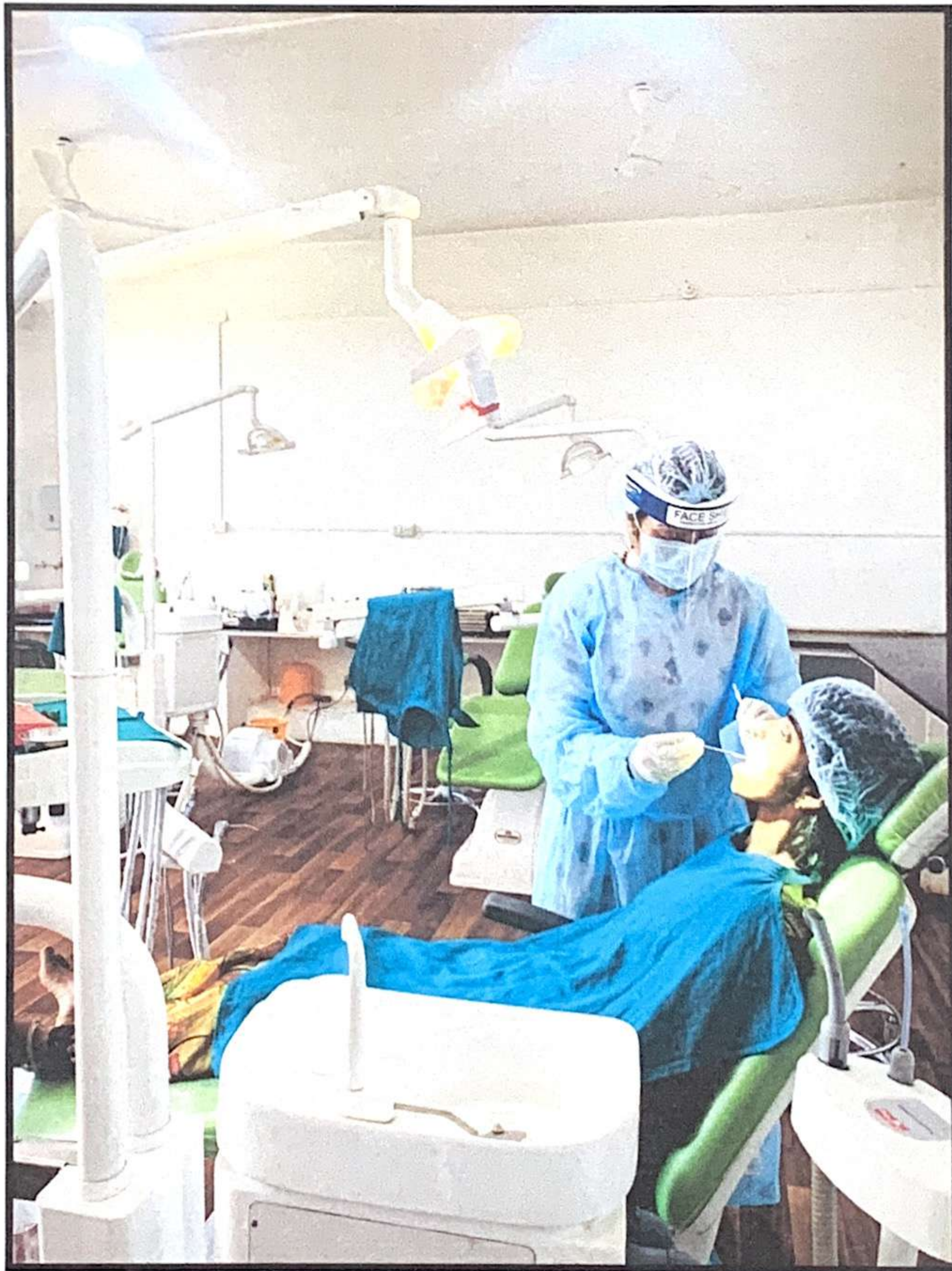
SOMANATH EDUCATIONAL TRUST'S  
**S. B. PATIL INSTITUTE FOR DENTAL SCIENCES & RESEARCH**  
**BIDAR – 585 402 (KARNATAKA)**

(Affiliated to Rajiv Gandhi University of Health Sciences & Recognised by Dental Council of India)

Email: [principalsbpdeh@yahoo.co.in](mailto:principalsbpdeh@yahoo.co.in) [www.sbpatildentalcollege.in](http://www.sbpatildentalcollege.in)

Ph.: 08482 232101-232588 Fax.: 08482-232101

## Institute Provides Personal Protective Equipment while working in the Clinic




### Dental Surgeon with PPE Kit

*Somanath Patil*  
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### 3. Patient Safety Curriculum

  
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Estd: 1991

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Ph.: 08482 232101-232588 Fax: 08482-232101

# **S. B. PATIL INSTITUTE FOR DENTAL SCIENCES & RESEARCH**

## **Patient Safety Manual (Curriculum) And Infection Control Protocols**

*Prepared for comprehensive and coordinated Infection  
Control aimed at reducing/eliminating risks of infection  
to patients, health-care providers, visitors and  
community*

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## **Protocol for Infection Control**

### **STANDARD PRECAUTIONS FOR ALL AT ALL TIMES**

### **(UNIVERSAL PRECAUTIONS)**

#### **1. Personal Protective Equipment (Barrier Techniques)**

##### **➤ Eye Protection and Face Masks:**

- ✓ Patients' eyes must always be protected against any possible injury.
- ✓ Operators and close support clinical staff must protect their eyes against foreign bodies, splatter and aerosols that may arise during operative procedures, especially during scaling (manual and ultra-sonic), the use of rotary instruments, cutting and use of wires, and during the cleaning of instruments.
- ✓ Masks and visors/goggles must be worn for all operative procedures to protect against splatter. They should be close fitting and of theatre type.
- ✓ Disposable masks/visors, if used, must be discarded after every patient, not pulled down and re-used.

##### **➤ Clothing**

- ✓ **Uniforms of choice**--scrubs are recommended
- ✓ Scrubs visibly contaminated with blood/body fluids must be changed immediately.
- ✓ Scrubs should be changed daily.
- ✓ Disposable Plastic aprons should be worn when handling all body fluids and in all aspects of direct patient care including cleaning and disinfection procedures (where aerosol is generated).
- ✓ Aprons must be changed between patients and following cleaning tasks.

##### **➤ Footwear**

- ✓ Shoes are to be flat or with low heels.
- ✓ Open toed sandals/shoes are not recommended due to the risk of injury from falling instruments or chemical spillages.

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## Removal of PPE

Depending on the type of PPE worn, items of PPE should be removed in the following order:

- ✓ Gloves should be removed first (so that the gloves end up inside-out). Make sure hands do not get contaminated when removing gloves.
- ✓ Wash hands thoroughly, if visibly contaminated, before removing the rest of the PPE.
- ✓ Plastic disposable apron -The plastic apron is removed by breaking the neck straps and carefully gathering the apron together by touching the inside of the apron only. Avoid touching the outer contaminated area.
- ✓ Face mask- Remove the mask by breaking the straps or lifting over the ears and dispose of into a clinical waste container.
- ✓ Avoid touching the outer surface of the mask and do not crush the mask before disposal.
- ✓ Masks should never be left to hang around the neck and should be disposed of immediately after use.
- ✓ Face and eye protection. Take care not to touch the outer surfaces. Single use eye protection should be disposed of into the clinical waste container.
- ✓ Wash hands thoroughly again.

## 2. Protection from Aerosol, Saliva and Blood splatter

Many infectious diseases are readily spread via aerosols e.g. TB, chickenpox and Influenza. Blood splatter can spread blood borne diseases. The risk of transmission of infection by these routes will be reduced if:

- ✓ There is good ventilation and efficient high-speed aspirators, which exhaust externally from the premises.
- ✓ Appropriate protective clothing/equipment is used.

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## **PROCEDURE FOR MANAGING SPILLS OF BLOOD AND BODY FLUIDS/SUBSTANCES**

- Basic Principles such as PPE and standard precautions apply.
- Spills should be cleared up before the area is cleaned (do not add cleaning liquids to spills as it increases the size of the spill and should be avoided)
- Generation of aerosols from spilled material should be avoided.

To cope with different types of spills, the following factors need to be considered:

1. Nature/type of spill- Sputum, Vomit, Faeces, Urine, Blood or Laboratory culture.
2. Pathogens most likely to be involved.
3. Size of the spill (spot [few drops], small [ $<10\text{cms}$ ] or large [ $>10\text{cms}$ ]).
4. Type of surface (carpet or impervious flooring)
5. Location- clinical area, laboratory, public location or within community premises.
6. Any likelihood of bare skin contact with the contaminated surface.

### **Equipment**

- Standard cleaning equipment includes mop, cleaning bucket, cleaning agents- should be readily available and stored in area known to all.
- Disposable spills kit to be used in areas where cleaning materials are not readily available.

### **Spills kit:**

- A large reusable plastic container fitted with lid containing the following items -
  - ✓ Leak proof bags and containers for disposal of waste material
  - ✓ A designated sturdy scraper and pan for spills

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- ✓ About 5 sachets of granular formulation containing 10,000 ppm available chlorine or equivalent (each sachet should contain sufficient granules to cover a 10 cm diameter spill)
- ✓ Disposable rubber gloves suitable for cleaning
- ✓ Eye protection (disposable or reusable)
- ✓ Plastic apron
- ✓ A respiratory protection device (for protection against inhalation of powder from the disinfectant granules which may be generated from high risk spills during the cleaning process).

### **Spots and small spills**

- Wipe the area immediately with paper toweling and then clean with warm water and detergent followed by rinsing and drying the area.
- Hospital grade disinfectant can be used on the spill area after cleaning.

### **Large spills**

- Large blood spills that have occurred in dry areas should be contained and generation of aerosols should be avoided.
- Granular formulations that produce high available chlorine concentrations may contain the spilled material and are useful for preventing the aerosols.
- Use scraper and pan to remove the absorbed material.
- Area should be cleaned with mop with a bucket of warm water and detergent.
- The bucket and mop should be thoroughly cleaned after use and stored dry.

## **3. Cleaning Protocols**

### **A. Zoning**

- ✓ A zoning system should be utilized - clearly define clean and dirty areas.
- ✓ To facilitate cleaning; keep the surgical area simple and uncluttered.
- ✓ Remove all unnecessary items from clinical area.
- ✓ The areas which may be contaminated during operative procedures should be cleaned and disinfected between patients using an appropriate solution or wipe.
- ✓ Clinicians must remember that once their hands become contaminated with blood or saliva, they must not touch environmental surfaces such as light

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handles, unit handles, chair controls, mixers and materials, computers, keyboards or telephones etc.

### **B. Surface Cleaning and Protection**

- ✓ Surfaces should be smooth, impervious and washable.
- ✓ Prior to session –ensure all surfaces areas and equipment are clean and dust free.
- ✓ Surfaces and equipment should be protected from contamination or cleaned carefully between patients.
- ✓ All work surfaces, sinks, taps and splash backs including those apparently uncontaminated should be thoroughly cleaned at the end of each clinical session using an appropriate bactericidal surface disinfectant.
- ✓ Blood spills either from a container or as a result of an operative procedure must be dealt immediately. All clinics/departments must possess a blood spillage kit.
- ✓ All aspirators, drains and spittoons should be cleaned after every session with a non-foaming disinfectant.
- ✓ Records of cleaning must be kept.

### **Use of Disposables**

- ✓ Use disposable items whenever possible.
  - ✓ Local anesthetic needles must always be disposable (single-patient use).
  - ✓ Never reuse a product or instrument if marked as single use or disposable.
- Items that are difficult to clean should be considered single use where possible.

### **List of dental items and instruments as single use:**

- All root canal files, reamers and broaches
- Plastic impression trays
- Matrix bands
- Plastic dappen dishes
- Plastic suction tubes
- Prophylactic brushes and cups
- Plastic saliva ejectors
- Steel burs
- Toothbrushes

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**SYMBOL FOR SINGLE USE ITEMS**  
**DO NOT RE-USE ITEMS LABELLED AS SINGLE USE**

### **Instrument Decontamination**

✓ Appropriate protective clothing (Personal protective equipment) must be worn when cleaning, decontaminating and dismantling items of equipment.

### **C. Manual Cleaning Procedure**

- ✓ Use a dedicated dental instrument cleaner (accurately diluted), with a long handled brush under water to avoid splashing. Cleaning by hand using a brush should only be done when absolutely necessary.
- ✓ Brushes should be autoclaved between each use or washed thoroughly after each use with hot water and detergent.
- ✓ Sharp ends of the instruments should be held away from the body during cleaning.
- ✓ Rinse in clean water.
- ✓ Visually check to ensure all debris is removed.
- ✓ Lubricate if required

**Note: Details of manual cleaning procedure – To be displayed in wash areas.**

### **Protocol for the Manual Cleaning of Dental Instruments**

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- ✓ All personnel involved in the decontamination of dental instruments should be trained in the content and application of this protocol and associated guidance.
- ✓ To minimize the risk to personnel undertaking manual cleaning, the splashing and creation of aerosols **should be avoided** at all times.

**Note: Maintaining a dirty-to-clean workflow procedure will assist in infection control.**

### **Manual Cleaning - Immersion Method**

1. Wash hands.
2. Put on personal protective clothing (PPE).
3. Ensure sinks, equipment and setting-down areas are free from extraneous items.
4. Dismantle and open the instruments, as required ready for immersion
5. Fill the clean sink (NOT wash-hand basin) with the appropriate amount of water and detergent (specified for the purpose).

**Note:** ensure correct temperature as recommended by the detergent manufacturer is maintained.

6. Fully immerse the instruments in the solution and keep under water during the cleaning process to prevent aerosols.
7. Agitate/scrub the instruments using long-handled brushes with soft plastic bristles.
8. Drain any excess cleaning solution prior to rinsing.
9. Rinse in clean water.
10. Visually inspect all items ensuring they are clean, functional and in good condition.
11. Lubricate any relevant items prior to sterilization with a non-oil-based lubricant.
12. Dispose of cleaning materials safely in accordance with local policy.
13. Replace cleaning solution and the rinse-water after each use.
14. Complete relevant documentation.

### **D. Cleaning: Validated Ultrasonic Bath**

- ✓ An appropriate cleaner for use with ultrasonic baths should be used in accordance with manufacturer's instructions.

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- ✓ Immerse briefly in cold water and detergent to remove visible debris.
- ✓ Rinse in clean water
- ✓ Open joints or hinges and immerse fully in ultrasonic bath.
- ✓ Set the timer (according to manufacturer's instructions and close the lid).
- ✓ Do not open lid during cycle.
- ✓ Rinse in clean water.
- ✓ Visually check to ensure all debris is removed.
- ✓ Lubricate instruments if required.
- ✓ Ultrasonic baths should also be maintained and tested in accordance with manufacturers instructions.
- ✓ They should be subject to daily testing and the results retained in a dedicated log book.
- ✓ This should include cleaning efficacy and protein residue tests.

Any faults or concerns must be logged and reported and the machine taken out of use until the fault is identified and rectified.

### **E. Cleaning: Validated Washer Disinfector**

- ✓ Ensure dental cement is removed.
- ✓ Do not lubricate hand pieces.
- ✓ Place instruments on trays in accordance with manufacturer's instructions.
- ✓ Complete the cycle.
- ✓ Lubricate hand pieces after washer disinfector cycle.
- ✓ Washer Disinfectors should also be maintained and tested in accordance with manufacturer's instructions
- ✓ They should be subject to daily testing and the results retained in a dedicated log book.
- ✓ This should include cleaning efficacy and protein residue tests.

Any faults or concerns must be logged and reported and the machine taken out of use until the fault is identified and rectified.

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## **Movement of contaminated instruments between areas:**

- ✓ Contaminated instruments require safe movement between the treatment and decontamination areas.
- ✓ They should be transported in leak proof, easy to clean, rigid containers with a closable lid.
- ✓ The containers should be labeled accordingly and cleaned, disinfected and dried after use.

## **4. Sterilization: Non-vacuum autoclaves (Bench Top Sterilizers)**

- ✓ Place on clean perforated trays. Do not overload trays as this will impede the free circulation of air.
- ✓ Do not wrap instruments or place in pouches before autoclaving (unless a vacuum autoclave is used).
- ✓ Residual water must be drained from autoclave reservoir at the end of each day.
- ✓ The autoclave chamber and trays should be cleaned with a damp clean cloth and left open, to dry overnight.

Autoclaves should also be maintained and tested in accordance with manufacturer's instructions.

They should be subjected to testing and the results retained in a dedicated log book. This should include daily tests to check the temperature, pressure and holding time as well as housekeeping tasks.

## **5. A - Z DECONTAMINATION GUIDELINES**

All dental instruments and equipment must be cleaned and sterilized after use as detailed in A-Z Disinfection and Sterilization Guidelines or in accordance with manufacturer's instructions.

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Appliances	
orthodontic and prosthetic	<ul style="list-style-type: none"><li>• Rinse under clean running water until clean.</li><li>• Use an appropriate disinfectant according to manufacturer's instructions.</li><li>• Rinse thoroughly.</li><li>• If returning to laboratory ensure a label is attached to indicate that a decontamination process has taken place</li></ul>
Burs	Steel burs -disposable, <ul style="list-style-type: none"><li>• Diamond -pre-clean then autoclave</li><li>• Tungsten Carbide -pre-clean then autoclave</li><li>• Acrylic Trimming Burs -pre-clean then autoclave</li></ul>
Bracket tables	Cover surface and use disposable instrument trays 17 <ul style="list-style-type: none"><li>• Clean with detergent/disinfectant wipe between patients</li><li>• Do not use alcohol based products on stainless steel.</li></ul>
Dental Cabinet	Wipe cupboard doors, drawer fronts and handles at the end of each session with a detergent/disinfectant wipe <ul style="list-style-type: none"><li>• Do not use alcohol based products on stainless steel.</li></ul>

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<b>Dental chair</b>	<ul style="list-style-type: none"><li>• Wipe and dry after each patient with detergent or disinfectant wipe.</li><li>• Do not use alcohol based products on stainless steel.</li></ul>
<b>Dental Instruments including hand pieces</b>	<ul style="list-style-type: none"><li>• Clean (using a validated process)</li><li>• Inspect</li><li>• Autoclave and inspect again</li><li>• Dry</li><li>• Store in clean, dry covered conditions</li></ul>
<b>Hand pieces using manual cleaning or ultrasonic bath</b>	<ul style="list-style-type: none"><li>• <b>In addition to above:</b></li><li>• Leave bur in place during cleaning to prevent contamination of hand piece bearing</li><li>• <b>DO NOT IMMERSE IN WATER</b></li><li>• Remove bur</li><li>• Lubricate hand piece with pressurised 18 oil as recommended by the manufacturer, until clean oil appears out of the bur chuck</li><li>• Clean off excess oil</li><li>• Sterilise in autoclave</li><li>• If post sterilization lubrication is required then either separate canisters must be used or the nozzles changed.</li><li>• Run hand piece briefly with bur in place before use, to clear excess lubricant.</li></ul>
<b>Hand pieces using a washer disinfectant</b>	<ul style="list-style-type: none"><li>• Clean outside of hand piece</li><li>• Remove bur</li><li>• Do not lubricate</li><li>• Place in the displacement device in</li></ul>

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	<p>the washer disinfectant</p> <ul style="list-style-type: none"><li>• Lubricate before placing in the autoclave</li><li>• If post sterilization lubrication is required then either separate canisters must be used or the nozzles changed.</li><li>• Run hand piece briefly with bur in place before use, to clear excess lubricant</li></ul>
<b>Impressions</b>	<ul style="list-style-type: none"><li>• Rinse under clean running water until clean.</li></ul> 19 <ul style="list-style-type: none"><li>• Use an appropriate disinfectant according to manufacturer's instructions.</li><li>• Rinse thoroughly.</li><li>• If returning to laboratory ensure a label is attached to indicate that a decontamination process has taken place</li></ul>
<b>Instrument Containers</b>	<ul style="list-style-type: none"><li>• Clean with detergent, rinse and dry (Do not use sodium hypochlorite)</li></ul>
<b>Light cure Tip</b>	<ul style="list-style-type: none"><li>• Pre-clean and autoclave or protect with a plastic disposable cover (Check manufacturers instructions)</li></ul>
<b>Matrix band Holders</b>	<ul style="list-style-type: none"><li>• Remove used band before decontamination process</li></ul>
<b>Operating lights</b>	<ul style="list-style-type: none"><li>• Clean after each patient with a detergent/disinfectant wipe.</li><li>• Do not use alcohol wipe on stainless steel parts.</li></ul>

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<b>Spittoon</b>	<ul style="list-style-type: none"><li>• Flush between each patient and clean with detergent/disinfectant wipe</li><li>• Do not use alcohol based products on stainless steel.</li><li>• Remove debris from the trap at the end of the session and system clean according to manufacturer's recommendations</li></ul>
<b>Sinks</b>	<ul style="list-style-type: none"><li>• Clean at the end of each session with cream cleaner and detergent wipe and leave dry.</li><li>• Do not use alcohol base wipes or solution on stainless steel sinks</li></ul>
<b>Suction Apparatus</b>	<ul style="list-style-type: none"><li>• Aspirator tubing and drainage system should be cleaned at the end of each sessions according to manufacturers Instructions (Or dispose of if single use)</li></ul>
<b>Water Bottles</b>	<ul style="list-style-type: none"><li>• Empty residual water at the end of each session.</li><li>• Rinse with sterile water.</li><li>• Leave a little clean water in the bottom of the bottle to prevent air locks.</li><li>• Before use empty remaining water</li><li>• Rinse again and re-fill with sterile water.</li></ul>
<b>Water lines</b>	<ul style="list-style-type: none"><li>• Flush for at least 2 minutes at the beginning and end of each day and flush for 20-30 seconds between each patient.</li></ul>
<b>Work surfaces</b>	<ul style="list-style-type: none"><li>• Clean with detergent/disinfectant wipe between each patient and at the end of the session</li></ul>

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## New instruments

New instruments should be decontaminated prior to use (in accordance with manufacturer's instructions) and decontamination instructions retained.

## 6. Aseptic storage

- ✓ Instruments should be stored dry and protected from dust, splash or aerosol contamination in closed or covered trays in closed cupboards or drawers.
- ✓ Packaging of decontaminated instruments should be carried out in a clean area away from contaminated instruments and decontaminating equipment.
- ✓ Instruments should be used within 21 days of the decontamination process or reprocessed before use.

## Waste disposal

- ✓ All waste must be segregated into correct waste streams.
- ✓ Staff handling clinical waste must be aware of the current policy and have received instruction on the segregation, disposal and transportation of clinical waste.
- ✓ contaminated dental waste is collected by a dedicated waste disposal company. This includes:

### Waste amalgam

Amalgam filled extracted teeth

(Extracted teeth with no amalgam in should be disposed of in sharps box)

Amalgam separation units.

## 7. Safe use and disposal of contaminated dental sharps

- ✓ The definition of sharps applies to: needles, teeth, burs, root canal instruments, metal matrix bands, glass ampules/vials, scalpel blades, scissors any other contaminated sharp instrument or item.
- ✓ Avoid sharps usage wherever possible.
- ✓ Never leave sharps lying around.
- ✓ Never walk about with unguarded sharps.
- ✓ Always request assistance when using sharps with unco-operative clients.

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- ✓ Remove hand pieces containing contaminated burs from dental units immediately after use.
- ✓ All sharps must be placed into an approved sharps container.
- ✓ Ensure sharps containers are placed off the floor, out of the reach of patients and careers at all times and ensure that unauthorized people cannot gain access to them.
- ✓ Never dispose of sharps with other clinical waste.
- ✓ Never overfill sharps containers.
- ✓ Never press down on the contents of the container to make more room.
- ✓ Never attempt to retrieve items from the sharps containers.
- ✓ All sharps injuries must be reported immediately and an incident form should be completed.

## 8. Procedure for cleaning up a small mercury spill

### Dos and don'ts after a mercury spill

- **Avoid contact with the spilled mercury** until you decide who will be cleaning it up, you or a professional.
- Healthcare professionals / workers can do the cleanup of a small mercury spill when the amount of mercury spilled is less than 3grams (as found in a fever thermometer or thermostat).
- If the amount of mercury spilled exceeds 3 grams or about the size of a green pea, a trained professional should do the cleanup.
- **Avoid spreading spilled mercury**
  - ✓ Never use a vacuum cleaner, mop or broom to clean up a mercury spill.
  - ✓ Avoid walking through the spill area.
  - ✓ Take children and pets to another room.
  - ✓ Leave any clothing or footwear that came in contact with the spilled mercury. If possible, close the doors of the room with the spilled mercury to keep vapors from spreading.

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## Mercury Spill Kit

### List of items

1. Latex or vinyl gloves
2. Flash light
3. Zipper-type plastic bags (several)
4. Plastic trash bags (at least two)
5. Wide tape (masking, duct or clear)
6. Paper towels
7. Eye dropper
8. Two index cards or pieces of stiff cardboard
9. Sulfur powder (see below for details)
10. Water to moisten paper towels

### Step-by-step guide to clean up a small mercury spill:

1. Prior to cleanup, remove metal items like jewelry and watches. Put on old clothes, old shoes and latex or vinyl gloves. Put a clean change of clothes and shoes along with a clean trash bag in a safe place outside the contaminated area. You will change out of your old clothes and shoes and put them in the trash bag at the end of the cleanup.
2. Identify items in the spill area that can be cleaned and those that cannot. Nonporous surfaces (finished wood, plastic or concrete) can be cleaned following this guidance. Porous surfaces or fabric-covered items (upholstery, carpeting, stuffed animals, pillows, backpacks, unfinished wood, and cork, cardboard) are difficult to clean because mercury beads may be trapped in these materials. Collect the items that you cannot clean and place them in plastic trash bags or cover or wrap them in a double layer of plastic and carefully seal with tape. Place the wrapped items in a secure place, preferably outdoors and out of the reach of children and pets.
3. Wear gloves to carefully pick up the larger pieces of broken glass and what remains of the broken device and place them on a paper towel. Gently fold the paper towel around these pieces so you can pick the bundle up and place it in a zipper-type plastic bag. Use index cards or stiff cardboard to push smaller pieces of glass and mercury beads together into a pile. Shine a flashlight at an angle to locate beads of mercury. The

  
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beads will reflect light from the flashlight. Check for mercury in cracks or in hard-to-reach areas where beads may be hidden or trapped. Check a wide area beyond the spill.

4. Use the eyedropper to collect mercury beads and place them in the plastic bag. Hold the eye dropper at an angle to draw the mercury into the tip. Keep the eyedropper at an angle to stop the mercury from rolling back out until you can put the mercury into the plastic bag. Wrap tape (stickyside out) around your gloved fingers and carefully use it to pick up any remaining glass or beads. Check again with the flashlight to be sure that no beads of mercury remain.
5. Mercury beads may still be trapped in cracks or crevices on irregular surfaces. Sprinkle sulfur powder over the contaminated area and rub it gently all over the surface and into the cracks with a paper towel. Sulfur powder binds with mercury. Use a paper towel dampened with water followed by wiping with another damp paper towel to clean up the sulfur and mercury. Place the used paper towels in a zipper-type plastic bag.
6. Put all the items that were used to pick up the mercury, including index cards or cardboard, eyedropper, contaminated tape, paper towels, and zipper-type bags into the trash bag. Carefully remove rubber gloves by grabbing them at the wrist and pulling them inside out as they come off. Place the used gloves in the trash bag.
7. Carefully seal the trash bag that contains the mercury contaminated waste and put it in a secure place, preferable outdoors and out of reach of children and pets until it can be disposed of safely.
8. Open a window and use a fan to ventilate the area to the outdoors for 24-48 hours before resuming normal use. If possible, heat the area (for example, with a space heater) while still ventilating to the outdoors. Avoid blowing the exhaust back indoors or into other nearby residences.
9. Clothes or shoes that did not come in direct contact with liquid mercury should be removed and put into the trash bag that was left outside the contaminated area at the beginning of the cleanup. Close the trash bag and take it outdoors. Carefully remove the shoes and or clothing from the trash bag and air them out thoroughly outdoors for 24 to 48 hours. After the outdoor airing, items that are washable can then be laundered.
10. Dispose of contaminated items properly! Mercury-contaminated items should not be placed in the regular household trash. Consult with a trained professional about how to decontaminate or dispose of these items safely.

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## In case of large mercury spill:

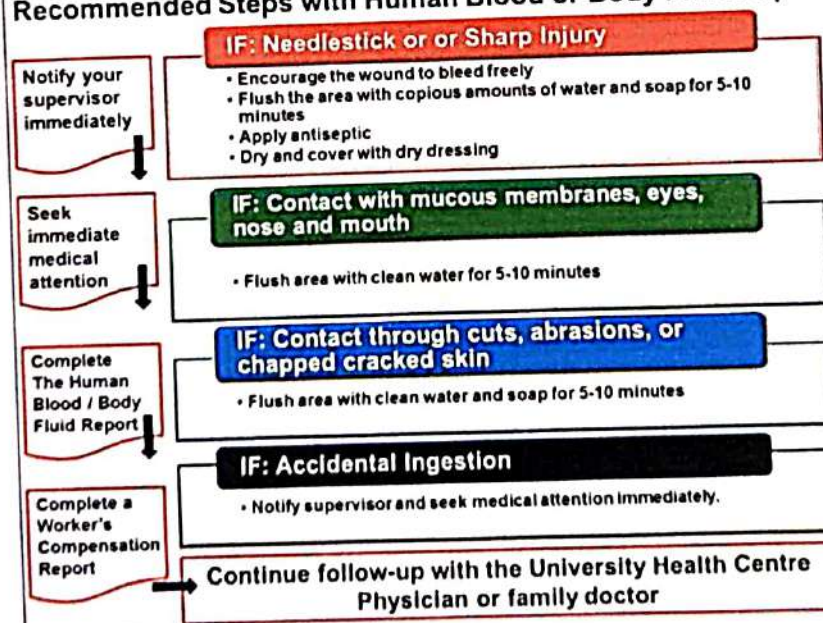
If the amount of mercury spilled exceeds 3 grams or about the size of a green pea, a trained professional should do the cleanup.

### Things to do before the arrival of trained professional:

1. Stay out of the room until you begin the cleanup. Cover the spill and surrounding area with plastic using one or more trash bags, overlapping side by side, to cover the beads.
2. Lower the room temperature, to reduce evaporation of mercury.
3. Shut down or close off vents to avoid spread of mercury vapors to other areas.
4. Open exterior windows and switch on the exhaust fans but avoid breezes that might blow the mercury vapor back indoors or into other nearby residences.

## 9. Blood and Body Fluid Exposure Protocol

### Recommended Steps with Human Blood or Body Fluid Exposure



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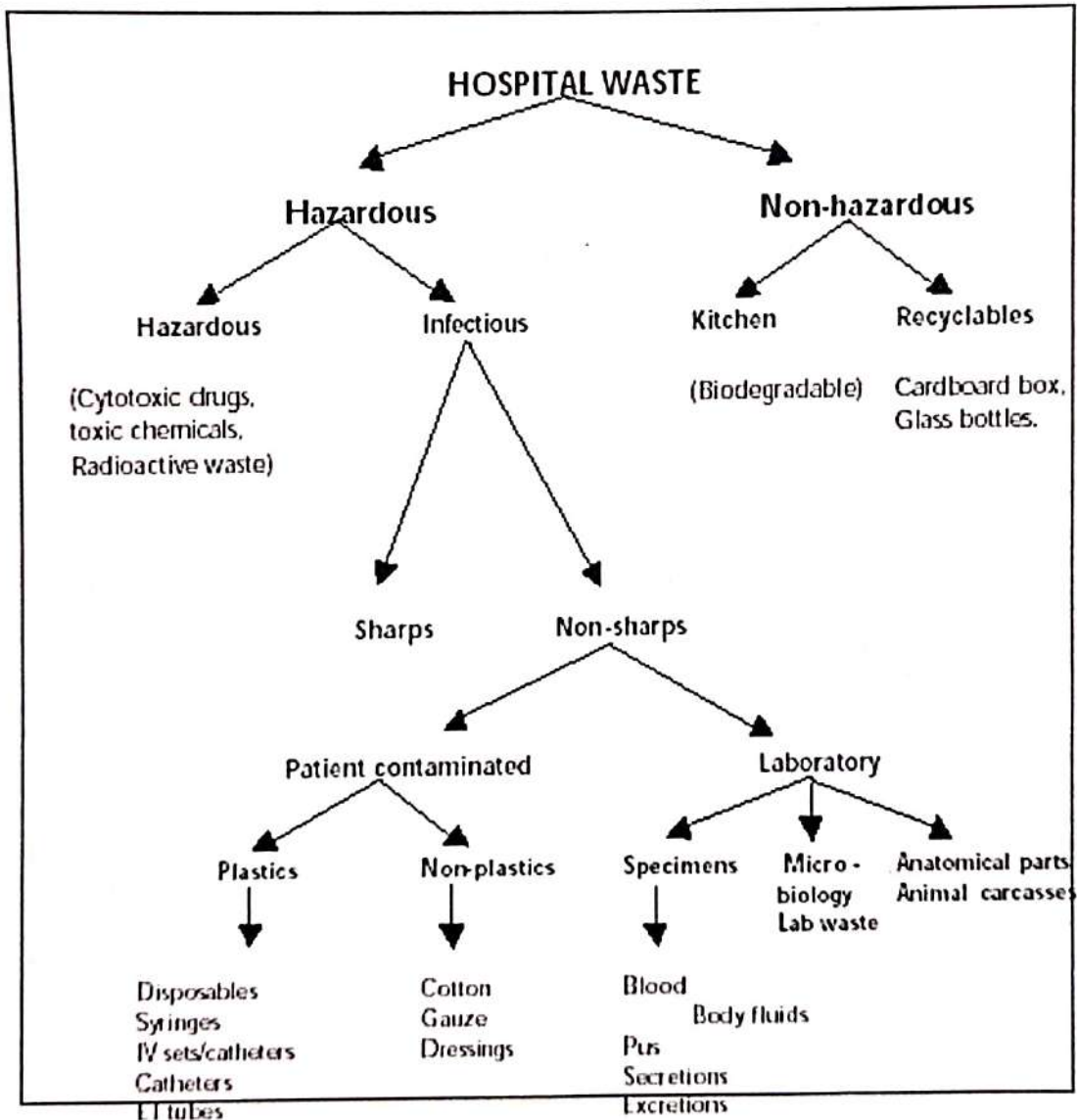
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## 10. BIOMEDICAL WASTE SEGREGATION AND MANAGEMENT

### Practical Classification of Hospital Waste



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### Collection of wastes:

- ❖ should be done in color coded bags /containers.
- ❖ should be located at all point of generation of wastes.
- ❖ should be emptied as & when they fill up to  $\frac{3}{4}$ th of it.
- ❖ Garbage bin should be cleaned with disinfectant regularly.

Color Coding	Waste Category	Type of Container	Treatment Options
Yellow	Cat. 1 – Human Anatomical Waste. Cat. 2 - Animal Waste. Cat. 3 – Microbiology and Biotechnology Waste. Cat. 6 - Soiled Waste	Plastic bag	Incineration / deep burial
Red / Blue	Cat. 3 – Microbiology and Biotechnology Waste. Cat. 6 – Soiled Waste Cat. 7 – Solid Waste (Plastic)	Disinfected container/ plastic bag.	Autoclaving/Micro waving/Chemical Treatment and recycled
White/ Translucent	Cat. 4 – Waste Sharps	Puncture proof container.	Chemical Treatment and destruction
Black	Cat. 5 – Discarded Medicines Cat. 9 – Incineration Ash Cat. 10 – Chemical Waste	Plastic bag	Secured landfill

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**SCHEDULE-III**

**LABEL FOR BIO-MEDICAL WASTE CONTAINERS/BAGS**

*BIOHAZARD SYMBOL*



*CYTOTOXIC HAZARD SYMBOL*



**HANDLE WITH CARE**

Note: Label Shall be non-washable & prominently visible.

*Amalalal*

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Infectious items for incineration (yellow)	Infected plastic items (red)	Non-infectious materials (black)	sharps (white/transluscent)
Blood ,body fluid, soiled items , human anatomical waste	Syringes , microbiological cultures, human & animal cell cultures, gloves.	Paper , wrappers , empty vials, left over food, card board waste, plaster of paris	Needles, blades, scalpels, broken glass wares.
			
Incineration	Autoclave/ recycling	Secured fill land	Chemical disinfection/ deep burial

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**Concern on biomedical waste management:**

- PROTECT OURSELF
- PROTECT OUR COMMUNITY FROM THE RISK OF INFECTIONS
- ENVIRONMENTAL CONCERN
- AND MOST IMPORTANTLY TO COMPLY WITH LAW

*S. B. Patil*

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Authors: Virendar pal sing, Gautam biswas, Jag jiv sharma Vol. 1 No-1 (2007/07 – 2007/12)
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# ENVIRO BIOTECH

**COMMON BIOMEDICAL WASTE TREATMENT FACILITY (CBMWTF)**

Sy. No. 199, Village Dhannura (Rudnoor), Tq. Bhalki, Dist. Bidar - 585 413.

**MANAGING BIOMEDICAL WASTE**

Certificate No. **694**



This is certify that M/s. **S.B. PATIL INSTITUTE FOR DENTAL SCIENCE**

**AND RESEARCH CENTRE, NAUBAD, BIDAR**

is a member of **ENVIRO BIOTECH**

Common Biomedical Waste Treatment Facility (CBMWTF)

with Membership No. **10128** Date: **17-05-2022**



*Harshkumar*  
**PRINCIPAL**

S.B. Patil Institute for  
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NAUBAD, BIDAR, 585402

*Harshkumar*  
Authorised Signatory

Valid :- **16-05-2023**



And whereas the Centre would be making the arrangement to dispose the waste as envisaged under the relevant rules for handling and management of biomedical waste generated by the hospitals in general. Both the parties agree to work together in the field of hospital waste management as under.

**Terms of Reference:**

**Responsibilities of the Occupier Healthcare Establishment (HCE) :**

1. To obtain Authorization from the Karnataka State Pollution Control Board (KSPCB) with actual number of beds in their HCE.
2. To ensure that the waste is handled without causing health Hazards to human health and the environment.
3. To segregate waste at the point of generation in accordance with Schedule I & II of the Biomedical Waste Management Rules 2016 and in compliance with the plan worked out by the ENVIRO BIOTECH to facilitate treatment at the plant. On site segregation and storage should be according to standards prescribed.
4. To establish secured waste collection site for storage within the HCE before handing over to the ENVIRO BIOTECH -A Common Biomedical waste treatment facility (CBWTF).
5. To furnish annual reports regarding generation, collection, storage, transportation and disposal of bio-medical wastes in the prescribed format to the prescribed authority.
6. To maintain records and report accidents etc. whenever they occur.
7. To designate a Nodal Officer responsible for interacting with ENVIRO BIOTECH and KSPCB.
8. To disinfect sharps and mutilate them or at least hand them over in a puncture proof and secure container for mutilation and sterilization at the site.
9. To use appropriate bags and bins for segregation, collection and storage of biomedical waste using prescribed color codes, before handing over to the Enviro Biotech representatives for treatment, these bags and bins would have to be provided by the HCEs.
10. Regular payment of service charges will be the responsibility of the HCE's. The HCEs would have to make the arrangements for the payment of the service charges along with the applicable Taxes to the authorized person of the ENVIRO BIOTECH.
11. On time payment of service charges will be the responsibility of the HCE's. The HCEs will have to make arrangements for the payments of the service charges to the authorized person of the ENVIRO BIOTECH only.

**SERVICE TO BE PROVIDED BY THE ENVIRO BIOTECH:**

1. To schedule the collection timings and mode in consultation with the HCE but within a reasonable range of time.
2. Enviro Biotech will supply the thick paper bags/ Non Chlorinated Bio Degradable Bags at a Price of Rs 250 per KG for the collection of Bio-Medical Waste.
3. Large bins or trolleys from storage area to the transport vehicle would have to be arranged by the HCE.
4. Enviro Biotech representatives would arrange to collection segregated Biomedical waste From specific locations meant for storage of bio-medical waste of each of the HCEs with whom this MOU being signed.
5. Enviro Biotech will be responsible for the safe transport of the biomedical waste form the HCE to the common facility in accordance with the Biomedical Waste Management (BMWM) Rules, 2016.
6. Appropriate treatment and disposal of different categories of waste would be carried out by the Enviro Biotech in accordance with the BMWM Rules, 2016.

7. Monitoring and ensuring complete disinfection / sterilization of the waste in accordance with the BMWM Rules will be carried out in collaboration with the Karnataka State Pollution Control Board (KSPCB) Bidar.
8. A liquid effluent treatment plant to treat the liquid wastes emanating from the treatment facility will be established and operated in accordance with the Environment Protection Act (EPA) 2016.
9. The Collected waste material would be checked periodically for segregation, labeling etc. and suggestions would be given for improvement to the HCEs, which the HCEs must implement.
10. Appropriate training will be provided by the Enviro Biotech to the HCE personnel for segregation, transport, storage. The HCE will cooperate and accommodate the suggestions given during training and incorporate them in their practices in the spirit of cooperation and goodwill.
11. The Enviro Biotech will be the preferred contractor for lifting non-infected plastics, paper, glass metal and other non - biodegradable material used in the HCEs. This should be given free of cost to the Enviro Biotech.
12. Waste audit and quantification will be carried out at the individual HCEs by Enviro Biotech from time to time, which will be submitted to the Medical Superintendent of the HCEs with a copy to the KSPCB. The HCE should cooperate and facilitate the same as in enumerating the beds.
13. Consent for operation and authorization for the facility will be procured by the Enviro Biotech and regularly renewed.
14. Certificate for the proper transport vehicle will be procured by the Enviro Biotech.

#### Joint Procedure Order:

Enviro Biotech has prepared a detailed procedure order covering the working methodology to be adopted during the term of contract and the same is the manual to be followed during the term of contract.

The Enviro Biotech will collect, transport, store, treat and dispose the different Waste in accordance with the Biomedical Waste Management (BMWM) Rules 2016 and will avoid becoming liable for improper treatment of disposal.

#### Emergency Contingency Plan:

In case of failure to collect waste for more than 48 hours from the designated time of collection from HCE, the Enviro Biotech and the KSPCB will be informed by the HCE. Enviro Biotech will collect the waste from the HCEs 6 Days in a week (excluding Sundays). However, considering the magnitude of the waste, Enviro Biotech may collect

the waste from only major HCE's on Sunday as well. Collection of waste may not be undertaken on major holidays declared by Government. Enviro Biotech will intimate the HCEs about the non collection days every quarter. Enviro Biotech will not undertake collection of waste in the case of strike in the city and any other such conditions beyond its control.

In Case there is disruption of services either in the collection, transportation, storage such as breakdown at the treatment and disposal site, the contingency plan put forth at the time of applying for consent for establishment of the common facility would be implemented.

#### Mode of Payment:

A payment of Rs 3000/- PER MONTH will be charged towards the disposal of Bio Medical Waste. The Common Bio Medical Waste Treatment Facilities Are Exempted under GST. The payment will be collected every month and will have to be given by the HCEs to the authorized person from the Enviro Biotech in the first week of every month. In case of constant delay in payment or non - payment by the HCE for more than one month, Enviro Biotech will have the right to charge double the amount pending and if the non Payment continues beyond the second month, then the Enviro Biotech will invoke the penalty clause and cancel the contract with said HCE after giving a notice in that respect. The above said rate is applicable to the HCEs till next rate revision. The revision of rates will take place once in ONE YEAR. After rate revision, new rates will be applicable to all Health Care Establishments.

Dispute Resolution:

In case of any dispute between or among the parties hereto regarding any of the clauses of this MOU the matter shall be referred to arbitration of such person (S) as the Enviro Biotech may decide and the same shall be decided in accordance with the provisions of the Indian Arbitration Act in force. This agreement is subject to the jurisdiction of Courts in Bidar.

In case of transgression or any other reason of a kind nature whatsoever, the parties shall discuss the same among themselves in the spirit in which this MOU is signed rather than attempting to revoke the penal provisions.

Enforcement of this agreement will be from 17-05-2022 onwards to 16-05-2023.

Name of HCE :

For and on behalf of the Centre

Acting through:

*Assessing*  
PRINCIPAL  
S.B. Patil Institute for  
Dental Science & Research  
NALEBAGI, BIDAR-505010.  
(Karnataka)



Enviro Biotech  
*[Signature]*  
Authorized Signatory

Witness:

1. *[Signature]*  
2. *[Signature]*

Witness:

1. *[Signature]*  
2. *[Signature]*

Place: BIDAR

Date: 17/05/2022



**S B PATIL INSTITUTE FOR DENTAL  
SCIENCE AND RESEARCH BIDAR.**

**4. PERIODIC FUMIGATION / FOGGING  
FOR ALL CLINICAL AREAS REGISTER  
MAINTAINED**

**2022-2023**

  
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 PERIODIC FUMIGATION / FOGGING FOR ALL CLINICAL AREAS

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 PERIODIC FUMIGATION / FOGGING FOR ALL CLINICAL AREAS

S/No	DATE	START TIME	END TIME	REMARKS
163	19-4-22	5.05 Pm	6.05 Pm	Deepak
164	23-4-22	5.10 Pm	6.10 Pm	Sagar
165	26-4-22	5.15 Pm	6.15 Pm	
166	30-4-22	5.05 Pm	6.05 Pm	Sagar
167	4-5-22	5.10 Pm	6.10 Pm	Deepak
168	8-5-22	5.15 Pm	6.15 Pm	
169	13-5-22	5.10 Pm	6.10 Pm	
170	17-5-22	5.5 Pm	6.5 Pm	
171	21-5-22	5.05 Pm	6.05 Pm	Deepak
172	24-5-22	5.10 Pm	6.10 Pm	Sagar
173	28-5-22	5.0 Pm	6.0 Pm	
174	2-6-22	5.10 Pm	6.10 Pm	Sagar
175	6-6-22	5.15 Pm	6.15 Pm	Deepak
176	10-6-22	5.10 Pm	6.10 Pm	Sagar
177	14-6-22	5.5 Pm	6.5 Pm	
178	18-6-22	5.15 Pm	6.15 Pm	Deepak
179	22-6-22	5.0 Pm	6.0 Pm	
180	25-6-22	5.05 Pm	6.05 Pm	

S/No	DATE	START TIME	END TIME	REMARKS
181	30-6-22	5.05pm	6.05pm	
182	4-7-22	5.10pm	6.10pm	
183	8-7-22	5.1pm	6.00pm	
184	12-7-22	5.05pm	6.05pm	
185	16-7-22	5.05pm	6.05pm	Sagar
186	19-7-22	5.10pm	6.10pm	
187	23-7-22	5.5 Pm	6.5 pm	
188	27-7-22	5.10 Pm	6.10 pm	
189	31-7-22	5.5 Pm	6.5 pm	
190	5-8-22	5.15 Pm	6.15 pm	
191	10-8-22	5.10 Pm	6.10 pm	
192	16-8-22	5.10 Pm	6.10 pm	Deepak
193	22-8-22	5.5 Pm	6.5 pm	
194	26-8-22	5.15 Pm	6.15 pm	
195	30-8-22	5.10 Pm	6.10 pm	
196	3-9-22	5.15 Pm	6.15 pm	
197	9-9-22	5.10 Pm	6.10 pm	
198	13-9-22	5.10 Pm	6.10 pm	

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S.B. PATIL INSTITUTE FOR DENTAL SCIENCES & RESEARCH  
 PERIODIC FUMIGATION/FOGGING FOR ALL CLINICAL AREAS

S.B. PATIL INSTITUTE FOR DENTAL SCIENCES & RESEARCH  
 PERIODIC FUMIGATION/FOGGING FOR ALL CLINICAL AREAS

S.NO	DATE	START TIME	END TIME	REMARKS
199	17-9-22	5:5 pm	6:5 pm	S Jh
200	21-9-22	5:10 pm	6:10 pm	Deepak
201	26-9-22	5:15 pm	6:15 pm	S Jh
202	30-9-22	5:10 pm	6:10 pm	R
203	1-10-22	5:15 pm	6:15 pm	S Jh
204	6-10-22	5:10 pm	6:10 pm	R
205	11-10-22	5:5 pm	6:5 pm	S Jh
206	15-10-22	5:15 pm	6:15 pm	Deepak
207	19-10-22	5:0 pm	6:0 pm	S Jh
208	25-10-22	5:15 pm	6:15 pm	Deepak
209	29-10-22	5:10 pm	6:10 pm	S Jh
210	2-11-22	5:15 pm	6:15 pm	Deepak
211	7-11-22	5:00 pm	6:00 pm	Deepak
212	13-11-22	5:00 pm	6:00 pm	R
213	15-11-22	5:10 pm	6:10 pm	
214	19-11-22	4:55 pm	5:55 pm	
215	23-11-2022	5:10 pm	6:10 pm	
216	26-11-2022	5:00 pm	6:00 pm	R

S.NO	DATE	START TIME	END TIME	REMARKS
217	30/11/2022	5:00 pm	6:00 pm	Deepak
218	3/12/2022	5:05 pm	6:05 pm	S Jh
219	7/12/2022	5:10 pm	6:10 pm	R
220	12/12/2022	5:00 pm	6:00 pm	R
221	17/12/2022	5:00 pm	6:00 pm	S Jh
222	21/12/2022	5:10 pm	6:10 pm	R
223	26/12/2022	5:00 pm	6:00 pm	R
224	29/12/2022	5:10 pm	6:10 pm	S Jh
225	30/12/2022	5:00 pm	6:00 pm	S Jh
226	7/1/2023	4:55 pm	5:55 pm	R
227	10/1/2023	5:00 pm	6:00 pm	Deepak
228	18/1/2023	5:00 pm	6:00 pm	R
229	19/1/2023	5:10 pm	6:10 pm	S Jh
230	24/1/2023	5:00 pm	6:00 pm	S Jh
231	29/1/2023	5:00 pm	6:00 pm	R
232	31/1/2023	5:00 pm	6:00 pm	S Jh
233	3/2/2023	5:00 pm	6:00 pm	R

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PERIODIC PUNIGATION/FOOTING FOR ALL CLINICAL AREAS

S.NO	Date	START TIME	END TIME	REMARKS
234	7/2/2023	5:10 pm	6:10 pm	Shylen
235	13/2/2023	5:30 pm	6:30 pm	Sagar
236	17/2/2023	5:00 pm	6:00 pm	Sagar
237	21/2/2023	5:00 pm	6:00 pm	Sagar
238	21/2/2023	5:10 pm	6:10 pm	Deepak
239	1/3/2023	5:30 pm	6:30 pm	Sagar
240	6/3/2023	5:00 pm	6:00 pm	Sagar
241	10/3/2023	5:10 pm	6:10 pm	Deepak
242	17/3/2023	5:10 pm	6:10 pm	Deepak
243	18/3/2023	5:10 pm	6:10 pm	Sagar
243	23/3/2023	5:00 pm	6:00 pm	Sagar
244	26/3/2023	5:15 pm	6:15 pm	Sagar
245	1/4/2023	5:20 pm	6:20 pm	Deepak
246	5/4/2023	5:00 pm	6:00 pm	Deepak
247	10/4/2023	5:00 pm	6:00 pm	Deepak
248	15/4/2023	5:10 pm	6:10 pm	Deepak
249	19/4/2023	5:10 pm	6:10 pm	Deepak
250	24/4/2023	5:10 pm	6:10 pm	Deepak

S.NO	Date	START TIME	END TIME	REMARKS
	29/4/2023	5:00 pm	6:00 pm	Sagar
	3/5/2023	5:00 pm	6:00 pm	Sagar
	8/5/2023	5:00 pm	6:00 pm	Sagar
	12/5/2023	5:10 pm	6:10 pm	Sagar
	16/5/2023	5:15 pm	6:15 pm	Deepak
	20/5/2023	5:00 pm	6:00 pm	Sagar
	24/5/2023	5:00 pm	6:00 pm	Deepak
	29/5/2023	5:15 pm	6:15 pm	Deepak
	2/6/2023	5:10 pm	6:10 pm	Deepak
	6/6/2023	5:00 pm	6:00 pm	Deepak
	10/6/2023	5:10 pm	6:00 pm	Deepak
	15/6/2023	5:10 pm	6:10 pm	Sagar
	19/6/2023	5:00 pm	6:00 pm	Sagar
	23/6/2023	5:10 pm	6:10 pm	Sagar
	26/6/2023	5:10 pm	6:10 pm	Deepak
	30/6/2023	5:00 pm	6:00 pm	Deepak
	4/7/2023	5:00 pm	6:00 pm	Deepak
	7/7/2023	5:00 pm	6:10 pm	Deepak

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**5. IMMUNIZATION OF CARE GIVERS  
REGISTER MAINTAINED**

**2022-2023**

  
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Sl. No.	Name of the student	BDS Year	10/1/23 Date of 1 <sup>st</sup> dose	10/5/23 Date of 2 <sup>nd</sup> dose	9/10/23 Date of 3 <sup>rd</sup> dose	Sign/Remark
01.	Vinush Patil	2 <sup>nd</sup> Yr	✓	✓	-	Patil
02.	Kodungal sundip Kumar	1 <sup>st</sup> Yr	✓	✓	-	Kumar
03.	Tahana Zaheer	2 <sup>nd</sup> Yr	✓	✓	✓	Zaheer
04.	Unaisah Sultan	2 <sup>nd</sup> Yr	✓	✓	-	Sultan
05.	Shwadhya	1 <sup>st</sup> Yr	✓	✓	-	Shwadhya
06.	Nayana Malini	1 <sup>st</sup> Yr	✓	✓	-	Malini
07.	Milika Talwar	2 <sup>nd</sup> Yr	✓	✓	-	Talwar
08.	Lalima Khanum	1 <sup>st</sup> Yr	✓	✓	-	Khanum
9.	Speed Zaiduddin	1 <sup>st</sup> Yr	✓	✓	-	Zaiduddin
10.	Wijesha Manirat	1 <sup>st</sup> Yr	✓	✓	-	Manirat
11.	Omisha Kulkarni	1 <sup>st</sup> Yr	✓	✓	-	Kulkarni
12.	Rushika	1 <sup>st</sup> Yr	✓	✓	-	Rushika
13.	Tahana Kiran	1 <sup>st</sup> Yr	✓	✓	-	Kiran
14.	Mahima Nooridin	1 <sup>st</sup> Yr	✓	✓	-	Nooridin
15.	Supriya	1 <sup>st</sup> Yr	✓	✓	-	Supriya
16.	D. Pankaj	1 <sup>st</sup> Yr	✓	✓	-	Pankaj
17.	Hiba Zubair	1 <sup>st</sup> Yr	✓	✓	-	Zubair
18.	Mahima Nooridin	1 <sup>st</sup> Yr	✓	✓	-	Nooridin
19.	Supriya	1 <sup>st</sup> Yr	✓	✓	-	Supriya
20.	D. Adarsh	1 <sup>st</sup> Yr	✓	✓	-	Adarsh
21.	Hiba Zubair	1 <sup>st</sup> Yr	✓	✓	-	Zubair
22.	T. Rushika	1 <sup>st</sup> Yr	✓	✓	-	Rushika
23.	Tahana Altafah	1 <sup>st</sup> Yr	✓	✓	-	Altafah
24.	Lena Anwar	1 <sup>st</sup> Yr	✓	✓	-	Anwar
25.	Amena Mubina	1 <sup>st</sup> Yr	✓	✓	-	Mubina
26.	Mishal Pappas	1 <sup>st</sup> Yr	✓	✓	-	Pappas
27.	Kaushal Kumar	1 <sup>st</sup> Yr	✓	✓	-	Kumar
28.	Jyoti Sanyal	1 <sup>st</sup> Yr	✓	✓	-	Sanyal
29.	Pati Mubina Malikamun	1 <sup>st</sup> Yr	✓	✓	-	Malikamun
30.	Singhvi Susha Sujay	1 <sup>st</sup> Yr	✓	✓	-	Sujay
31.	Pratik Supanya Dalga	1 <sup>st</sup> Yr	✓	✓	-	Dalga
32.	Vasudha Piradar	1 <sup>st</sup> Yr	✓	✓	-	Piradar

  
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Sl. No.	Name of the student	MDS Year
01	Dr. Ahmad Tawannum	MDS 2 <sup>nd</sup> Yr
2	Dr. Idrak Naz	MDS 1 <sup>st</sup> Yr
3	Dr. Gunda Prasadkumar	MDS 1 <sup>st</sup> Yr
4	Dr. Aishwarya	MDS 2 <sup>nd</sup> Yr
5	Dr. Prasadkumar	MDS 1 <sup>st</sup> Yr
6	Dr. Sugan Harshul	MDS 1 <sup>st</sup> Yr
7	Dr. Amalraj	MDS 1 <sup>st</sup> Yr
8	Dr. Md. Sunaid	MDS 1 <sup>st</sup> Yr
9	Dr. Aditya	MDS 1 <sup>st</sup> Yr
10	Dr. Rajasudha	MDS 1 <sup>st</sup> Yr

1 <sup>st</sup> dose	2 <sup>nd</sup> dose	3 <sup>rd</sup> dose	Sign/Remark

*Handwritten signature*

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**6. NEEDLE STICK INJURY REGISTER  
MAINTAINED**

**2022-2023**

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Estd.: 1991

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**BIDAR - 585 402 (KARNATAKA)**

(Affiliated to Rajiv Gandhi University of Health Sciences & Recognised by Dental Council of India)

Email: [principalsbrdch@yahoo.co.in](mailto:principalsbrdch@yahoo.co.in) [www.sbpatilcollege.co.in](http://www.sbpatilcollege.co.in)

Ph.: 08482 232101-232588 Fax.: 08482-232101

### MANAGEMENT OF NEEDLE STICK INJURY

- Do not panic or put the pricked finger in mouth or squeeze the wound to bleed it.
- Immediately wash the wound and surrounding skin with soap and water, and rinse.
- Do not scrub or use bleach, chlorine, alcohol, betadine, iodine, antiseptics detergents or any antibiotics on the wound

### EVALUATION FOR POST EXPOSURE PROPHYLAXIS (PEP)

The evaluation to be done by designated PEP V/C at ICTC preferably within 2 hours but certainly within 72 hours. The first dose of PEP should be administered preferably within the first 2 hours of exposure but certainly within 72 hours. If the risk is insignificant, PEP could be discontinued, if already commenced.

### ASSESSING THE HIV STATUS OF SOURCE AND THE PERSON EXPOSED

- A baseline rapid HIV testing after proper counselling should be done before starting PEP of the person exposed; and if required, of the source; (in case the status of the source is unknown).  
Informed consent should be obtained before testing of the source as well as person exposed.  
Initiation of PEP where indicated should not be delayed while waiting for the results of HIV testing of the source of exposure.  
Exposed individual who are known or discovered to be HIV positive should not receive PEP.  
They should be offered counselling and information on prevention of transmission and referred to antiretroviral therapy (ART) centre after their complete laboratory work up which also include testing for hepatitis B & C virus infection.

*Somanatha*  
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NEEDLE STICK INJURY

REGISTER

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Estd.

S.No	Date	Student Name	Department	patient name
1	20/05/2022	Rachana	OMFS	Saleha begum (18y/F)
2	10/08/2022	Sayali	OMFS	Bimlesh Desai (60y/M)
3	7/11/2022	Sana	OMFS	Pawan Kumar (30y/M)

medical his/accy	treatment given	Ref.to	sign
NRH	Injury was thoroughly cleaned with soaps & water	BRIMS	Durgak 20/05/2022
NRH	Injury was thoroughly cleaned with soap & water	BRIMS	Durgak 10/08/2022
NRH	Injury was thoroughly cleaned with soap & water	BRIMS	Durgak 7/11/2022

*Srinath Babu*  
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S.No	Date	Student Name	Department	Patient Name
1	22/2/2023	Tram	OMFS	Supriya (25/F)
2	31/3/2023	Kaldeep	OMFS	Abraham (24/M)
3	23/6/2023	Shahid	OMFS	Shakti Tala (43/F)
4	6.9.2023	Sharon	OMFS	Ramesh Patil
5	7.9.2023	Tejasvi	OMFS	Mahadevi

Medical History	Treatment given	Ref. No.	Sign
NRH	Injury was thoroughly cleaned with Soap & water	BRIMS	Deepak 22/2/2023
NRH	Injury was thoroughly cleaned with Soap & water	BRIMS	Deepak 31/3/2023
NRH	Injury was thoroughly cleaned with Soap & water	BRIMS	Deepak 23/6/2023
NRH	Got needle stick injury while opening the new needle which has been inserted into patient's mouth. Cleaned. Bandage applied		
NRH	Injury was thoroughly cleaned with Soap & water	BRIMS	Deepak

Amritha  
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