

RESPONSIBILITIES TO PATIENTS WITH INFECTIOUS DISEASES

The College of Dentistry adheres to rules set forth in the Occupational Safety and Health Administration (OSHA) Bloodborne Pathogen Standard and the Needlestick Safety and Prevention Act. The complete OSHA Bloodborne Pathogen Standard may be found at: <http://www.osha.gov/SLTC/bloodborne pathogens/index.html>. The College also is in compliance with CDC, ADA, and OSAP recommendations. Locally, the COD is in compliance with the OUHSC/OU-Tulsa Infectious Diseases Policy.

To be in compliance with the College of Dentistry Infection Control Policy, all faculty, staff, and students must afford the following rights and opportunities to their patients:

Obligation to Treat: You may not refuse to treat a patient whose condition is within your realm of competence solely because the patient has an infectious disease. However, departments/clinics may choose to defer non-emergency procedures on patients with airborne infectious diseases until such time as the patient is non-infectious.

Records: All patient dental/medical records must be kept confidential and must not be disclosed to others except as required or permitted by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy regulations and other applicable laws or as authorized in writing by the patient. Oklahoma law specifically requires the good faith disclosure of infectious disease test results to the Oklahoma State Department of Health and to healthcare personnel having reasonable need to know about the infection for purposes of providing patient care.

Patient Assignment: Patients with active infectious diseases will be assigned to the appropriate clinic or program based on the patient's medical condition, the experience level of the student, and the need for or availability of dental allied personnel.

Patient Health History: Standard precautions should always be observed.

Preventive measures begin by thoroughly evaluating a patient's health history. A complete medical and dental history provides the initial assessment of the patient and makes the practitioner aware of his or her current health status, adverse risks from dental treatment, medications, and the reasons for seeking care.

Preprocedural Mouthrinse

The technique of preprocedural mouth rinsing should be considered. It is important to select a mouthrinse containing an antimicrobial agent. Antiseptic properties help reduce bacterial counts on the surface of oral tissues and in turn reduce the number of microorganisms released through aerosols, spatter, or direct contact.

TUBERCULOSIS

The College complies with the Health Science Center's Tuberculosis Infection Control Policy and Program. Tuberculosis is an airborne disease that is contracted by inhaling droplets produced by a cough or sneeze etc. from an infected individual. Patients with a cough with a duration of three weeks or more should be questioned as this could be indicative of Tuberculosis. A coughing patient in the waiting area should be offered a tissue and be asked about the cough. The CDC recommends TB screening of students/employees to be done annually for at risk individuals. No individuals working in potential risk environments will be hired unconditionally until negative results for TB skin tests or chest x-rays are on file.

PPD Mantoux Tests will be given on an annual basis to Employees/Students

Further Occupational Safety Health Administration (OSHA) Information will be presented in class.