BOARD OF DENTISTRY
RULES COMMITTEE AGENDA
TELEPHONE CONFERENCE CALL
July 16, 2019
1:00 P.M. ET
Call In Number: (888) 585-9008
Conference Code: 599-196-982

Participants in this public meeting should be aware that these proceedings are being recorded and that an audio file of the meeting will be posted to the board's website.

I. Call to Order/Roll Call

Ms. Sissine called the meeting to order at 1:00 p.m.

MEMBERS PRESENT
Ms. Angela Sissine, RDH, Chair
Dr. Naved Fatmi, DMD
Dr. Nick Kavouklis, DMD

MEMBER ABSENT
Dr. Matthew Freedman, DMD

STAFF PRESENT
Jennifer Wenhold, Executive Director
Jessica Sapp, Program Administrator

BOARD COUNSEL
David Flynn, Esq.
Senior Assistant Attorney General

COURT REPORTER
For the Record Reporting
(850) 222-5491

II. Rule Discussion

a. Rule 64B5-25, Sterilization and Disinfection Procedures

The committee discussed the following proposed draft:

64B5-25.003 Required Sterilization and Disinfection Procedures.

(1) At least one of the following procedures must be used in order to provide proper sterilization:

(a) Steam under pressure (e.g., autoclave);

(b) Dry-heat;

(c) Chemical vapor;

(d) Ethylene oxide;

(e) Devices used to achieve sterilization must be approved by the U.S. Food and Drug Administration (FDA) for sterilization.

~~(e)~~ (f) Disinfectant/sterilant. U.S. Environmental Protection Agency (EPA) approved disinfectant/sterilants or U.S. Food and Drug Administration (FDA) approved sterilant may be used but are only appropriate for sterilization when used in appropriate dilution and for the time periods set forth in the manufacturer's instructions for use ~~recommendation~~ and only on non-heat tolerant instruments which do not penetrate soft tissue.

(2)(a) Surgical and other instruments that normally penetrate soft tissue or bone, including, but not limited to, forceps, scalpels, bone chisels, scalers, and surgical burs, must be sterilized after each use.

(b) Instruments that are not intended to penetrate oral soft tissue or bone, including, but not limited to, high speed dental handpieces, contra-angles, slow speed motors, prophy angles, amalgam condensers, plastic instruments, and burs, but that may

come into contact with oral tissues must be sterilized after each use according to the manufacturer's instructions for use.

(c) However, if heat, steam under pressure, or chemical vapor sterilization of an instrument is not technically feasible, due to its size or composition, the instrument must undergo sterilization with a disinfectant/sterilant that destroys viruses and spores. Disinfectants must be registered by the U.S. Environmental Protection Agency (EPA) as a disinfectant/sterilant and must be used in accordance with the manufacturer's recommendations and ~~the recommendations of the Centers for Disease Control (CDC)~~ in accordance with CDC Guidelines as defined and incorporated by reference in Rule 64B5-25.002(4), F.A.C.

(d) High speed dental handpieces, slow speed dental sleeves and contra-angles, slow speed motors, and prophy angles must be sterilized after each use using a heat or heat with pressure or heat with chemical method. The method used must be capable of sterilization.

(e) Heat-sensitive instruments may require up to 10 hours of exposure in a liquid chemical agent registered by the U.S. Environmental Protection Agency (EPA) as a disinfectant/sterilant.

(3) Before sterilization, instruments must be cleaned to remove debris. Cleaning must be accomplished by a thorough scrubbing with soap or a detergent and water or by using an FDA approved mechanical device, such as an ultrasonic cleaner or an FDA-approved instrument washer following the manufacturer's instructions for use ~~recommendations~~. Metal or heat-stable dental instruments must be sterilized after each use by one of the procedures identified in paragraphs (a)-(d), of subsection (1), above.

(4) Oral prosthetic appliances received from a dental laboratory must be washed with soap or a detergent and water, rinsed well, appropriately disinfected and rinsed well again before the prosthetic appliance is placed in the patient's mouth.

(5) At the completion of dental treatment, all surfaces that may have become contaminated with blood, saliva or other bodily fluids must be disinfected in accordance with CDC Guidelines as defined and incorporated by reference in Rule 64B5-25.002(4), F.A.C. ~~using a procedure recommended by the Centers for Disease Control (CDC)~~.

(6) Disinfectant/sterilants appropriate for use under paragraph (e), of subsection (1), above, are only those disinfectant/sterilants that are registered by the EPA. Those disinfectant/sterilants must be used in accordance with the manufacturer's recommendations for correct use as a disinfectant/sterilant.

(7) The sterilization and disinfection procedures required by this rule must be followed unless appropriate disposable items are used. Disposable items may only be used on a one time basis and may never be used on more than one dental patient. The use of disposable items is encouraged.

(8) Surgical or examination gloves and surgical masks shall be worn by all dentists, dental hygienists, and dental assistants while performing or assisting in the performance of any intra-oral dental procedure on a patient in which contact with blood and/or saliva is imminent. Surgical or examination gloves must be changed between patients. Hands shall be washed with soap and water and dried immediately after removing and prior to replacing gloves. A healthcare grade alcohol-based hand rub may also be used according to the most current CDC Guidelines as defined and incorporated by reference in Rule 64B5-25.002(4), F.A.C. Gloves are never to be washed and reused. Surgical or examination gloves that are punctured or torn must be removed and replaced immediately with new gloves following rewashing of provider's hands with soap and water. ~~It is recommended that~~ Protective eyewear ~~protection~~ must be worn by all dentists, dental hygienists, and dental assistants while performing or assisting in the performance of any dental procedure on a patient in accordance with OSHA's Bloodborne Pathogen Standard, as defined and incorporated by reference in Rule 64B5-25.002(5), F.A.C., and the CDC Guidelines as defined and incorporated by reference in Rule 64B5-25.002(4), F.A.C . ~~recommendations~~.

(9) The procedures and equipment used for sterilization must have their efficacy tested periodically. Adequacy of steam under pressure (e.g. autoclave) or chemical vapor sterilization must have their efficacy verified by appropriate biological monitoring weekly or more frequently as needed in accordance with the most current CDC Guidelines as defined and incorporated by reference in Rule 64B5-25.002(4), F.A.C. ~~at least once every 40 hours (2400 minutes) of use or at least once every thirty days, whichever comes first~~. Dry heat and ethylene oxide sterilizers must have their efficacy verified weekly or more frequently as needed in accordance with the most current CDC Guidelines as defined and incorporated by reference in Rule 64B5-25.002(4), F.A.C. ~~with appropriate biological monitoring every 120 hours of operation at sterilization parameters or every thirty days, whichever comes first. (Use time is determined by multiplying the number of cycles by the individual cycle time.)~~ Disinfectant/sterilants as set forth in paragraph (e), of subsection (1), above, when used instead of heat sterilization procedures,

must be used according to the manufacturer's recommended dilution and exposure time and must be changed according to the manufacturer's recommendations.

(10) All OSHA category 2 employees must be provided with and must use the barrier techniques required by this rule when they are in situations where they may be exposed to blood, saliva, or other bodily fluids from the patient during the treatment or examination process.

After discussion, the committee decided to strike the slow speed motors from 2(b) and (d) at this time. The committee will conduct additional research and look at studies to see the what the transmission rate really is.

Motion: by Ms. Sissine to move forward with the oral amendment
Second: by Dr. Fatmi
Vote: Unanimous

The committee discussed subsection (9) and decided to keep as the rule language as written.

Motion: by Ms. Sissine to move forward with the oral amendment
Second: by Dr. Kavouklis
Vote: Unanimous

The new proposals will be presented to the Board at the August 23, 2019 full board meeting.

III. New Business

a. HB 23 – Telehealth

Dr. Zapert spoke as the Dental Executive Director of the… and shared how the county health departments ae utilizing teledentistry within the state.

Dr. Kavouklis attended a conference on teledentistry and shared what discussions were had and what other states are using.

The committee will hold an in-person meeting on August 22, 2019 to discuss what rules, if any, need to be drafted to implement HB 23.

IV. Adjournment

There being no further business, the meeting adjourned at 1:30 p.m.