

Safety Checklist for Dental Equipment – Semiannual Reminder

NOTE: Always check state regulations and the manufacturers and suppliers of the equipment for information on inspection and maintenance.

Equipment	What to Check	Date
X-Ray	<input type="checkbox"/> Check for cracks in lead aprons and shields. <input type="checkbox"/> Properly dispose of processing chemicals, lead foil/shields/aprons. <input type="checkbox"/> Check condition of phosphorous plates, digital sensors, cords, etc.	
AED	<input type="checkbox"/> Make sure batteries and adult and pediatric pads are good. Have at least two sets of pads available. <input type="checkbox"/> Have AED easily accessible. <input type="checkbox"/> Review operations with dental team <input type="checkbox"/> Check for software updates.	
Emergency Drug Kits	<input type="checkbox"/> Check that armamentarium is complete. <input type="checkbox"/> Check expiration dates on drugs. Properly dispose of unused/expired drugs and medications. <input type="checkbox"/> Have kit easily accessible.	
Amalgam Recovery Protocols	<input type="checkbox"/> Check chair side traps, vacuum screens or separators that collect amalgam.	
Autoclave/ Sterilization Equipment	<input type="checkbox"/> Check all safety devices, safety interlocks and fittings. <input type="checkbox"/> Check that cycle complete signal is visible and doors cannot be operated until the signal is visible. <input type="checkbox"/> Check that cycle temperatures and pressures are within expectations. <input type="checkbox"/> Verify biological spore testing guidelines and maintenance of records per the CDC. Check that all monitoring records are up to date and accessible. <input type="checkbox"/> Clean and change filters per manufacturer's specifications.	
Dental Unit Water Lines	<input type="checkbox"/> Use EPA-registered and FDA-cleared dental waterline treatment product or device according to manufacturer's directions. Regularly check for upgrades in dental waterline treatment products and equipment.	
Nitrous Oxide Equipment	<input type="checkbox"/> Check that nitrous oxide and oxygen lines are properly installed and identified. Ensure that the lines are not crossed. Check the mixing system for leaks and proper calibration according to the manufacturer. <input type="checkbox"/> Have a properly functioning scavenging system. <input type="checkbox"/> Check that the alarm is working. <input type="checkbox"/> Test the high- and low- pressure connections for leaks. <input type="checkbox"/> Inspect all of the system components — hoses, couplings, reservoir bag, tubing, masks, connectors — for wear, cracks, holes or tears. <input type="checkbox"/> Check the tank regulators. <input type="checkbox"/> Ensure that gas cylinders are safely handled and stored. <input type="checkbox"/> Check Fail Safe Safety system for proper function. <input type="checkbox"/> Check portable units for functioning Pin Index Safety System. <input type="checkbox"/> Check central systems for functioning Diameter Safety System.	
Patient Monitoring Equipment	<input type="checkbox"/> Check that it is up to code and working properly. <input type="checkbox"/> Check the monitor's safety alarm and alarm parameters. <input type="checkbox"/> Check the blood pressure monitor, pulse oximeter.	
Emergency Oxygen Equipment	<input type="checkbox"/> Check that portable emergency tanks are full and easily accessible. <input type="checkbox"/> Check portable emergency tanks for adequate pressure to enable a continuous flow of 6 liters per minute for 30 minutes. <input type="checkbox"/> Check function of the positive pressure resuscitation bag (bag-mask or ambu bag) and hoses and look for cracks.	
Other	<input type="checkbox"/> Check to see that fire extinguishers and smoke detectors are working. <input type="checkbox"/> Check that emergency lighting is operable. <input type="checkbox"/> Check that curing light glass tips and filter lenses are not faulty — could emit excess heat to teeth. <input type="checkbox"/> Check that carbon monoxide detectors are operable. <input type="checkbox"/> Properly dispose of hazardous and infectious waste/sharps. <input type="checkbox"/> Check laboratory ventilation and dust collection filters. <input type="checkbox"/> Change oil and air filters in compressor. <input type="checkbox"/> Ultrasonic cleaner – check vibration quality and condition of tank. <input type="checkbox"/> Perform routine maintenance on handpieces. Check that pressures are properly set. <input type="checkbox"/> Check for safety hazards related to office/ facility construction (exit signs? clear hallways? parking lot has no slipping/falling hazards?). <input type="checkbox"/> Have an office emergency plan and practice it regularly. <input type="checkbox"/> Check that you are in compliance with OSHA and HIPPA protocols and practices.	

This list is provided as a reminder of the types of safety checks that should be undertaken semiannually in a typical dental practice office. As every office is different, this reminder should not be relied upon as an all-inclusive list of the safety checks that should be undertaken.