

Dentists (General) Regulation 1996

[1996-408]



New South Wales

Status Information

Currency of version

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Provisions in force

The provisions displayed in this version of the legislation have all commenced.

Notes—

- **Repeal**

The Regulation was repealed by the *Dental Practice Regulation 2004*, cl 38 with effect from 15.8.2004.

Authorisation

This version of the legislation is compiled and maintained in a database of legislation by the Parliamentary Counsel's Office and published on the NSW legislation website, and is certified as the form of that legislation that is correct under section 45C of the [Interpretation Act 1987](#).

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New South Wales

Contents

Part 1 Preliminary	4
1 Name of Regulation	4
2 Commencement	4
3 Definitions	4
4 Notes	4
Part 2 The Register	4
5 Entries in Register	4
6 Change of address	5
7 Alteration of name or other particulars	5
8 Application for restoration of name to Register	5
9 Fees for obtaining information from Register	5
10 Further qualifications for registration	5
Part 3 Certificates of registration	6
11 Certificate of registration.....	6
12 New certificate after change of name	6
13 Surrender of certificate of registration	6
14 Provisional registration	6
Part 4 Advertising	6
15 Restriction on advertising	6
16 Advertising in general.....	7
Part 5 Dental therapists and dental hygienists	7

17 Dental therapists	7
18 Treatment by dental therapists.....	8
19 Dental hygienists.....	8
20 Treatment by dental hygienists	9
Part 6 Infection control standards	10
21 Infection control standards.....	10
Part 7 Miscellaneous	10
22 General anaesthesia and simple sedation in dentistry	10
23 Patients' records.....	11
24 Supervisor's report on holder of licence	12
25 Dentist's order for certain technical work.....	13
26 Referral of mental health matters to Registrar	13
27 Fee for complaint.....	13
28 Repeal	13
Schedule 1 Forms.....	14
Schedule 2 Infection control standards	15

Dentists (General) Regulation 1996



New South Wales

Part 1 Preliminary

1 Name of Regulation

This Regulation is the *Dentists (General) Regulation 1996*.

2 Commencement

This Regulation commences on 1 September 1996.

3 Definitions

(1) In this Regulation:

dental hygienist means a person with the training prescribed in clause 19.

dental therapist means a person with the training prescribed in clause 17.

Department means the Department of Health.

the Act means the *Dentists Act 1989*.

(2) In this Regulation, a reference to a Form is a reference to a Form set out in Schedule 1.

4 Notes

The explanatory note, the table of contents and notes in this Regulation do not form part of the Regulation.

Part 2 The Register

5 Entries in Register

(1) For the purposes of section 12 (1) of the Act, entries are to be made in the Register in writing, in type or print, or in any electronic medium.

(2) For the purposes of section 12 (1) of the Act, in relation to a matter referred to in section 12 (1) (d)-(f) the prescribed fee is \$20.

Note—

Section 23 of the *Dentists Act 1989* provides that the fees for registration as a dentist (among other things) are such amounts as are determined by the Board and approved by the Minister. An additional fee for entry of a registered dentist's name, address, date of registration and particulars of qualifications in respect of which the registration was granted (the fee contemplated by section 12 (1) (a)–(c) of that Act) is not prescribed.

6 Change of address

A dentist who has changed his or her residential or principal practice address must, within 30 days after the change, inform the Registrar in writing of the particulars of the new address.

Maximum penalty: 5 penalty units.

7 Alteration of name or other particulars

- (1) The Registrar is to enter the new address of a dentist in the Register after being informed of that address under clause 6.
- (2) The Registrar is to enter in the Register any alteration of:
 - (a) the name of a dentist, if so requested by the dentist, and
 - (b) any particulars entered under section 12 (1) (d) or (e) of the Act.
- (3) A fee of \$20 is prescribed for entering an alteration referred to in subclause (2) (b).

8 Application for restoration of name to Register

- (1) An application under section 13 (7) of the Act to restore a dentist's name to the Register is to be in accordance with Form 1.
- (2) The prescribed fee for the restoration is \$100.
- (3) The Board may waive such part of the fee as the Board may in a particular case think proper.

9 Fees for obtaining information from Register

- (1) Any person may inspect the Register during the office hours of the Registrar on payment of a fee of \$10.
- (2) The prescribed fee for supplying a person with an extract from the Register under section 12 (2) of the Act is \$20 for each dentist in respect of whom an extract is supplied.

10 Further qualifications for registration

For the purposes of section 17 (d) of the Act, the prescribed examinations are the examinations conducted by the Australian Dental Council, or any other dental examining

body approved by the Board for the purposes of this clause.

Part 3 Certificates of registration

11 Certificate of registration

- (1) On the registration of a person as a dentist, the Registrar is to issue to the person a certificate of registration in a form approved by the Board.
- (2) The Registrar may, if satisfied that a certificate of registration has been lost, destroyed or defaced, issue a duplicate, clearly marked as such, on payment of a fee of \$40.

12 New certificate after change of name

If the Registrar enters an alteration of the name of a dentist under clause 7, the Registrar may issue a new certificate of registration to the dentist.

13 Surrender of certificate of registration

A dentist must surrender his or her certificate of registration to the Registrar not later than 14 days after being notified by the Board to do so if:

- (a) the name of the dentist is removed from the Register, or
- (b) the registration of the dentist is suspended.

Maximum penalty: 5 penalty units.

14 Provisional registration

For the purposes of section 21 (1) of the Act:

- (a) the prescribed fee for the grant of a certificate of provisional registration is \$40, and
- (b) the prescribed form for the certificate is Form 2.

Part 4 Advertising

15 Restriction on advertising

- (1) A dentist must not advertise his or her practice except in the manner and to the extent authorised by this Part.

Maximum penalty: 5 penalty units.

- (2) A society, council, body or corporation referred to in section 5 (4) (c), (d), (e) or (f) of the Act must not advertise the dental services available from it except in the manner and to the extent authorised by this Part.

Maximum penalty: 5 penalty units.

16 Advertising in general

- (1) An advertisement relating to dental services must not:
 - (a) be false, misleading or deceptive, or
 - (b) create an unjustified expectation of beneficial treatment, or
 - (c) promote the unnecessary or inappropriate use of dental services, or
 - (d) claim or imply superiority for a dentist in the practice of dentistry, or
 - (e) be likely to bring the profession into disrepute.
- (2) An advertisement relating to dental services, other than an advertisement prohibited by subclause (1), is authorised.

Part 5 Dental therapists and dental hygienists

17 Dental therapists

- (1) For the purposes of section 57 (4) (c) and (e) of the Act, a person with prescribed training is a person:
 - (a) who has successfully completed the course of training for dental therapists provided by the Department, or
 - (b) who has such other qualifications as are recommended by the Chief Dental Officer of the Department and approved by the Board for the purposes of this clause.
- (2) For the purposes of section 57 (4) (c) and (e) of the Act, the parts of the practice of dentistry that may be performed by dental therapists are the following:
 - (a) the dental examination of preschool and school children,
 - (b) the cleaning and polishing of teeth and restorations,
 - (c) the topical application to teeth of sealants, medicaments and preventive coatings,
 - (d) the removal of dental calculus not involving surgical techniques requiring incisions,
 - (e) the application of topical anaesthetics,
 - (f) the giving of supraperiosteal or mandibular nerve block injections of local anaesthetics not involving, in either case, any other regional, intra-osseous or intra-ligamental anaesthesia,
 - (g) the extraction of deciduous or permanent teeth not involving either surgical techniques or incisions,

- (h) the pulp capping of deciduous or permanent teeth and the pulpotomy of deciduous teeth,
 - (i) the restoration of deciduous or permanent teeth by the use of materials other than cast metals, gold foil or porcelain,
 - (j) intra-oral radiography,
 - (k) the taking of impressions, at the written request of a dentist, for use in study models, mouthguards and removable orthodontic appliances,
 - (l) dental health education,
 - (m) dietary counselling for dental purposes.
- (3) For the purposes of section 57 (4) (e) of the Act, a health service controlled by an aboriginal community is a prescribed institution.

18 Treatment by dental therapists

- (1) A dental therapist may perform those parts of the practice of dentistry referred to in clause 17 only under the supervision of the Chief Dental Officer of the Department or a dentist authorised by the Chief Dental Officer to supervise treatment by dental therapists.
- (2) It is sufficient compliance with this clause if the Chief Dental Officer or any other dentist authorised under subclause (1):
- (a) would be available, within a reasonable time, to assist the dental therapist if assistance were required, and
 - (b) is aware that he or she may be called on to provide such assistance.

19 Dental hygienists

- (1) For the purposes of section 57 (4) (f) of the Act, a person with prescribed training is a person:
- (a) who has undertaken a course of studies in dental hygiene approved by the Board for the purposes of this clause, or
 - (b) who has successfully completed an examination in dental hygiene approved by the Board for the purposes of this clause.
- (2) For the purposes of section 57 (4) (f) of the Act, the parts of the practice of dentistry that may be performed by a dental hygienist are the following:
- (a) pre-operative and post-operative instruction,
 - (b) the irrigation of the mouth,

- (c) the insertion and removal of surgical packs,
- (d) the application and removal of rubber dam,
- (e) the polishing of restorations,
- (f) simple prophylaxis,
- (g) the topical application of coatings, sealants, fluoride solutions and preventive medicaments,
- (h) the scaling of supra-gingival and sub-gingival calculus deposits from the teeth,
- (i) root planing,
- (j) the removal of sutures,
- (k) the selection of orthodontic bands,
- (l) the removal of orthodontic archwires, bands and attachments,
- (m) intra-oral radiography,
- (n) the taking of simple impressions for study casts,
- (o) the recording of periodontal disease,
- (p) dental health education,
- (q) dietary counselling for dental purposes.

20 Treatment by dental hygienists

- (1) A dental hygienist may perform those parts of the practice of dentistry referred to in clause 19 only if:
 - (a) the treatment to be carried out does not involve the cutting of oral or dental tissue, and
 - (b) the treatment to be carried out by the dental hygienist is in accordance with a written treatment plan prepared by a supervising dentist, and
 - (c) the requirements of subclause (2) or (3), as appropriate, are complied with.
- (2) A dental hygienist other than a dental hygienist employed under the direction, control and supervision of the Chief Dental Officer of the Department must be supervised by a dentist:
 - (a) who is on the premises at the time at which the treatment is carried out, and
 - (b) who would be available, within a reasonable time, to assist the dental hygienist if

assistance were required, and

(c) who is aware that he or she may be called on to provide such assistance.

(3) A dental hygienist employed under the direction, control and supervision of the Chief Dental Officer of the Department must be supervised by the Chief Dental Officer or a dentist authorised by the Chief Dental Officer to supervise treatment by dental hygienists.

(4) It is sufficient compliance with subclause (3) if the Chief Dental Officer or any other dentist authorised under that subclause:

(a) is on the premises at the time at which the treatment is carried out, and

(b) would be available, within a reasonable time, to assist the dental hygienist if assistance were required, and

(c) is aware that he or she may be called on to provide such assistance.

Part 6 Infection control standards

21 Infection control standards

(1) A person engaged in the practice of dentistry must not, without reasonable excuse, fail to comply with the infection control standards set out in Schedule 2 to the extent that they apply to the person in the practice of dentistry.

(2) In determining whether or not such a person has a reasonable excuse for failing to comply with a standard, particular consideration is to be given to the following:

(a) whether the circumstances involved the provision of emergency dental treatment,

(b) whether the person's employer failed to provide the necessary equipment, including providing access to it and training in its use, that would have enabled the person to comply with the standard (and whether the failure to provide such equipment was reported by the person to the Director-General of the Department).

Part 7 Miscellaneous

22 General anaesthesia and simple sedation in dentistry

(1) A dentist must not carry out any procedure forming part of the practice of dentistry on a patient to whom a general anaesthetic has been administered unless the general anaesthetic has been administered by a registered medical practitioner who:

(a) is a specialist in anaesthesia, or

(b) is accredited for the purposes of administering any general anaesthetic at a public or private hospital where surgery may lawfully be carried out.

Maximum penalty: 5 penalty units.

- (2) A dentist must not administer simple sedation by the intravenous route unless the dentist:
- (a) has received appropriate training in techniques of intravenous sedation and resuscitation, as approved by the Board, and
 - (b) is assisted by another person who is either:
 - (i) a registered nurse (within the meaning of the *Nurses Act 1991*) who has received training in intensive care or anaesthesia, or
 - (ii) a dentist.

Maximum penalty: 5 penalty units.

- (3) In this clause:

general anaesthetic means any drug or substance which when administered to a patient will render the patient:

- (a) unaware of the patient's surroundings, and
- (b) unable to retain reflex control of the airway, and
- (c) incapable of understanding and obeying a spoken command.

simple sedation means a technique in which the use of a drug or drugs produces a state of depression of the central nervous system enabling treatment to be carried out, and in which:

- (a) verbal contact with the patient is maintained throughout the period of sedation, and
- (b) the drugs and techniques used have a margin of safety wide enough to render unintended loss of consciousness unlikely.

23 Patients' records

- (1) A dentist must, in relation to every patient treated by the dentist or by a person supervised or employed by the dentist in the practice of dentistry, cause a record to be made, in a legible form, of the following information:
- (a) the name and address of the patient,
 - (b) if the patient has not attained the age of 16 years—the name and address of a parent or guardian of the patient,
 - (c) the date of birth of the patient,

- (d) the sex of the patient,
 - (e) the date on which the patient is first examined by the dentist,
 - (f) the date of each occasion on which the patient is treated by the dentist, or by any person employed by the dentist, with a brief description of the treatment administered on each occasion (specifying the tooth or teeth concerned).
- (2) Each radiograph taken of the patient in connection with the treatment must be retained.
- (3) The dentist must retain the radiographs and records:
- (a) in the case of a patient who has not attained the age of 18 years—until the patient attains (or would have attained) the age of 25 years, and
 - (b) in the case of a patient who is of or above the age of 18 years—for a period of at least 7 years from the latest occasion on which the patient is treated by the dentist or by a person supervised or employed by the dentist.

Maximum penalty: 5 penalty units.

- (4) Subclause (3) ceases to apply to a dentist when the dentist disposes of his or her dental practice as a going concern. However:
- (a) the dentist must provide the person who acquires the practice with the relevant radiographs and records, and
 - (b) subclause (3) applies to that person as if he or she had caused those radiographs to be taken and those records to be made.

24 Supervisor's report on holder of licence

It is the duty of the institution employing a dentist who is supervising a holder of a licence under section 18 (1) of the Act (***the licensee***) to furnish to the Board, at the expiration of 3 months from the commencement of the supervision and at the end of each succeeding period of 6 months, a report as to the following:

- (a) the dental knowledge and skill of the licensee,
- (b) whether the licensee carried out dental work satisfactorily,
- (c) whether the licensee has committed any breach of ethics,
- (d) the attitude of the licensee to patient care,
- (e) the ability of the licensee to communicate with patients and colleagues,
- (f) the willingness and capacity of the licensee to undertake continuing dental education.

25 Dentist's order for certain technical work

For the purposes of section 57 (4) (h) of the Act, an order by a dentist for technical work is to be in accordance with Form 3 (except where that work is part of the practice of dental prosthetics).

26 Referral of mental health matters to Registrar

- (1) For the purposes of section 32 of the Act, the prescribed person who is to cause notice to be forwarded to the Registrar is:
 - (a) in the case of a dentist who becomes a protected person, the Protective Commissioner and Public Guardian, or
 - (b) in any other case, the attending medical practitioner.
- (2) The prescribed manner of forwarding notice to the Registrar is by giving the Registrar, by telephone or facsimile and by post, the following particulars:
 - (a) the name and residential address of the dentist concerned,
 - (b) if appropriate, the date on which the dentist was admitted to the institution at which the dentist is a patient,
 - (c) if appropriate, the date on which the dentist became a protected person,
 - (d) any psychiatric condition for which the dentist is being treated.
- (3) Notice is to be forwarded not later than:
 - (a) in the case of notice given by telephone or facsimile—1 day, and
 - (b) in the case of notice given by post—7 days,after the dentist becomes a mentally incapacitated person or a protected person.

27 Fee for complaint

- (1) A complaint lodged with the Registrar under section 31 of the Act is to be accompanied by a fee of \$20.
- (2) The Registrar may exempt the maker of a complaint from paying the fee, or refund a fee already paid, if, in the opinion of the Registrar, the situation of the maker of the complaint, or the nature of the complaint, warrants an exemption or the refund.

28 Repeal

- (1) The *Dentists Regulation 1991* is repealed.
- (2) Any act, matter or thing that was done for the purposes of, or immediately before that repeal had effect under, that Regulation (other than an act, matter or thing relating to

the election of dentists to the Dental Board) is taken to have been done for the purposes of, or to have effect under, this Regulation.

Schedule 1 Forms

(Clause 3)

Form 1

DENTISTS ACT 1989

Section 13 (7)

Application for restoration of name to Register

I apply for my name to be restored to the Register of Dentists. I enclose the restoration fee of \$100. The reasons for this application are as follows:

.....
.....
.....

I also apply for waiver of (*state whether part or whole*) of the fee on the following grounds:

.....
.....
.....

(Signed).....

Date

Form 2

DENTISTS ACT 1989

Section 21 (1)

Certificate of provisional registration
Dental Board of New South Wales

Certificate No

This is to certify that is provisionally registered as a dentist until the day of

.....
19.....

.....
Registrar

Date

Form 3

DENTISTS ACT 1989

Section 57 (4) (h)

Order for Technical Work

From

Order No.

Address

Date

INSTRUCTIONS

To

Address

Please carry out the following work:

Patient

Case type

	Anterior	Posterior
Teeth		
Shade		
Mould		

Work required

.....
.....
.....
.....
.....
.....
.....
.....

Date work required

.....Signature of dentist

Schedule 2 Infection control standards

(Clause 21)

Part 1 Preliminary

1 Definitions

(1) In this Schedule:

body substance includes any human bodily secretion or substance.

invasive procedure means any one or more of the following:

- (a) surgical entry into body tissue, cavities or organs,
- (b) surgical repair of injuries,
- (c) the manipulation, cutting or removal of any oral or peri-oral tissue during which bleeding may occur.

patient includes (but is not limited to) a person who is accessing medical or health services or who is undergoing any dental treatment.

sharps means any object capable of inflicting penetrating injury, and includes hollow bore needles, suture needles, scalpel blades, orthodontic wires, root canal therapy (or

RCT) instruments, and stitch cutters.

- (2) The requirements set out in this Schedule apply to a person engaged in the practice of dentistry who is assisting in performing a procedure in the same way as they apply to a person who is actually performing the procedure.

Part 2 General standards applying to the practice of dentistry

2 General precautions

- (1) Precautions must be taken to avoid direct exposure to a patient's blood or other body substances. This requirement applies regardless of whether there is any perceived risk of infection.
- (2) Recognised techniques in controlling the risk of cross-infection must be used in the course of complying with the requirements of this Schedule.

3 Hand and skin cleaning

- (1) Hands must be cleaned immediately before and after any direct patient care.
- (2) Hands may be cleaned by:
 - (a) using washing facilities involving water and a soap or antiseptic, or
 - (b) if any of the items specified in paragraph (a) are unavailable, using non-water cleansers or antiseptics.
- (3) Hands or other skin surfaces that are contaminated with a patient's blood or other body substance must be cleaned as soon as it is practicable to clean them.
- (4) The requirement to clean hands applies regardless of whether gloves are also required to be worn.

4 Protective gowns and aprons

A clinical protective gown or apron (or other similar clothing) must be worn while performing any procedure where there is a likelihood of clothing being splashed or contaminated with blood or other body substances.

5 Gloves

- (1) Gloves must be worn while handling blood or other body substances.
- (2) In particular, gloves must be worn:
 - (a) while performing any procedure where direct contact is anticipated with a patient's blood or other body substances, mucous membranes or non-intact skin, and

- (b) while suctioning a patient, and
 - (c) while handling items or surfaces that have come into contact with blood or other body substances, and
 - (d) while performing an invasive procedure, venipuncture, or a finger or heel stick.
- (3) Gloves must be changed and discarded:
- (a) as soon as they are torn or punctured, and
 - (b) after contact with each patient.
- (4) Sterile gloves must be worn if the procedure involves contact with tissue that would be sterile under normal circumstances.

6 Masks and protective eye wear

- (1) A mask and protective eye wear must be worn while performing any procedure where there is a likelihood of splashing or splattering of blood or other body substances.
- (2) In cases where a mask is required to be worn, it must be worn and fitted in accordance with the manufacturer's instructions.
- (3) A mask must be discarded once it has been worn and it must not be used again.
- (4) In cases where protective eye wear is required to be worn, it must be worn and fitted in accordance with the manufacturer's instructions.
- (5) Protective eye wear must be discarded once it has been worn and not used again unless it is reusable in which case it is to be cleaned in accordance with the manufacturer's instructions.

7 Sharps

- (1) When handling sharps, recognised techniques for minimising the risk of needle stick or other penetrating injury must be followed.
- (1A) The person who uses a sharp, in the practice of dentistry, is responsible for the proper management and disposal of the sharp.
- (2) A needle must not be broken or otherwise manipulated by hand unless:
 - (a) it is necessary to remove the needle for technical reasons, or
 - (b) the person is performing a procedure where a needle is required to be bent.
- (3) A needle must not be bent after it is contaminated with blood or body substances.
- (4) In any case where resheathing of a needle is required:

- (a) the needle must be properly recapped, and
 - (b) the sheath must not be held in the fingers to recap, and
 - (c) either a single handed technique or forceps, or a suitable protective guard designed for the purpose, must be used.
- (5) Reusable sharps must, immediately after completion of the dental procedure, be placed in a puncture resistant container specially kept for that purpose and labelled as such.
- (6) Non-reusable sharps must, immediately after completion of the dental procedure, be disposed of in a puncture resistant container.

8 Management of waste

- (1) Clinical waste must be properly packaged to protect against potential exposure to infectious agents and to facilitate the proper handling, storage and treatment or disposal of the waste.
- (2) Splashing or contamination of skin while disposing of blood must be avoided as far as practicable.

9 Sterile medications and solutions

Except as provided by clause 13, multi-dose vials or ampoules must not be used to obtain sterile medications or solutions for injection or ingestion.

10 Invasive procedures

In cases where it is technically feasible, retractors (and not fingers) must be used for exposure and access during an invasive procedure where there is a risk of penetrating injury.

Part 3 Additional standards applying to the practice of dentistry in operating theatres

11 Application

The requirements set out in this Part are additional to the other requirements of this Schedule and apply when procedures are performed in an operating theatre.

12 Protective gowns and aprons and gloves

- (1) A gown or apron made of impervious material must be worn while performing any procedure where there is a likelihood of clothing being splashed or contaminated with blood or other body substances.
- (2) Gloves must be changed if separate procedures are being performed on the one

patient and there is a risk of infection from one part of the body to another.

13 Sterile medications and solutions

- (1) A medication or solution may be taken from a multi-dose vial or ampoule (or other similar container) only if the medication or solution is not readily available in another form.
- (2) If any medication or solution is taken from a multi-dose vial or ampoule, a sterile needle and syringe must be used to withdraw the contents.
- (3) The needle and syringe must be discarded once the needle and syringe have been used.
- (4) Precautions must be taken to ensure that the injection of contaminated material or fluid into a multi-dose vial or ampoule (or other similar container) does not happen.

Part 4 Processing of instruments and equipment

14 Prosthetic appliances

- (1) Any prosthetic appliance or material that is intended to be sent to a laboratory for processing must be rinsed clear of any debris and be disinfected before it is sent.
- (2) The prosthetic appliance or material must be cleaned and disinfected on its return from the laboratory before it is inserted into the mouth of a patient.

15 Cleaning of instruments and equipment

- (1) Any instrument or equipment that comes into contact with intact skin must be cleaned before it is used.
- (2) Any instrument or equipment that is required under this Part to be sterilised or disinfected must be cleaned before it is sterilised or disinfected.
- (3) The process of cleaning must involve water and mechanical or physical action (such as a washing machine or ultrasonic cleaner) and a cleaning agent.
- (4) All cleaning agents must be removed from instruments and equipment by rinsing before further processing.
- (5) In this clause, **cleaning agent** means a detergent and includes a proteolytic enzyme substance.

16 Disinfection of instruments and equipment

- (1) Any instrument or equipment that comes into contact with non-sterile tissue (other than intact skin) must be disinfected before it is used with a disinfectant specified in the Australian Register of Therapeutic Goods, and the relevant manufacturer's

instructions must be followed.

- (2) The process of disinfection must involve either thermal or chemical methods. Chemical disinfection may be used only in cases where thermal methods are unsuitable.

17 Sterilisation of instruments and equipment

- (1) Any instrument or equipment used to enter, or that is capable of entering, tissue that would be sterile under normal circumstances must be sterilised before it is used.
- (2) All dental hand pieces must be sterilised between patients.
- (3) The method of sterilisation must be compatible with the particular type of instrument or equipment.
- (4) If a steriliser is used (whether it is a benchtop/portable steriliser or a permanently plumbed or wired steriliser), the following criteria must be met:
 - (a) the relevant manufacturer's instructions must be followed,
 - (b) an ongoing monitoring program must be followed which reflects the requirements of Table 7.1 "STERILISER TESTS AND TEST FREQUENCIES" of Australian Standard AS 4187-1998.