



# Infection Prevention and Control (IPAC) Lapse Report

## Initial Report

Premise/facility under investigation:

Dr. M. Dhillon Periodontist Endodontist

Address:

675 King St E, Oshawa, ON L1H 1G4

Type of premise/facility: Dental Clinic

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### IPAC Lapse Details

Date board of health became aware of potential IPAC lapse: 2025-02-25

Date IPAC lapse was linked to premise/facility: 2025-02-26

Date of initial report posting: 2025-03-12

How the potential IPAC lapse was identified: Complaint

Summary description of the IPAC lapse:

Observed physical parameters for sterilization not being reviewed after every cycle and documentation missing. Observed missing chemical indicator monitoring results and biological indicator monitoring results in the sterilization logs. A biological indicator test was not completed for every cycle type and no control biological indicator was used. A biological indicator was placed directly into a sterilizer at least once. Observed type 5 chemical indicators missing in some sterilization packages, Bowie-Dick tests conducted weekly, and expired type 1 chemical indicator tape rolls. Observed manufacturer instructions not on-site for a sterilizer. For weekly ultrasonic cleaner tests, observed missing documentation and incorrect method of conducting the test. Observed the reprocessing sink used as a hand sink and expired alcohol-based hand sanitizer bottles. Observed processed packages with wet marks stored inside an operatory. Observed no record of reprocessing training for staff, missing IPAC policies, and stained roof tiles. Observed empty, used anesthetic vials discarded into empty disinfectant bottles or were sterilized without manufacturer instructions.

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### IPAC Lapse Investigation

Did the IPAC lapse involve a member of a regulatory college? Yes

If yes, was the issue referred to the regulatory college? Yes

Names of regulatory college and stakeholders notified:

Royal College of Dental Surgeons of Ontario

Concise description of the corrective measures required:

- Operator to ensure physical parameters are reviewed and recorded after each cycle
- Operator to ensure chemical indicator results (including Bowie-Dick tests) are reviewed and recorded after each cycle
- Operator to ensure biological indicator monitoring results are reviewed and recorded after each cycle
- Operator to ensure to record the weekly ultrasonic cleaner tests and conduct the test process correctly
- Operator to ensure a biological indicator test is conducted for every cycle type for each day the sterilizer is in operation
- Operator to ensure the reprocessing sink is only used for equipment cleaning
- Operator to provide and use alcohol-based hand sanitizer before the expiry date
- Operator to provide and use chemical indicators before the expiry date
- Operator to ensure type 5 chemical indicators are provided in every sterilization package
- Operator to ensure biological indicators are placed inside a process challenge device inside of the sterilizer
- Operator to ensure a control biological indicator from the same lot number as the test biological indicator and unexposed to sterilant is incubated each day that routine biological indicators are incubated
- Operator to ensure a Bowie-Dick test pack is done in an empty chamber every day the sterilizer is used
- Operator to ensure all processed packages that are wet or visibly soiled are considered contaminated and are reprocessed through a full reprocessing cycle
- Operator to ensure approved reprocessing training is provided for all staff involved in reprocessing
- Operator to ensure to provide relevant IPAC policies and procedures
- Operator to ensure roof tiles are kept in good repair
- Operator to ensure manufacturer instructions is on-site for equipment to be sterilized and all sterilizers
- Operator to ensure anesthetic vials are discarded in a sharps container

Date any order(s) or directive(s) were issued to the owner/operator:

2025-02-26, 2025-02-27, 2025-03-04, 2025-03-19, and 2025-03-26

## Final Report

Date of final report posting: 2025-04-01

Date all corrective measures were confirmed: 2025-03-26

Brief description of corrective measures taken: Inspections were conducted. Confirmed all requirements noted above were corrected.

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### **Final Report Comments and Contact Information**

Any additional comments: Operator education provided.

If you have any further questions, please contact the Durham Health Connection Line:

Telephone: 1-800-841-2729, or [email](#) us.