

**Clinical Establishment
Act
Standard for
Mobile Dental Van**

Standard No.CEA / Dental Mobile Van

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MINIMUM STANDARDS FOR MOBILE DENTAL VAN

DEFINITION Mobile dental van	
SCOPE SERVICES PROVIDED	Units may be towed or self-propelled, ranging from smaller, one-chair to two-chair units that can be used for examination, preventive and treatment services. MOBILE UNITS: Mobile units with more than one chair would generally be recommended for full treatment services
PHYSICAL INFRASTRUCTURE LOCATION	It is important to consider the size and practicality of the unit needed in relation to the locations it will be required to service. Appropriate access to a suitable site and services (concrete pad, electricity, clean and waste water, data and phone) must be available at each location.
SPACE REQUIREMENT	<ol style="list-style-type: none">1. In a self-propelled vehicle, a two-chair program requires a treatment area of a minimum of 18 square feet, plus a cab area of at least 7 square feet--generally a total of around 30 square feet.2. There must be a specific space for cleaning and sterilisation of dental instruments designated as STERILIZATION AREA to accommodate front loading autoclave and lab area to carry out minor prosthetic adjustment with washbasin and running tap water3. Dedicated area for storing patient's records or electronic health record (EHR)maintenance
OUTSIDE SIGNAGES	<ol style="list-style-type: none">1. name of the dental/medical college/hospital/charitable institute/NGO(to which the van belongs)
INSIDE SIGNAGES	<ol style="list-style-type: none">1. Name of dentist in charge2. Name of stationed doctors3. OPD hours4. Services provided5. Charges of the services offered6. Emergency contact number

	<p>7. Safety signages: to make the patient aware so as to inform treating doctor of any pre existing medical conditions</p>
<p>INFRASTRUCTURE</p>	<p>CONSIDERATIONS</p> <ul style="list-style-type: none"> • medical gases –oxygen(cylinder)-in case treatment services are being provided • floors and walls – these must be non-porous, without carpets, smooth and easily cleaned • lighting – natural/ high-intensity colour-corrected artificial lighting <p style="text-align: center;">FIXTURES</p> <ul style="list-style-type: none"> • dental chair minimum 2 dental chairs. • specialist fittings (eg, overhead light, x-ray unit, dental unit) • hand-washing facilities (elbow-touch taps or infra-red) • dental cabinetry and overhead cabinets • bins for general waste, clinical waste and sharps <p>PERSONAL HYGIENE AND PROTECTION</p> <p>Hand-washing facilities in every dental surgery are essential, and must not be combined with sinks used for other purposes, such as decontamination and instrument cleaning. Emphasis should be given to the use of hands-free facilities, where possible (eg, elbow or knee operated taps or infra-red-activated operating lights and hand-basin taps).</p> <p>Procedures must be implemented for the safe handling and appropriate disposal of contaminated materials and waste. Hands-free access to bins for paper and clinical waste is recommended</p> <p>ACOUSTICS Compressor should preferably not be kept in the working area</p> <p>LIGHTING colour-corrected light/natural</p> <p>SPECIFIC CONSIDERATIONS OF MOBILE DENTAL VAN</p>

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	<ul style="list-style-type: none"> •Chassis: a durable, watertight, reinforced floor is recommended. Insulation should provide the best possible protection from outside temperatures. • Levelling jacks: there should be one on each corner to provide stability when the unit is stationary. • Access: there should be at least one door for one –two dental chairs • Steps: these should be fold-away, lockable when in position, and incorporate a handrail. • Windows: tinted security windows are best, with insect screens and blinds. • Services: these will include a compressor, evacuator motor, water inlet, and pump for the base of the dental chair(s). • Mounting brackets: these are required for lights, the x-ray unit and dental unit. • Water supply: use a dual system so that town water can be used when available, plus storage tanks top/ beneath the vehicle floor (but protected from road damage). • Water filter: use a filter suitable for use in dental units, and locate this with the water pump. • Waste disposal: there should be an inbuilt waste water collection unit beneath the floor for collection of the generated waste water. If disposed outside, solid and water waste must comply with territorial local authority and regional council requirements where the unit will be operated. • Internal finishes: cabinetry and bench tops must be easily cleaned. • Sinks/basins: there should be a minimum of one clean and one dirty. <ul style="list-style-type: none"> • Equipment: must be properly secured to be protected from road shock and vibration, and wall-mounted x-rays and lights must be secure in-transit. Water and air lines must not leak, on-board power generators cannot make too much noise and/or vibration, and equipment must be properly placed to ensure there is adequate space for dentists and technicians to operate.
<p>HUMAN RESOURCES DOCTORS</p>	<p>1. Dental surgeons(BDS/MDS) on full time basis- 1-2 in number</p>
<p>TECHNICAL STAFF</p>	<p>1. Dental operating room assistant</p>

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	<ul style="list-style-type: none"> • one for a every 2 dental chairs installed • qualification: tenth pass • having 5 years working experience under a registered dental surgeon
NON TECHNICAL STAFF	GRADE IV staff employed full time.
Duty roster	Hospital/concerned authority for technical / non-technical staff
Periodic health check up, vaccination of staff	<ul style="list-style-type: none"> • Once in a year health check up of all the staff. • Mandatory hepatitis B vaccination of the staff.
EQUIPMENT (FUNCTIONAL) <ol style="list-style-type: none"> 1. Stethoscope 2. Thermometer- non mercury based 3. BP apparatus- non mercury based 4. Glucometer 5. Weigh machine 6. Emergency kit and medicine <ul style="list-style-type: none"> Oxygen cylinder Adrenaline Diphenhydramine Hydrocortisone Nitroglycerine Salbutamol Morphine Diazepam/ midazolam Asprin tablets Ambulatory bag 7. DEFIFIBRILLATOR- EITHER MECHANICAL OR AUTOMATIC 8. Consumables- should be available in adequate number. <ul style="list-style-type: none"> • Facemask • Gloves: both sterile and nonsterile • Cotton rolls • Gauze • 2cc and 5cc syringes with needles • Sutures- vicryl Silk • Lignocaine 2 percent with 1:200000 Adr and without adrenaline • Zinc oxide powder and eugenol liquid 	QUANTITY 1 1 1 1 1 2 ampules 2 ampules 2 ampules 2 ampules 2 ampules 2 ampules 2 ampules 1 1 1

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<ul style="list-style-type: none"> • Glass ionomer (powder and liquid) • Silver based GIC(powder and liquid) • Gum paint <p>9. DENTAL EQUIPMENT</p> <p>Dental operating unit Dental chair</p> <p>SUCTION UNIT</p> <p>AUTOCLAVE</p> <p>IOPA MACHINE</p>	<p>Either hydraulic/electric; with a back rest in movable trendelberg/reverse trendelberg position</p> <p>Either attached to dental chair/ separate; Should have a separate amalgam separation filter</p> <p>office-based front loading autoclave;</p> <ul style="list-style-type: none"> • Processing system and design – automation or manual; daylight loader/ RVG • IOPA machine should be approved by AERB. • 1 Lead apron and thyroid collar/ lead shield
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	<p>Maintenance of logbook mandatory which mentions the identity of the person radiographed, part exposed, date along with operator/ doctor's name and signatures</p>
<p>SUPPORT SERVICES</p>	
<p>ETHICS</p>	<p>To do no harm to do good(beneficence) veracity(truthfulness) confidentiality</p>
<p>BMW MANAGEMENT</p>	<p>Segregation of waste should be done in black, yellow and blue bags . It is mandatory to segregate the waste at the site of waste generation.</p> <p>BLACK BAGS:</p> <p style="padding-left: 40px;">Kitchen waste Carry bags Paper and packaging Disposable glasses/plates Leftover foods Bouquets</p>

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	<p>Thermocol</p> <p>YELLOW BAGS</p> <p>Human tissues Histopathology specimens Body parts and organs Soiled waste swabs, dressing, mops, bandages or items contaminated with blood Microbiology/ bio-technology waste</p> <p>BLUE BAGS</p> <p>Disinfected catheters Any other tubings I/V bottles I/V tubes Disinfected plastic drains Rubber/ latex gloves(mutilated and disinfected) Other plastic material</p> <p>Every dental chair installed will have its separate yellow bag. For 2 chairs there will be one black and one blue bag.</p> <p>There will be one needle destroyer in the mobile van.</p> <p>Contract for disposal of BMW should be given to a company approved by government of India/ ministry of environment/CPC.</p> <p>There should be a written contract for BMW management along with the economy involved.</p> <p>Logbook should be maintained mentioning weight of the waste(infected) and date on which waste (new/old) was lifted.</p>
RECORD MAINTENANCE AND REPORTING	Daily record keeping for incoming patients mentioning patient name, age, sex, date, services rendered along with treatment charges.
MLC	NA
CONFIDENTIALITY	“All that may come to my knowledge in the exercise of my profession or in daily commerce with men, which ought not be spread, I will keep secret and will never reveal”-Hippocratic oath

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STANDARDS ON PROCESSES	BASIC
INFECTION CONTROL	<ol style="list-style-type: none">1. Instruments sterilization and cleaning must not be executed inside the surgery room.2. There must be good supply of clean water, through a quality piping that support good water hygiene.3. All general purpose cleaning equipment and agents should be stored in a separate part of the premises4. There must be a specific space for cleaning and sterilisation of dental instruments and should not be used other than above.5. Use trash bin lined with commercial color coded plastic bag for the medical waste inside the surgery room.6. Needle destroyer must be used for disposable needles7. Keep cleaning equipment always in a very clean condition before use; type of floor sanitizing and cleaning agents must be approved for clinical use.8. Hands-free access to bins for paper and clinical waste is recommended9. Emphasis should be given to the use of hands-free facilities, where possible (eg, elbow or knee operated taps or infra-red-activated operating lights and hand-basin taps).10. Use of liquid soap (no soap bar) is mandatory11. There should be no cotton or wool fabric curtains in dental clinics.12. In door pets and natural plant inside the surgery room should be not permitted13. Non-wooden storage cabinet shall be used for storing cleaning equipment and agents14. An infection control protocol should be established to include an exposure control plan based on OSHA'S BLOOD BORNE PATHOGEN STANDARD. This is a written plan to minimize or eliminate occupational

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	<p>exposure.</p> <p>15.PROTECTIVE EQUIPMENT(PPE)such as labcoats, gowns ,facemask, gloves etc should be utilized.</p>
FACILITIES FOR HAND WASHING	<p>Hand-washing facilities in every dental surgery are essential, and must not be combined with sinks used for other purposes, such as decontamination and instrument cleaning. Emphasis should be given to the use of hands-free facilities, where possible (eg, elbow or knee operated taps or infra-red-activated operating lights and hand-basin taps). Use of liquid soap (no soap bar)is mandatory.</p>
FACILITIES FOR STERILIZATION	<p>Disinfectants- 2 percent glutaraldehyde, sodium hypochlorite, chlorhexidine etc</p> <p>Autoclave office-based; maintenance (self-contained with drier); availability of parts; door design; loading system; cylinder size; cycle-reporting system; validation and calibration system</p>
POLICY ON OUTSOURCED SERVICES	<p>Lab work can be outsourced</p> <p>BMW management, cleaning staff and pest control are some of the other services which can be outsourced</p>