



# **OSHA, HIPAA, & INFECTION CONTROL COMPLIANCE TRAINING**

Safety and Infection Control Products

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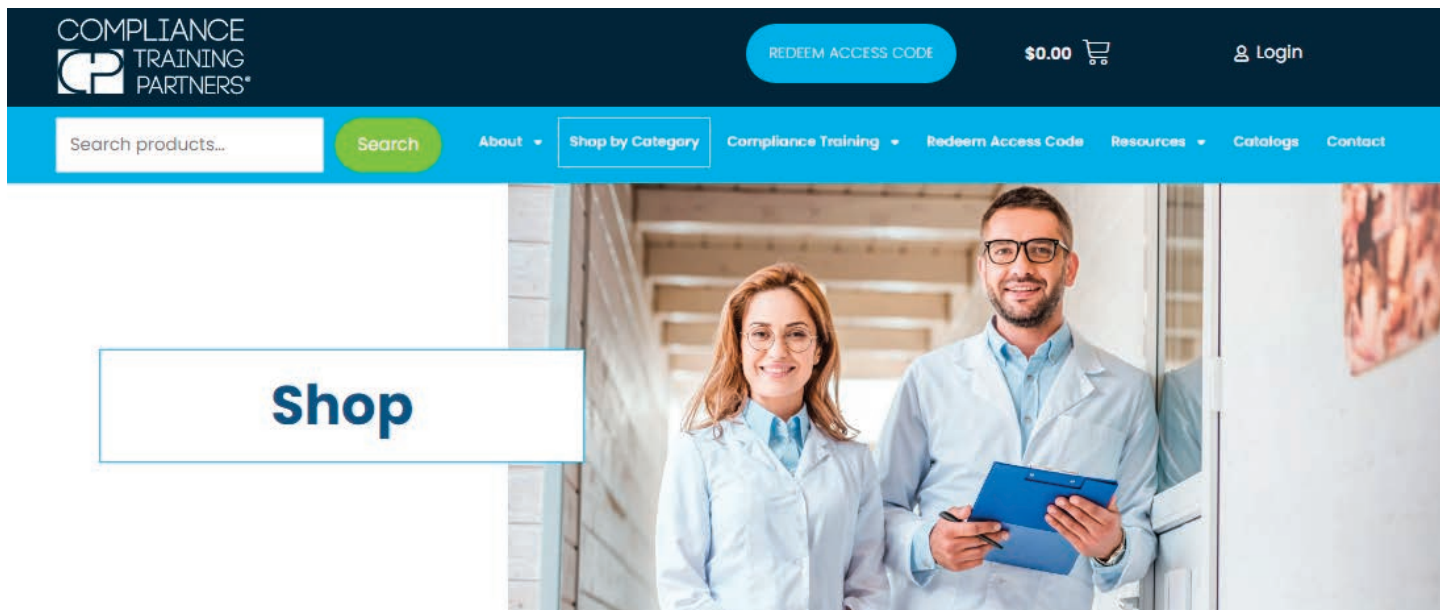


[ComplianceTrainingPartners.com](http://ComplianceTrainingPartners.com)

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### Top Sellers



Dental OSHA/Infection  
Control Compliance  
Program



Water Test Kit



Master Spill Kit



HIPAA Compliance  
System



OSHA & HIPAA Special  
Manuals

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A smiling female dentist with dark hair, wearing a white lab coat, is seated in a dental chair. She is holding a tablet computer in her hands. The background shows a dental office setting with cabinets. The entire image has a blue overlay. The text "Online Training Programs" is centered over the image in a white, bold, sans-serif font.

# Online Training Programs

# OSHA, Infection Control and HIPAA Compliance Made Easy with Compli™ Dent



At Compliance Training Partners, our training programs are designed to deliver genuine interactive content and features to maximize user comprehension in a single source. Train with the best and most experienced dental compliance experts on the rules and regulations of **OSHA, Infection Control, and HIPAA** through convenient, easy-to-follow online classes.

Compli™ Dent will help you and your practice effortlessly advance its compliance proficiency by training your entire dental team online and at your pace while earning valuable CE credit.



## With Compli™ Dent You Get Training:

- Exceptional, interactive education solutions for your entire team
- Informative, simple-to-understand material
- Flexible, convenient training options with fully online programs
- HIPAA training
- OSHA & Infection Control training
- Sexual Harassment training
- Fraud, Waste, and Abuse training
- Access to exclusive live CE webinars

## With Compli™ Dent You Get Oversight:

- Access to a centralized Compliance Dashboard for record-keeping of core areas of compliance such as weekly eyewash checks, monthly fire extinguisher checks, weekly spore testing of autoclaves, dental water unit testing and more
- Exclusive access to the Compli™ Dental Office Audit Checklist app, which enables you to do a detailed OSHA, HIPAA and Infection Control review of your entire facility
- Regional Manager oversight functions
- Centralized record-keeping of your team's compliance training certificates
- Professional License Vault: Store your state and federal licenses securely, with automated renewal reminders

## With Compli™ Dent You Get Support:

- On-demand, experienced compliance expert support via toll-free phone, email, and text
- Assistance in responding to OSHA and HIPAA inspections
- Guidance to required and recommended products

## Compli™ Dent Online Learning Center Yearly Subscription

COM1	1-4 locations	\$595 retail per location*
COM5	5-10 locations	\$495 retail per location*
COM11	11-24 locations	\$450 retail per location*
COM25	25-49 locations	\$399 retail per location*
COM50	50-74 locations	\$349 retail per location*
COM75	75+ locations	\$299 retail per location*

Compli™ Dent is sold as a yearly subscription service

*\*Compli subscriptions cover up to 25 individuals at a singular practice location. Additional user seats may be purchased for \$99/ten trainees*



# Total Office Compliance Made Easy with

## Compli™ Dent Plus

Do you need the unlimited training that comes with Compli™ Dent Plus but also need the required OSHA Compliance and Infection Control Manual? Compli™ Dent Plus will help you effortlessly advance compliance proficiency by training your entire dental team online and at your pace while earning valuable CE credit.

**12**  
CE Credits  
In States Where  
Applicable

### Your membership includes:

- OSHA, Infection Control & HIPAA required digital compliance manuals
- HIPAA required training
- OSHA required training
- CDC Infection Control required training
- Sexual Harassment training
- Access to exclusive live webinars
- GHS Hazardous Materials, Bloodborne Pathogens & HIPAA compliance wall charts
- Required Federal 6-in-1 Labor Law wall chart
- Required GHS Chemical, Biohazard & Radiation labels

### Gain access to oversight tools and support:

- Centralized Compliance Dashboard for record-keeping of core areas of compliance
- Compli™ Dental Office Audit Checklist app
- Regional Manager oversight functions
- Expert compliance support via toll-free phone, email, & chat
- Assistance in responding to OSHA and HIPAA inspections
- Guidance to required & recommended products
- Professional License Vault: Store your state and federal licenses securely, with automated renewal reminders

### Compli™ Dent Plus Online Learning Center Yearly Subscription

COM1P	1-4 locations	\$1,195 retail per location*
COM5P	5-10 locations	\$1,095 retail per location*
COM11P	11-24 locations	\$1,050 retail per location*
COM25P	25-49 locations	\$999 retail per location*
COM50P	50-74 locations	\$949 retail per location*
COM75P	75+ locations	\$899 retail per location*

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subscription service

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# OSHA, Infection Control, and HIPAA Compliance Made Easy with Compli™ Med



## Compli™ Med Online Learning Center Yearly Subscription

At [Compliance Training Partners](#), our training programs are designed to deliver genuine interactive content and features to maximize user comprehension in a single source. Train with the best and most experienced medical compliance experts on [OSHA, Infection Control, and HIPAA](#) rules and regulations through convenient, easy-to-follow online classes.

Compli™ Med will help your facility effortlessly advance its compliance proficiency by training your entire medical team online and at your pace.

COM1	1-4 locations	\$595 retail per location*
COM5	5-10 locations	\$495 retail per location*
COM11	11-24 locations	\$450 retail per location*
COM25	25-49 locations	\$399 retail per location*
COM50	50-74 locations	\$349 retail per location*
COM75	75+ locations	\$299 retail per location*

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*\*Compli subscriptions cover up to 25 individuals at a singular practice location. Additional user seats may be purchased for \$99/ten trainees*

### With Compli™ Med You Get Training:

- Exceptional, interactive education solutions for your entire team
- Informative, simple-to-understand material
- Flexible, convenient training options with fully online programs
- HIPAA training
- OSHA & Infection Control training
- Sexual Harassment training
- Fraud, Waste, and Abuse training

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- Regional Manager oversight functions
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- Guidance to required and recommended products



# Total Office Compliance Made Easy with

## Compli™ Med Plus

**Compli™ Med Plus will help you effortlessly advance compliance proficiency by training your entire medical team online and at your pace.**

### Your membership includes:

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- HIPAA required training
- OSHA required training
- CDC Infection Control required training
- Sexual Harassment training
- Access to exclusive live webinars
- GHS Hazardous Materials, Bloodborne Pathogens & HIPAA compliance wall charts
- Required Federal 6-in-1 Labor Law wall chart
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# ONLINE TRAINING PROGRAMS



## OSHA and Infection Control Made Easy Online Training Program

Required

OSHA requirements include an annual training session for all employees. This course will help fulfill these requirements and will update participants on the latest from OSHA, including the Globally Harmonized System (GHS) for Hazard Communication and the Bloodborne Disease Pathogens Standard. In addition, the course covers the Centers for Disease Control and Prevention Infection Control Guidelines.

### Other topics covered include

- Means of egress
- Ionizing radiation
- Electrical safety
- Fire safety and first aid
- Hazardous materials
- Ventilation
- Recordkeeping
- OSHA inspections

### Programs are per individual and include:

- Certificate of completion
- CEU certificate (Dental Clients Only)
- Toll-free telephone and online technical support
- Assistance with OSHA inspections



\*No returns on Online Training

**Includes OSHA Mandated Globally Harmonized System (GHS) Training!**

# OSHA DENTAL



Certificate of completion  
and 3 CEU's included  
with each view.

<b>STR/VPID</b> <b>STR/VPIDS</b>	Dental or Dental Spanish (1 view for 1 person and 1 certificate of completion)
<b>STR/VP6D</b> <b>STR/VP6DS</b>	Dental or Dental Spanish (6 views for 6 people and 6 certificates of completion)
<b>STR/VP10D</b> <b>STR/VP10DS</b>	Dental or Dental Spanish (10 views for 10 people and 10 certificates of completion)

# OSHA MEDICAL



Certificate of completion  
included with each view.

<b>STR/VPIM</b> <b>STR/VPIMS</b>	Medical or Medical Spanish (1 view for 1 person and 1 certificate of completion)
<b>STR/VP6M</b> <b>STR/VP6MS</b>	Medical or Medical Spanish (6 views for 6 people and 6 certificates of completion)
<b>STR/VP10M</b> <b>STR/VP10MS</b>	Medical or Medical Spanish (10 views for 10 people and 10 certificates of completion)

# CALIFORNIA DENTAL PRACTICE ACT



Certificate of completion and 3  
CEU's included with each view.

<b>CDPA01</b> <b>CDPA0S1</b>	Dental or Dental Spanish (1 view for 1 person and 1 certificate of completion)
<b>CDPA06</b> <b>CDPA0S6</b>	Dental or Dental Spanish (6 views for 6 people and 6 certificates of completion)
<b>CDPA10</b> <b>CDPAS10</b>	Dental or Dental Spanish (10 views for 10 people and 10 certificates of completion)



# CAL-OSHA DENTAL



Certificate of completion and 3  
CEU's included with each view.

<b>STRC/VP1D</b> <b>STRC/VP1DS</b>	Dental or Dental Spanish
(1 view for 1 person and 1 certificate of completion)	
<b>STRC/VP6D</b> <b>STRC/VP6DS</b>	Dental or Dental Spanish
(6 views for 6 people and 6 certificates of completion)	
<b>STRC/VP10D</b> <b>STRC/VP10DS</b>	Dental or Dental Spanish
(10 views for 10 people and 10 certificates of completion)	

# WA/OR OSHA DENTAL



Certificate of completion  
and 3 CEU's included  
with each view.

<b>STRWO/VP1D</b>	Dental
(1 view for 1 person and 1 certificate of completion)	
<b>STRWO/VP6D</b>	Dental
(6 views for 6 people and 6 certificates of completion)	
<b>STRWO/VP10D</b>	Dental
(10 views for 10 people and 10 certificates of completion)	

# ONLINE TRAINING PROGRAMS



## HIPAA Compliance Made Easy Online Training Program Required

This course is designed for all members of your team to educate on the requirements for HIPAA compliance.

### Topics include:

- Privacy Rule
- Security Rule
- Breach Notification Rule
- Enforcement Rule
- Omnibus Rule
- HITECH Amendment
- Hardware/software components
- Enforcement and Penalties
- Inspections

### Programs are per individual and include:

- Certificate of completion
- CEU certificate (Dental Clients Only)
- Toll-free telephone and online technical support
- Assistance with HIPAA inspections

\*No returns on Online Training.

\*CEUs available for dental clients only.



# HIPAA DENTAL



Certificate of completion and 2  
CEU's included with each view.

<b>HIP1AVD</b> <b>HIP1AVDS</b>	Dental or Dental Spanish (1 view for 1 person and 1 certificate of completion)
<b>HIP6AVD</b> <b>HIP6AVDS</b>	Dental or Dental Spanish (6 views for 6 people and 6 certificates of completion)
<b>HIP10AVD</b> <b>HIP10AVDS</b>	Dental or Dental Spanish (10 views for 10 people and 10 certificates of completion)

# HIPAA MEDICAL



Certificate of completion  
included with each view.

<b>HIP1AVM</b> <b>HIP1AVMS</b>	Medical or Medical Spanish (1 view for 1 person and 1 certificate of completion)
<b>HIP6AVM</b> <b>HIP6AVMS</b>	Medical or Medical Spanish (6 views for 6 people and 6 certificates of completion)
<b>HIP10AVM</b> <b>HIP10AVMS</b>	Medical or Medical Spanish (10 views for 10 people and 10 certificates of completion)

# ONLINE TRAINING



## Implicit Bias in Health Care

This training focuses on the effects of implicit bias and offers solutions to reduce the risk of implicit bias in health care offices.

**Through lecture and discussion, this training will teach trainees:**

- The definition and history of implicit bias
- The effects of implicit bias on health care
- How to recognize implicit bias
- Controversies around implicit bias
- Strategies to reduce implicit bias in health care offices

**IB1VD** (1 view for 1 person and 1 certificate of completion)

**IB6VD** (6 views for 6 people and 6 certificates of completion)

**IB10VD** (10 views for 10 people and 10 certificates of completion)

**3 CEU's included with each view for dental.**

## Sexual Harassment in the Healthcare Workplace

Sexual harassment is a type of workplace discrimination and has become a prominent topic of discussion. It is found in all industries, with the healthcare industry being no exception. All healthcare professionals should understand how to identify and react to workplace sexual harassment.

**Following the training, attendees will be able to:**

- Define and recognize sexual harassment
- Understand how to address abusive and unlawful harassment/conduct in the workplace
- Recognize various legal remedies available for victims of harassment
- Establish strategies for prevention and response to harassment
- Identify policies and documentation required for compliance
- Understand their role in preventing sexual harassment and that of their supervisors

**SH1VD** (1 view for 1 person and 1 certificate of completion)

**SH6VD** (6 views for 6 people and 6 certificates of completion)

**SH10VD** (10 views for 10 people and 10 certificates of completion)

**3 CEU's included with each view for dental.**



# ONLINE TRAINING



## Human Trafficking, Child Abuse and Neglect Awareness for Healthcare Professionals

It is currently estimated that 27.6 million adults and children are victims of human trafficking. This foundational course will allow healthcare providers to learn about human trafficking and aid them in determining where and why it occurs, as well as how to identify victims and intervene on their behalf.

### Following the activity, learners will be able to:

- Improve awareness and knowledge on the issue of human trafficking
- Define the types of human trafficking, its venues, and who it affects
- Recognize the warning signs of trafficking
- Identify techniques for screening and identification of human trafficking
- Identify resources for healthcare personnel to report trafficking and provide support to suspected victims

**HT1VD** (1 view for 1 person and 1 certificate of completion)

**HT6VD** (6 views for 6 people and 6 certificates of completion)

**HT10VD** (10 views for 10 people and 10 certificates of completion)

**3 CEU's included with each view for dental.**



## Fire Safety & Disaster Training

OSHA requires emergency training and evacuation procedures for all offices. This program provides training on these important issues, to assure workplace compliance and safety. Completion of training exam yields 2 CEUs for 6 individuals.\*

**FSD/VP** 6 views

# ONLINE TRAINING



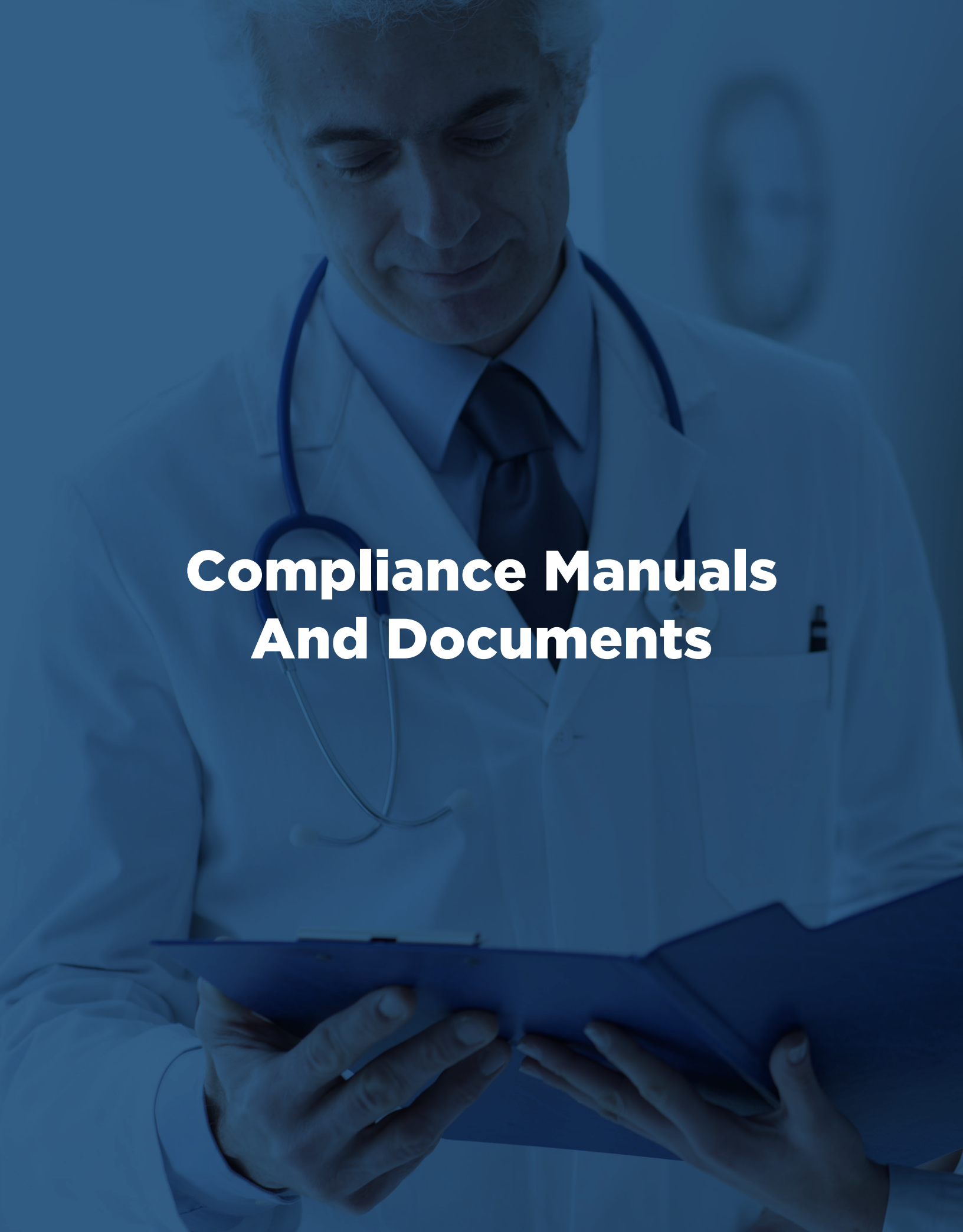
## Pain Management: The Responsibilities and Requirements of Prescribing Schedule II Opioids

This course is designed to educate dentists and dental hygienists on current principles and techniques for the management of pain and the prevention of opioid abuse. Topics and learning objectives include:

- Definition of pain
- Types of pain
- Physiology of pain
- Oral-facial pain disorders
- Drugs used to manage pain
- Prescribing strategies to reduce addiction potential
- Pain management techniques
  - Local anesthetics
  - Trigger point injections
  - Oral appliances
  - Non-traditional techniques
- Opioid awareness, the opioid crisis and addiction
- Characteristics of individuals with addiction issues
- Stages of substance abuse and typical behaviors
- Dental management strategies for addicted patients
- Post-operative pain strategies
- Regulatory requirements for prescribers
- Tools to control fear and anxiety
- Ergonomics and pain prevention for the dental team
- New products to manage pain and sensitivity

**PMIVD** (1 view for 1 person and 1 certificate of completion)

**3 CEU's may be earned after completing this course**

A photograph of a middle-aged man with grey hair, wearing a white lab coat over a light blue shirt and a dark tie. He has a stethoscope around his neck and is looking down at a clipboard he is holding with both hands. The image is overlaid with a semi-transparent blue filter. The text "Compliance Manuals And Documents" is centered in white, bold font.

# **Compliance Manuals And Documents**

# COMPLIANCE CHECKLIST

## Does Your Healthcare Facility Have What it Needs to be in Compliance?

Required	Recommended	Product Name	Code
●		OSHA Compliance/Infection Control Program-Dental	DCPE
●		OSHA Compliance/Infection Control Program-Medical	MCPE
●		HIPAA Compliance Program-Dental	HIP
●		HIPAA Compliance Program-Medical	HIPM
●		OSHA/Infection Control Annual Online Training Program-Dental	STR/VP6D
●		OSHA/Infection Control Annual Online Training Medical	STR/VP6M
●		Biohazard Warning Labels	BWL2
	●	Bloodborne Pathogen Poster	BCWC
●		Compliance Labeling Kit	CLK
●		Cough Etiquette Sign	CEPS
●		CPR Microshield	CPM
	●	Dental Unit Waterline Testing System	WTK-A
●		Dispose-Alloy™ Amalgam Recycling Program	ARPL
●		Eyewash Inspection Tags	EWIT
●		Eyewash Sign	ESP
●		Emergency Eyewash Station	EESE
●		Federal Labor Law Poster	LLP
●		Fire Extinguisher	RFE
●		Fire Extinguisher Sign	FES
	●	Fire Safety and Disaster Online Training Program	FSD/VP
●		First Aid Kit	FAK
●		Fluid-Resistant Laundry Bag with Stand	LBC
●		Formaldehyde and Glutaraldehyde Vapor Monitor	FMP1
●		Gloves-Nitrile Utility	NUG1M
●		Glow-In-The-Dark Exit Sign	EXS
●		Lab Case Disinfectant Labels	LCD100
●		Laser Safety Eyewear	LPE1
●		Master Spill Kit	MSK
●		Medical Gas Warning Sign	MGWS
	●	Needle Recapper (Single-Handed)	SHR1
	●	Nitrous Oxide Monitor	NOM1
●		Portable Eyewash Station**	EWP
●		Radiation Caution Labels	RCL
●		Safety Eyewear	FSG
	●	Scalpel Blade Remover	SBR1
	●	SDS Binder	SDSB
●		Sharps Kaddy-Small	SK1
●		Slip-On Side Shields	SS12
●		Sterilization Pouch Stamp and Pad	SPP1
●		Tooth Disposal System	TDS
●		X-Ray Monitoring Badge*	XXMBQ

\*X-Ray Monitoring is required in some states, but recommended in all.

\*\* For Mobile Units



## Meet Your In-Office Compliance Goals with the Compliance Training Partners App!

Gain valuable assistance in reaching your OSHA, HIPAA, and Infection Control compliance goals! This audit checklist app can help you:

- ✓ Identify your practice's compliance strengths and weaknesses
- ✓ Uncover ways to improve your overall compliance rating
- ✓ Determine specific needed compliance products
- ✓ Maintain a safe and healthy workplace

Each compliance audit report is designed to meet a specific need:

- ✓ OSHA Audit for Dentistry
- ✓ HIPAA Audit for Dentistry
- ✓ Infection Control Audit for Dentistry
- ✓ OSHA Audit for Medical Facilities
- ✓ HIPAA Audit for Medical Facilities
- ✓ Infection Control Audit for Medical Facilities



Download the **Compliance Training Partners app** today!

**Don't have an account with us yet?**

Sign up and create your account-- all within the app.



# COMPLIANCE PROGRAM



## OSHA Compliance and Infection Control Program

Required

The comprehensive OSHA Compliance and Infection Control Program covers all aspects of the Occupational Safety and Health Act as well as the CDC Infection Control Guidelines.

### Complete Program includes:

- Complete written training manual with all required documents and written policies are auto-populated with the name of your practice or business
- Complete Infection Control Program as outlined by the CDC
- Required written Exposure Control Plan
- Required written Hazard Communication Plan
- TB Compliance Program
- Workplace Violence Program
- Family and Medical Leave Act Compliance
- Sexual Harassment Policy requirements
- Comprehensive online training program for 3 individuals (additional views available for purchase)
- 3 Continuing Education Units each for 3 individuals after exam completion (Dental Clients Only)
- Assistance with OSHA Inspections
- Toll-Free telephone and online technical support
- GHS Hazardous materials wall chart
- Required Federal Labor Law wall chart
- Upgrade Service (1 year)
- Required product labels which includes:
  - **40** 2.5" x 2.5" GHS labels
  - **8** 4" x 4" GHS labels
  - **20** 2" x 2" Biohazard labels
  - **10** 4" x 4" Biohazard labels
  - **5** 1.5" x 4" Radiation labels
- Additional online training views available.  
See pages 11-14.



<b>MCPE</b>	Medical
<b>MCPE-S</b>	Medical Spanish

<b>DCPE</b>	Dental
<b>DCPE-S</b>	Dental Spanish

# COMPLIANCE PROGRAM

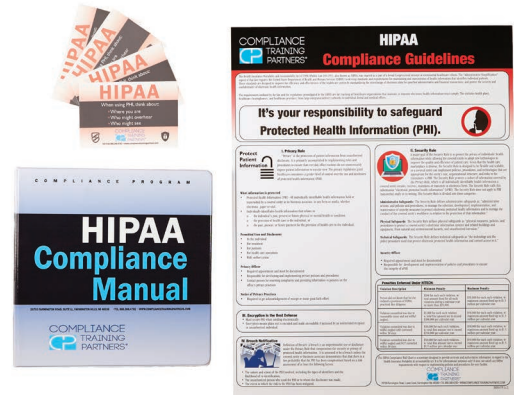


## HIPAA Compliance Program Required

The Health Insurance Portability and Accountability Act (HIPAA) requires that all healthcare providers adhere to a specific set of security and privacy standards. The CTP HIPAA Compliance Program provides everything your office needs to meet these requirements:

### Complete Program includes:

- A comprehensive compliance manual
- All required documents and written policies are auto-populated with the name of your practice or business
- Required Notice of Privacy Practices
- HIPAA consent forms
- Comprehensive online training program for 3 individuals (additional views available for purchase)
- 2 Continuing Education Units each for 3 individuals after exam completion (Dental Clients Only)
- Assistance with HIPAA Inspections
- Toll-Free telephone and online technical support
- Laminated wall chart of regulations
- **4** 4" x 6" Compliance warning labels with re-usable cling back
- Upgrade Service (1 year)
- Additional online training views available. See pages 15-16.



<b>HIP</b>	HIPAA Compliance System (Dental)	<b>HIP-S</b>	HIPAA Compliance System (Dental) Spanish
<b>HIP-M</b>	HIPAA Compliance System (Medical)	<b>HIP-MS</b>	HIPAA Compliance System (Medical) Spanish

# COMPLIANCE PROGRAM



## OSHA & HIPAA Special Manuals Required

For offices that have outdated manuals, these manuals include a one (1) or two (2) year upgrade service. DOES NOT include online staff training, wall charts or labels.



<b>DCM1</b>	Dental OSHA Manual/ 1 yr Upgrade Service
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<b>MCM1</b>	Medical OSHA Manual/ 1 yr Upgrade Service
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<b>DCM2</b>	Dental OSHA Manual/ 2 yr Upgrade Service
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<b>MCM2</b>	Medical OSHA Manual/ 2 yr Upgrade Service
-------------	--

<b>HCM1</b>	Dental/Medical HIPAA Manual/1yr Upgrade Service
-------------	--

<b>HCM2</b>	Dental/Medical HIPAA Manual/2yr Upgrade Service
-------------	--



A man with a beard and mustache, wearing safety glasses and a blue long-sleeved shirt, is smiling. He is wearing white gloves on his hands, which are crossed in front of him. The background is a blurred industrial setting with white louvered doors. The entire image has a blue color overlay.

# **Spill Kits & Utility Gloves**

# SPILL KITS



## Master Spill Kit Required

This kit combines all of the Biological, Chemical and Mercury Spill Kit Materials.

### The complete kit includes:

- BioSponge® powder
- ChemSponge® powder
- MercSponge® powder
- 1 Mercury magnet
- 1 Mercury scrubber
- 1 Pair reusable nitrile gloves
- 1 Pair safety goggles
- 1 Scooper and pan
- 3 Masks
- 5 Biohazard warning labels
- 3 Biological waste disposal bags
- 3 Chemical waste disposal bags



**MSK**

**SPR** Scooper & Pan Refill

## Mercury Spill Kit Required

Mercury hazards are eliminated with the use of this kit, which contains MercSponge® powder that binds mercury with a ferrous metal for easy pick-up with an included magnet.

### The complete kit includes:

- MercSponge® powder
- 1 Mercury magnet
- 1 Mercury scrubber
- 1 Pair reusable nitrile gloves
- 1 Pair safety goggles
- 3 Masks
- 3 Disposal bags
- 5 Biohazard warning labels



**MESK**

**MER** MercSponge® refill (10 oz.)

**MSR** Mercury Magnet & Scrubber



# SPILL KITS



## Biological Spill Kit Required

Eliminates the hazards of blood and other body fluids spills. This kit contains BioSponge® powder that solidifies the spill, making clean-up quick and easy.

### The complete kit includes:

- BioSponge® powder
- 1 Pair reusable nitrile gloves
- 1 Pair safety goggles
- 1 Scooper and pan
- 3 Masks
- 5 Biohazard warning labels
- 3 Biological waste disposal bags



**BISK**

**BIOR** BioSponge® refill (8 oz.)

## Chemical Spill Kit Required

Designed to handle spills of potentially hazardous liquids (disinfectants, acids, developer, fixer, etc.). This kit includes ChemSponge® powder to easily contain and absorb chemical spills.

### The complete kit includes:

- ChemSponge® powder
- 1 Pair safety goggles
- 1 Pair reusable nitrile gloves
- 1 Scooper and pan
- 3 Masks
- 5 Biohazard warning labels
- 3 Chemical waste disposal bags



**CHSK**

**CEMR** ChemSponge® refill (16 oz.)

# SPILL KITS



## Chemo Spill Kit Required

This kit contains ChemoSponge® powder to manage chemotherapy medication spills.

### The complete kit includes:

- ChemoSponge® powder
- 3 Gowns
- 3 Pairs of shoe covers
- 1 Pair safety goggles
- 6 Pairs of chemo gloves
- 3 Absorbent pads
- 1 Scooper and pan
- 3 Disposable N95 respirators
- 6 Yellow chemo disposal bags



**KESK**

**CSP** ChemoSponge® refill (8 oz.)

## Nitrile Utility Gloves Required

When cleaning instruments, disinfecting treatment rooms or working with chemicals such as acids or corrosives (disinfectants/solvents/fixer), OSHA regulations require the use of this type of glove. These reusable nitrile gloves will help keep your office in compliance. Available in sizes XS (6) to XL (10). Actual sizes are slightly larger than normal.

**Elbow Length** - Available in M or L

<b>NUG1XS</b>	1 pair pack
<b>NUG1S</b>	1 pair pack
<b>NUG1M</b>	1 pair pack
<b>NUG1L</b>	1 pair pack
<b>NUG1XL</b>	1 pair pack
<b>*NUG12</b>	12 pair pack

\*Specify size

<b>NUGE1M</b>	1 pair pack
<b>NUGE1L</b>	1 pair pack





# **Monitoring Programs**

# MONITORING PROGRAMS



## Aquasafe® Dental Unit Waterline Testing System Required

### The Importance of Testing Your Dental Unit Water

At Compliance Training Partners, we feel that quarterly testing of your dental unit water is a must. Why? All major equipment manufacturers recommend it and the CDC states that manufacturers recommendations must be followed. In addition, the ADA recommends routine testing as does the EPA and ADS. Not only is it truly the right thing to do, it is necessary to protect your business from liability. With the CDC stating that levels of bacteria must be below 500 Colony Forming Units (CFUs) and the ADA saying they must be below 200 CFUs, it is important that you know the number of CFUs for each of your operatories.

This easy-to use kit provides in-office results and describes how to resolve a poor reading. In addition, the kit provides assistance with establishing systems for continued compliance.

### Features include:

- In-office reporting
- Helps to meet CDC Guidelines
- Protects patients

WTK-A	1 Unit
WTK-B	4 Units
WTK-C	8 Units
WTK-D	12 Units
WTK-E	24 Units



# MONITORING PROGRAMS

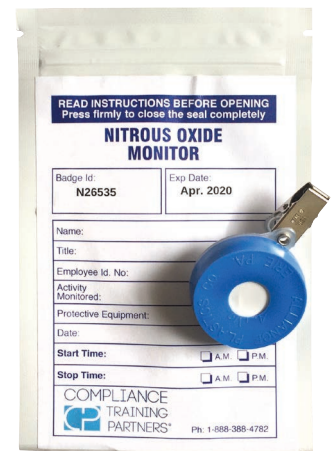


## Nitrous Oxide Monitor

Nitrous oxide levels should be maintained below a time weighted average (TWA) of 25 ppm in operating rooms and 50 ppm in dental treatment areas, according to OSHA regulations, and monitoring is recommended at least quarterly according to NIOSH (National Institute for Occupational Safety & Health). This service provides accurate, and affordable results and includes a mail-in envelope for sending monitor to our certified lab for analysis.

<b>NOM1</b>	1 Unit
<b>NOM2</b>	2 Units
<b>NOM3</b>	3 Units
<b>NOM4</b>	4 Units

\*No returns on Nitrous Oxide Monitors

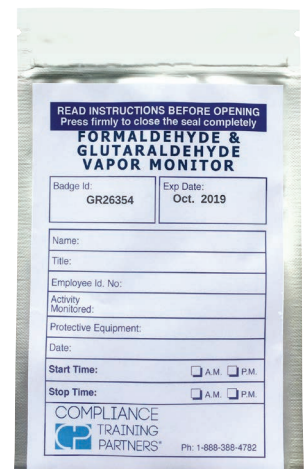


## Formaldehyde and Glutaraldehyde Vapor Monitor Required

This monitor can be used to measure personal exposure or room concentrations of both Formaldehyde and Glutaraldehyde. The monitoring badge will be accepted as accurate in any inspection or dispute because it is validated for accuracy and analyzed by our American Industrial Hygiene Association (AIHA) accredited laboratory. Each employee who uses Formaldehyde and/or Glutaraldehyde as a regular part of their job, including handling, packaging or mailing of biopsy specimens must have their exposure monitored.

<b>FMP1</b>	1 Unit
<b>FMP2</b>	2 Units
<b>FMP3</b>	3 Units
<b>FMP4</b>	4 Units

\*No returns on Formaldehyde and Glutaraldehyde Vapor Monitors





# MONITORING PROGRAMS



## Ethylene Oxide Vapor Monitor Required

The Ethylene Oxide Monitor can be worn as a badge or placed in the breathing zone as an area monitor. Occupational safety standards are based on personal exposure monitoring of each employee who may be exposed to the vapor as a regular part of their job. Periodic monitoring of personal and room concentrations is required.

<b>EOM1</b>	1 Unit
<b>EOM2</b>	2 Units
<b>EOM3</b>	3 Units
<b>EOM4</b>	4 Units

\*No returns on Ethylene Oxide Vapor Monitors



## Anesthetic Vapor Monitor

Provides simultaneous measurement of waste anesthetic gases including Sevoflurane, Isoflurane, Enflurane, Halothane, Desflurane and Methoxyflurane. Occupational safety standards are based on personal exposure monitoring of each employee who may be exposed to the vapor as a regular part of their job.

<b>AGM1</b>	1 Unit
<b>AGM2</b>	2 Units
<b>AGM3</b>	3 Units
<b>AGM4</b>	4 Units

\*No returns on Anesthetic Vapor Monitors





# MONITORING PROGRAMS



## X-RAY Monitoring Service

Experts agree that there is no safe level of radiation and even the smallest dose may cause cancer or genetic damage. Any healthcare facility may be exposing staff to unsafe levels of radiation. That's why accurately measuring and recording radiation exposure over the long term is important for your employees and your practice. The RDC Dosimeter with state-of-the-art Optically Stimulated Luminescence (OSL) technology, has the highest sensitivity available today — 10 times the sensitivity of competitive dosimeters!

### Features include:

- Fastest reporting in the industry—five day average turnaround
- A lifetime exposure record is archived for safekeeping
- Personalized badges
- Web-based reporting
- Protects pregnant workers
- Yearly renewal program

<b>XXMBM</b>	Monthly Badge Service
<b>XXMBQ</b>	Quarterly Badge Service
<b>XMBF</b>	Fetal Badge Service (7 months)

\*No returns on X-RAY Monitoring badges



**To order Radiation Monitoring Badges - Please call 512-831-7000 ext 1 or  
email [Sales-sdr-ae@radetco.com](mailto:Sales-sdr-ae@radetco.com)**

# SERVICES



## Dispose-Alloy™ Amalgam Recycling Program Required

CTP provides a complete solution to comply with federal, state and local laws regarding amalgam recycling. Your amalgam waste is recycled at a US EPA certified facility and we provide the required \*annual proof of compliance for amalgam recycling.

- Choose a 2.5 or 5 Gallon Storage/Shipping Container
- Return Shipping Carton
- FREE On-Demand Pickup and Pre-Paid Shipping\*\*
- Waste Recycled at a US EPA Certified Facility
- Compliance Certification
- Includes a detailed OSHA and Infection Control audit program!

\*Compliance for Amalgam Recycling varies from state to state. Most states recommend following the ADA's Best Practices for Amalgam Recycling. This service complies with these guidelines.

\*\* Free shipping only within the continental US (container must be returned within 12 months from date of purchase)



<b>ARPS</b>	2.5 Gallon Package
<b>ARPL</b>	5 Gallon Package

\*No returns on Dispose Alloy™ Amalgam Recycling Programs.

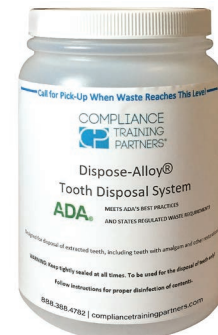
## Tooth Disposal System Required

Proper disposal of extracted teeth poses a problem for most dental practices. The CTP Tooth Disposal System consists of a half-gallon container that includes return and disposal at our EPA approved facility. The system allows for compliance with states' regulated waste disposal laws and ADA best practices.

- Includes a detailed OSHA and Infection Control audit program!

**TDS**

\*No returns on the Tooth Disposal System.



A portrait of a smiling Black man wearing a white lab coat over a blue button-down shirt. A white face mask is pulled down below his chin. The image has a blue tint overlay. The text "Safety/Infection Control Products" is centered in white.

# **Safety/Infection Control Products**

# SAFETY / INFECTION CONTROL PRODUCTS



## SDS Binder Required

OSHA requires you to maintain Safety Data Sheets (SDS) for all hazardous chemicals/materials in your facility. In general, every powder, liquid or cream in your office requires a SDS. This SDS Binder is designed to organize your SDS library in an OSHA compliant manner. It features a durable cover, heavy-duty D-rings, alphabetical tabs, and instructions for organization.

**SDSB** Binder



## Contaminated Instrument Kaddy-Small Required

This durable plastic kaddy is specifically designed to carry contaminated sharp instruments between treatment areas and the sterilization area, as required by OSHA. It has a handy attached carrying handle and is affixed with the universal biohazard symbol. Each operatory or treatment room should have a closable container such as this to transport used/contaminated instruments to the sterilization area.

**SK1** 11<sup>1</sup>/<sub>2</sub>" x 5" x 4"

# SAFETY / INFECTION CONTROL PRODUCTS



## Contaminated Instruments Kaddy-Large Required

This sturdy red plastic container is designed to carry up to 3 large instrument cassettes containing contaminated instruments from the operatory to the sterilization/instrument processing area, as required by OSHA. The universal biohazard symbol is prominently placed on the outside of the container.

**SK2** 17" x 12<sup>1/2</sup>" x 4<sup>1/2</sup>"

## Disposable Ear Plugs



When noise levels in the workplace reach or exceed 85 decibels, for 8 hours or more, a "Hearing Conservation Program" is required by OSHA. These comfortable foam latex-free ear plugs help meet this requirement.

**DEP24** 24 pair

# Safety Eyewear for Your Patients and Healthcare Team



Providing safety eyewear for your team is required by OSHA. Finally — an affordable, fog-free, OSHA compliant eyewear, designed to provide safety and modern design for the entire healthcare team! These ANSI Z87 approved safety glasses are also the perfect choice to provide protection for your patients, as the standard of care is to provide safety eyewear for all patients.

## Eurotech Milan

These high-style, frameless design glasses ensure comfort and protection, while meeting all OSHA and ANSI Z87 requirements for protective eyewear. Available in three unique designer colors, these fog-free glasses are sure to be the most comfortable and stylish safety eyewear you have ever worn!

SPECIFY: Pastel Pink, Lavender Dream, or Mellow Yellow.

<b>FSG</b>	One pair
<b>FSG6</b>	Six pair
<b>FSG10</b>	Ten pair



Pastel Pink



Lavender Dream



Mellow Yellow



# SAFETY / INFECTION CONTROL PRODUCTS



## Eurotech Honfleur

Offering a comfortable fit and high style, these lightweight, fog-free safety glasses are designed specifically for the healthcare team and their patients!

SPECIFY: Ebony, Ebony With Red, Ebony With Blue

<b>ASG</b>	One pair
<b>ASG6</b>	Six pair
<b>ASG10</b>	Ten pair



**Ebony**



**Ebony With Blue**



**Ebony With Red**



**AFC** 2 Oz. Spray Bottle

## Anti-Fog Protective Eyewear Cleaner

This unique product is designed to effectively clean your safety glasses and face shields, while reducing fogging. Leaving no streaks, it ensures a solution to the fogging problem inherent with wearing masks in healthcare facilities. The product is designed to be compatible with the plastics found in protective eyewear, eliminating the problems associated with other products that etch, soften and discolor them.

# SAFETY / INFECTION CONTROL PRODUCTS



## LaserShields® Protective Eyewear Required

The human eye can be permanently injured from exposure to laser energy. Retinal damage occurs from exposure to 400-1400 nm, while corneal or lens damage occurs from 190 nm-400 nm and 1400-1000 nm. For this reason, OSHA requires the use of laser protective eyewear for all employees exposed to laser energy.

All LaserShields® are made in the USA and come with a lifetime warranty.

### LaserShield® Universal

This attractive design provides a universal fit that is comfortably worn alone or over prescription glasses. Available in black only.

**LPE1** 1 pair



### LaserShield® Magnification

For many laser procedures, clinician's desire increased magnification. The LPE 2 features not only an attractive and comfortable design, but is fitted with a 2.5X magnifying insert.

**LPE2** 1 pair



# SAFETY / INFECTION CONTROL PRODUCTS



## Side Shields Required

These durable side shields slip on to your glasses, providing the protection required by OSHA regulations.

<b>SS1</b>	1 pair pack
<b>SS12</b>	12 pair pack



## Vented Safety Goggles Required

These plastic goggles are designed to fit over most personal eyewear. They are vented for free air flow, fog free, and provide protection against spray, splash or projectile injury.

<b>VSG</b>	1 Pair
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# SAFETY / INFECTION CONTROL PRODUCTS



## Choosing an Eyewash

OSHA requires an eyewash to be located “within the work area for emergency use.” ANZI-Z358.1-2004:6.4.2 states, “It is the installer’s responsibility to ensure that combination units shall be in accessible locations that require no more than 10 seconds to reach.” Water temperature delivered by emergency equipment should be “tepid”. Tepid is defined to be between 60°F (16°C) and 100°F (38°C).

To accomplish this, you should always purchase an eyewash with an “eliminator valve”, unless you have the eyewash attached to a faucet that is ONLY used for eyewash purposes and the water is pre-adjusted to only allow “tepid” water. Wall mounted models are a good choice when you desire a dedicated eyewash station. Portable eyewashes provide a simple solution if you have a mobile clinic operation.

### Aquasafe® Emergency Eyewash Station Required



This unit features an automatic shut-off valve and easily attaches to standard faucets with a removable aerator. This device is designed to meet all OSHA requirements and ANSI standards.

<b>ESE</b>	Emergency Eyewash Station w/Eliminator Valve
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<b>EES</b>	Emergency Eyewash Station
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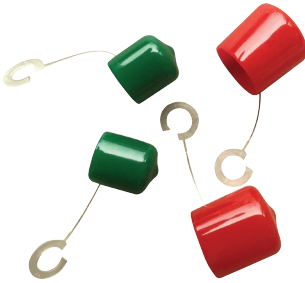
### Aquasafe® Emergency Eyewash Station Angled Required

This unit features an automatic shut off valve and easily adapts to gooseneck faucets with a removable aerator. This unit meets all OSHA requirements and ANSI standards.

<b>ESEA</b>	Emergency Eyewash Station w/Eliminator Valve
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<b>EESA</b>	Emergency Eyewash Station Angled
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# SAFETY / INFECTION CONTROL PRODUCTS



## Aquasafe® Eyewash Caps

These caps are designed to replace broken or lost caps on the CTP eyewash.

<b>EESAC</b>	Red 1"
<b>EESC</b>	Green 3/4"



## Aquasafe® Eyewash Sign Required

This large durable plastic sign draws attention to the location of your eyewash station and meets all OSHA requirements for eyewash signage.

<b>ESP</b>	11" x 7"
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## Aquasafe® Eyewash Label Required

This adhesive backed label mounts securely to walls or cabinets, and meets OSHA requirements for eyewash signage.

<b>ESL</b>	3 1/2" x 4"
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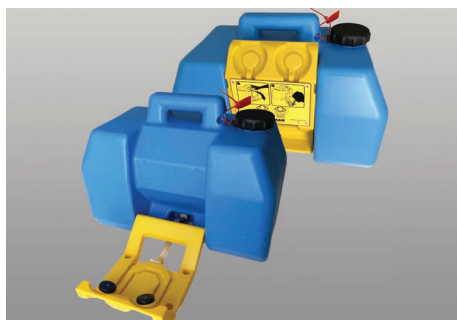
# SAFETY / INFECTION CONTROL PRODUCTS



## Aquasafe® Wall-Mounted Eyewash Station Required

This durable unit is designed to function as a stand-alone unit and must be plumbed to a dedicated water line.

WMEU



## Aquasafe® Portable Eyewash Station Required

Most portable eyewash stations do not comply with OSHA regulations. This quality unit meets all requirements, providing adequate amounts of water to both eyes in the event of an emergency.

EWP



## Bacteriostatic Preservative

Bacteriostatic preservative for use in portable eyewash stations. One 8 oz. (148 ml) bottle will preserve up to 20 gallons (18.9 to 75.7 L) of water for up to three months, with a shelf life of 3 years. Four bottles per carton.

BSP



# SAFETY / INFECTION CONTROL PRODUCTS



## Aquasafe® Eyewash Inspection Tags **Required**

OSHA regulations state that each eyewash station in your facility must be inspected weekly. These waterproof tags are designed to be attached directly to the eyewash and provide ample space to record your weekly inspections. Includes 5 labels and attachments.

**EWIT**



## Eliminator Valve Adapter

OSHA inspectors have the authority to cite and fine workplaces where the possibility of scalding exists. If your eyewash unit is connected to a sink with both hot & cold running water, you must install a device to regulate the water temperature. This Eliminator Valve complies with OSHA requirements when attached to a conventional eyewash station.

**EVA**



## CPR Pocket Microshield **Required**

This latex-free CPR Microshield meets today's health concerns. The soft barrier membrane conforms to the face and has a unique anti-flex one way valve to prevent contact with oral secretions. The bite block valve allows a positive airway in the head-tilt/chin-lift CPR technique. The kit also includes safety gloves and antiseptic towelettes.

**CPM**

# SAFETY / INFECTION CONTROL PRODUCTS



## Single Handed Needle Recapper

Our needle recapper is designed to minimize risk of accidental needle sticks. The design adapts to any needle type and is useful in every operatory or treatment room.

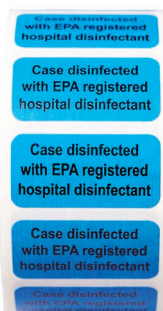
<b>SHR1</b>	1 unit
<b>SHR6</b>	6 units



## Scalpel Blade Remover

This “Blade Mate” remover is designed to eliminate scalpel blade cuts. The blades drop safely into the sealed reservoir (stores approximately 100 blades). When full, simply drop into your regular sharps container.

<b>SBR1</b>	1 unit
<b>SBR6</b>	6 units
<b>SBR12</b>	12 units



## Lab Case Disinfection Labels Required

The Centers for Disease Control (CDC) states that all outgoing dental lab cases must be disinfected and labeled as such. These adhesive-backed labels are designed to comply with the CDC guidelines and provide reassurance to those individuals who may handle these lab cases, on the receiving end.

<b>LCD100</b>	1 1/2" x 3/4" Roll of 100
<b>LCD500</b>	1 1/2" x 3/4" Roll of 500

# SAFETY / INFECTION CONTROL PRODUCTS



## Sterilization Pouch Stamp and Pad

According to CDC infection control guidelines, sterilization packaging must have, at a minimum, “the date ...and device used, on the outside of the packaging material.” This stamp is designed to fulfill these requirements by combining it with non-toxic ink pads that will withstand the heat, pressure and moisture levels of an autoclave or dry heat sterilizer. Assigning only one color per autoclave allows for easy recall of instrument packages in the event of a failed spore test. Five colors of ink are available.

<b>SPPI</b>	1 stamp + 1 black ink pad
<b>SPP2</b>	2 stamps + 1 black ink pad + 1 red ink pad
<b>ICS</b>	Sterilization date stamp
<b>NTPN</b>	Black colored ink pad
<b>NTPR</b>	Red colored ink pad
<b>NTPB</b>	Blue colored ink pad
<b>NTPG</b>	Green colored ink pad
<b>NTPP</b>	Purple colored ink pad



## First-Aid Safety Kit Required

This first-aid kit is designed specifically for your employees. All basic first-aid supplies required for workplace compliance are included in this durable kit.

**FAK**

# SAFETY / INFECTION CONTROL PRODUCTS



## Laundry Bag & Stand Required

OSHA’s Bloodborne Pathogens Standard mandates that “contaminated” laundry be placed in bags that are marked with a Biohazard symbol. This sturdy washable fluid-resistant bag features a nylon drawcord, attached handles and is imprinted with the Biohazard symbol.

<b>LB</b>	Laundry Bag
<b>LBS</b>	*Laundry Bag Stand
<b>LBC</b>	Bag & Stand Combo

\*Stand is designed to be used with LB Laundry Bag only.



## Fire Extinguisher - ABC Rated Required

This commercial device is designed for use in areas of up to 3,000 square feet and meets all requirements for any health facility. It can be used for paper, gas, wood, flammable liquid or electrical fires.

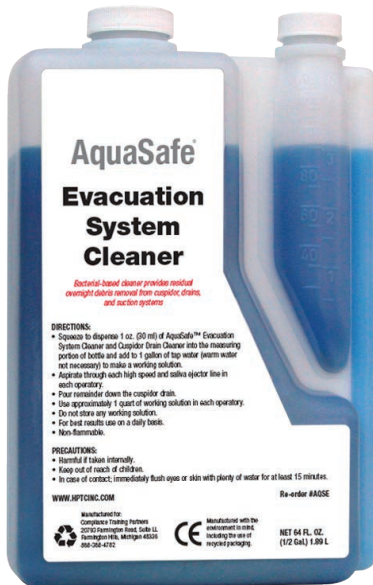


## Fire Extinguisher Inspection Tags Required

OSHA regulations state that fire extinguishers must be inspected monthly, and that this inspection must be documented. These waterproof tags are designed to be attached to your fire extinguisher and provide ample space to record your monthly inspections. Includes five labels and attachments.



# SAFETY / INFECTION CONTROL PRODUCTS



## AquaSafe® Evacuation System Cleaner

A bacterial-based cleaner which is safe for equipment, the environment and staff.

- Bacterial-based cleaner provides residual over-night debris removal from cuspidor drains and suction systems
- Works under all conditions, even in cold water
- Neutral pH, safe for amalgam separators and traps
- Aquasafe® leaves a fresh and clean scent at the traps and throughout the entire evacuation system
- Environmentally friendly 6 non-pathogenic bacteria provides safe and natural cleaning power
- AquaSafe® ensures a level of protection that cannot be matched by other evacuation system cleaners that simply mask odors

Incredibly Economical-256 one-quart treatments per gallon!

**AQSE** 64 oz. bottle



## AquaSafe® Enzymatic Cleaner

Enzymatic Ultrasonic and Instrument Pre-Soak Solution

AquaSafe® Enzymatic Ultrasonic and Instrument Pre-Soak Solution is a highly effective and compliant enzymatic solution. It cleans blood, tissue, mucus, and other debris from instruments, burs, endodontic files, crowns, bridges, dentures, partial dentures and orthodontic appliances. The product also allows for full compliance with EPA requirements by having a neutral pH, utilizing enzymatic action rather than harsh chemicals.

**AEC** 1 Gallon Bottle

\*Prices are subject to change.

# SAFETY / INFECTION CONTROL PRODUCTS



## Infectious Waste Bags Required

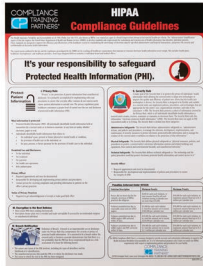
These sturdy high quality red bags are imprinted with the universal Biohazard symbol making them safe for regulated medical waste disposal in all States. Available in three sizes.

Certified for Florida Disposal Requirements.

<b>IWB4</b>	4 gal. 25 per roll
<b>IWB10</b>	10 gal. 25 per roll
<b>IWB30</b>	30 gal. 20 per roll



# LAMINATED WALL CHARTS



## HIPAA Compliance Wall Chart

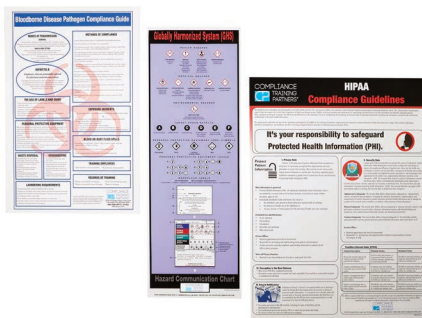
This comprehensive HIPAA Wall Chart is a great way to keep your office staff aware of the most important aspects of the HIPAA regulations. It is laminated, and is divided into sections in accordance with the regulations. A must for every office!

**HWC** 17" x 23"

## Wall Chart Combo

No office should be without these wall charts, which all employers agree make the job of training simpler and faster. This product includes our three most popular wall charts:

- GHS Hazardous Materials Wall chart 17" X 35"
- HIPAA Compliance Wall chart 17" X 23"
- Bloodborne Compliance Wall chart 13" X 19"

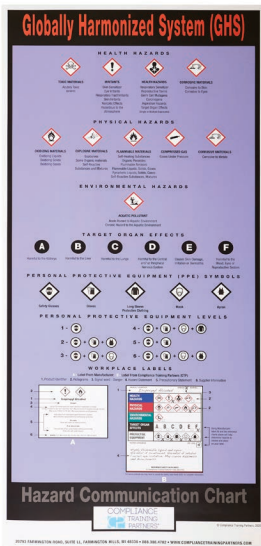


**WC3**

A female doctor with dark hair, wearing a white lab coat and a blue stethoscope, is smiling and looking towards the camera. She is holding the stethoscope's tubing with her hands. The entire image is covered with a semi-transparent blue overlay.

# **Laminated Wall Charts**

# LAMINATED WALL CHARTS

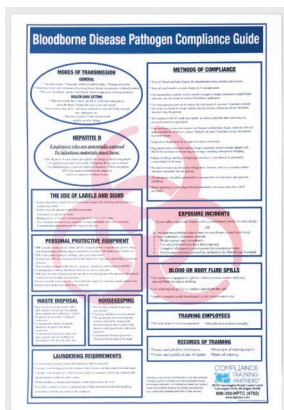


## GHS Hazardous Materials Wall Chart

This chart complies with the Globally Harmonized System for Hazard Communication and was designed to assist employees in evaluating chemical hazards and identifying protective needs when working with hazardous materials. Chemical and product labels are easily interpreted by use of rating codes and pictorials. Essential for every health facility, this chart is available in two sizes to allow for posting in a variety of places.

**GHSWS** 9" x 25"

**GHSWL** 17" x 35"

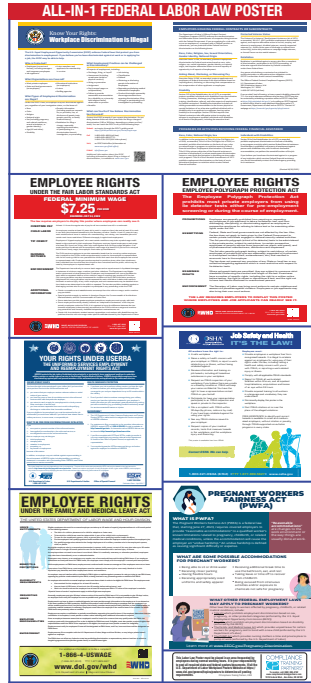


## Bloodborne Compliance Wall Chart

Designed to educate and encourage employee compliance with OSHA's Bloodborne Disease Standard, this chart employs pictorials and written text in a clear and concise format. This laminated poster should be displayed in all workplaces to detail measures taken to protect your employees.

**BCWC** 13" x 19"

# LAMINATED WALL CHARTS



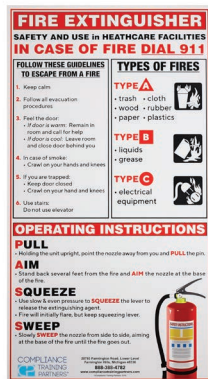
## Labor Law Wall Chart Required

Federal law mandates that the Labor Law Wall Chart must be displayed in the workplace in view of all employees. Employee information notices required are:

- Fair Labor Standard Act/Minimum Wage
- Job Safety and Health: It's the Law
- Family Medical Leave Act
- Equal Employment Opportunity
- Employee Polygraph Protection
- Uniformed Services Employment and Reemployment Rights Act
- **Includes the new required Pregnant Workers Fairness Act Poster**

This comprehensive all-in-one laminated wall chart includes all required information.

**LLP** 17 1/2" X 38"



## Fire Safety Wall Chart

Once started, a fire doubles in size every 19 seconds! This high quality laminated poster serves as a reminder for all employees on how to properly respond to a fire in the workplace as well as proper use of a fire extinguisher. In addition, it helps serve as proof that fire safety training has been provided.

**FSP** 11" x 17"



## First Aid Response Wall Chart

This large colorful wall chart describes proper first aid response in the workplace and helps serve as proof that employees have been provided first aid information. The chart is carefully organized by type of emergency medical situation and will serve as a valuable reference for all employees.

**FAR** 22" x 26"



A photograph of a woman with long dark hair, wearing a white lab coat, smiling warmly. She is holding the hands of another person whose arm is visible on the right. The image has a blue color overlay. The text "Labels & Signs" is centered in white.

# **Labels & Signs**

# LABELS & SIGNS



## Biohazard Warning Labels Required

The Bloodborne Pathogens Standard requires the use of these labels.

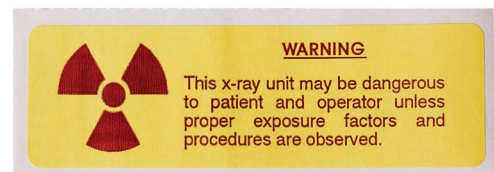
<b>BWL2</b>	2" x 2" Labels 25 pack
<b>BWL21</b>	2" x 2" Labels 100 pack
<b>BWL4</b>	4" x 4" Labels 25 pack
<b>BWL41</b>	4" x 4" Labels 100 pack
<b>BWL4W</b>	4" x 4" Labels (waterproof) 25 pack
<b>WBWL10</b>	3" x 3" Labels (waterproof) 10 pack
<b>WBLWL25</b>	3" x 3" Labels (waterproof) 25 pack



## Radiation Caution Labels

All radiographic equipment must be identified with this label.

<b>RCL</b>	1 1/2" x 4" Labels 5 pack
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# LABELS & SIGNS



## GHS Chemical Product Labels Required



These water-resistant GHS chemical labels are color-coded and allow for compliance with the Globally Harmonized System for Hazard Communication.

<b>GHSC</b>	2 1/2" x 2 1/2" Labels 25 pack
<b>GHSC100</b>	2 1/2" x 2 1/2" Labels 100 pack
<b>GHCL</b>	4" x 4" Labels 25 pack
<b>GHCL100</b>	4" x 4" Labels 100 pack
<b>WGHS10</b>	3" x 3" Labels (waterproof) 10 pack
<b>WGHS25</b>	3" x 3" Labels (waterproof) 25 pack

## OSHA Compliance Labeling Kit

Various sized biohazard and radiation caution labels are combined with a hazardous materials wall chart, and labeling instructions to assist your office in meeting OSHA requirements for labeling. Toll-free telephone and online technical support included.



- **1** 9" x 25" GHS Hazardous Materials Wall Chart
- **40** 2.5" x 2.5" GHS labels
- **8** 4" x 4" GHS labels
- **20** 2" x 2" Biohazard labels
- **10** 4" x 4" Biohazard labels
- **5** 1.5" x 4" Radiation labels

**CLK**

# LABELS & SIGNS

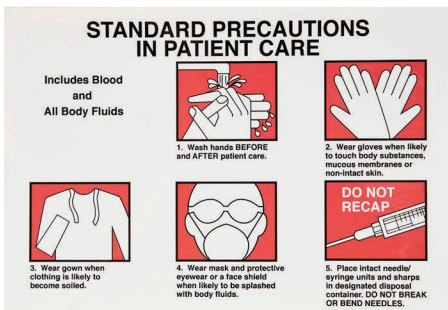


## Variety Pack of Labels

This variety pack offers various sizes of our chemical, biohazard and radiation labels. The packet contains over 80 of our most popular labels at a great value price.

- **40** 2.5" x 2.5" GHS labels
- **8** 4" x 4" GHS labels
- **20** 2" x 2" Biohazard labels
- **10** 4" x 4" Biohazard labels
- **5** 1.5" x 4" Radiation labels

**V180**



## Standard Precautions Label

Designed to protect you and your employees, these bright, adhesive-backed labels should be displayed in all treatment areas. They will reinforce the most important part of your exposure control plan.

**UPL** 5 1/2" x 8" labels  
5 pack



## STOP! Wash Hands

These adhesive-backed labels should be displayed throughout your office. Attractive Black/Red/White design.

**SWHL** 5 1/2" x 8" labels  
5 pack

# LABELS & SIGNS




## Handwashing Technique

These adhesive-backed labels should be displayed throughout your office. Attractive Black/Red/White design.

**HANDWASHING TECHNIQUE**

1. Use continuously running water.
2. Use a generous amount of soap.
3. Apply with vigorous contact on all surfaces of hands.
4. Wash for a minimum of 20 seconds.
5. Clean under and around fingernails.
6. Keeping your hands down rinse them well with warm running water.
7. Avoid splashing.
8. Dry well with paper towels.
9. Use a towel to turn the water off.
10. Discard the towels into a bag provided for that purpose.



**HWTL** 2 3/4" x 4" labels  
5 pack

## Handwashing Technique (English/Spanish)

The Centers for Disease Control states that handwashing is one of the best ways to prevent the spread of disease. These bilingual labels will serve as a reminder to all staff members of the importance of handwashing.

**HANDWASHING TECHNIQUE**  
**TÉCNICA PARA LA VARSE LAS MANOS**



1. Use continuously running water.
2. Use a generous amount of soap.
3. Apply with vigorous contact on all surfaces of hands.
4. Wash for a minimum of 20 seconds.
5. Clean under and around fingernails.
6. Keeping your hands down rinse them well with warm running water.
7. Avoid splashing.
8. Dry well with paper towels.
9. Use a towel to turn the water off.
10. Discard the towels into a bag provided for that purpose.

1. Use agua que corra continuamente.
2. Use bastante jabón.
3. Aplique con contacto vigoroso a todas las partes de la mano.
4. Lavarse por 20 segundos mínimo.
5. Limpie debajo y alrededor de sus uñas.
6. Mantenga las manos hacia abajo mientras las enjuague con abundante agua tibia.
7. Evite salpicar.
8. Séquese bien con toallas de papel.
9. Use una toalla de papel para cerrar la llave del agua.
10. Ponga las toallas en la bolsa provista para ese propósito.

**HWTL-B** 6" x 6" labels  
2 pack

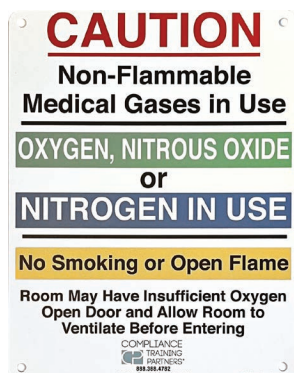
## Laser Warning Sign

Many offices utilize a laser for various surgical procedures in the office. It is required that you place a "laser in use" warning sign in each room in which the device is used in. This durable acrylic sign meets all requirements.



**LWS** 10" X 7"

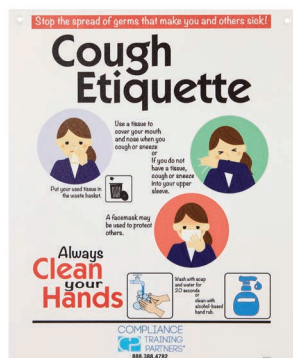
# LABELS & SIGNS



## Medical Gas Warning Sign Required

According to established guidelines, you must have a proper medical gas warning sign in the area where your nitrous oxide, nitrogen or oxygen tanks are stored. This durable plastic sign has pre-drilled mounting holes and will allow you to be in full compliance.

**MGWS** 10" X 7"



## Cough Etiquette Sign Required

According to Centers for Disease Control and Prevention Guidelines, signs must be posted at entrances of healthcare facilities with instructions to patients who may have symptoms of respiratory infection. This durable plastic sign has pre-drilled mounting holes and is designed to fulfill all requirements.

**CEP** 14" x 22"

**CEPS** 9" x 11"

## Emergency Signs - Glow-In-The-Dark Required

OSHA requires that all "emergency exits," "exits," and "non-exits" be marked with clear, visible, illuminated signs. These lightweight signs glow in the dark for up to 8 hours. All signs meet OSHA & NFPA requirements.



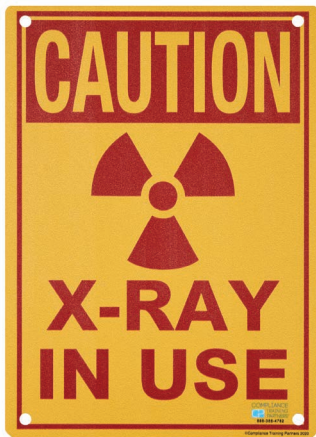
**EOS** 10" X 7"  
'Emergency Exit Only'

**EXS** 10" X 7" 'Exit'

**NXS** 10" X 7" 'Not an Exit'

**FES** 4" X 18"  
'Fire Extinguisher'

# LABELS & SIGNS



## Caution Radiation Sign

A sign indicating the use of x-rays should be placed in areas of possible exposure. This plastic sign comes pre-drilled with mounting holes and will assist you in complying with states' radiographic regulations.

**CRS** 10" x 7"



## Biohazard Storage

These magnetic labels allow you to designate refrigerators for biohazard (red) or food (green) storage. Specify red or green.

**BSLM** 4" x 4"



These adhesive labels are perfect for placement on cupboard doors, refrigerators or freezers which contain potential biohazards.

**BSLA** 4<sup>1/2</sup>" x 4<sup>1/2</sup>" 5 pack

# LABELS & SIGNS



## “Allergic To” Labels

These labels track allergies and other ‘alert’ conditions. They are pressure-sensitive and the fluorescent chartreuse color attracts attention.

ALLERGIC TO:

- ☐ PENICILLIN
- ☐ CODEINE
- ☐ SULFA
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_
- ☐ \_\_\_\_\_

**ATL** 2" x 3" 100 pack

## Medical Alert Labels

Available in two sizes, these red and white pressure sensitive labels are designed for labeling charts, x-rays and treatment correspondence.

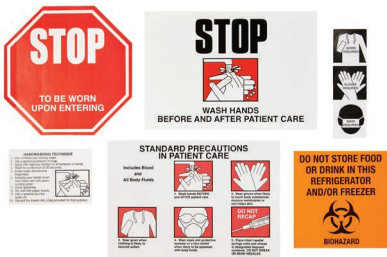


**MALL** 6 1/2" x 1" 50 per roll

**MALS** 1 1/2" x 7/8" 100 per roll

## Variety Pack of Infection Control Labels

Our most popular infection control labels are included in this pack. Adhesive-backed, durable and water-resistant.



**VPL6** 5 pack



# LABELS & SIGNS



## HIPAA Alert Labels



These colorful attention-getting labels are cling-backed and stick to any surface, but can be easily removed and reused. They are designed to serve as a constant reminder for employees to follow HIPAA regulations. We recommend placing them at key points in the office such as operatories/treatment rooms and the business office.

**HAL5** 4" x 6" labels 5 pack

**HAL10** 4" x 6" labels 10 pack

## HIPAA Patient Consent Forms

Refill pad of patient consent forms.



**PCF** Pad of 50

**PCFS** Pad of 50 (Spanish)

A high-angle, top-down photograph of four medical professionals in a modern hospital atrium. The space features a light-colored wooden floor and a white, ribbed ceiling. A man in blue scrubs is pointing at a tablet held by a woman in a white lab coat. Another man in a white lab coat stands nearby, and a man in blue scrubs is looking down. The scene is overlaid with a semi-transparent blue filter.

# FAQs and Checklists

# FAQ



## **What is the best way to bring our office into compliance?**

The comprehensive CTP OSHA Compliance Program is simple to follow and covers all aspects of the OSHA Act as well as CDC Infection Control Guidelines. The HIPAA Compliance Program will allow you to quickly achieve compliance in this important area and includes all required written policies. For large practices, Multi-site facilities, and DSOs, inquire about Compli Plus for total office compliance. We also recommend our audit checklists which are easily accessible through the Dental, Medical, and Animal Health Audit app. Learn more on page 22.

## **We have implemented the CTP Compliance Program in our office. What other training programs are available?**

CTP offers a variety of online training programs addressing HIPAA Compliance, annual required OSHA staff training, infection control, needlestick exposure protocol, the Bloodborne Pathogens Standard and recordkeeping requirements. We have also expended our education curriculum to include Pain Management, Sexual Harassment, Implicit Bias, and Human Trafficking courses. Continuing education units (CEU's) are available for most programs.

## **Where do we find safety products that meet OSHA requirements?**

CTP offers a full line of safety products that will allow you to comply with OSHA regulations. These include: eyewash stations, water testing programs, spill kits, fire extinguishers, safety glasses, nitrile gloves, signs, and various other required safety products. All products are available on our website, [ComplianceTrainingPartners.com](https://ComplianceTrainingPartners.com)

## **What about infection control products?**

We strive to bring you the best infection control products so that you can provide the safest environment possible for your patients and staff. All products are available on our website, [ComplianceTrainingPartners.com](https://ComplianceTrainingPartners.com)

## **What do we do when OSHA or HIPAA regulations change?**

At CTP, we constantly monitor OSHA, HIPAA, and Infection Control regulations. We strongly recommend our upgrade subscription service, Compli™ or Compli™ Plus, which will keep you informed of any changes to these regulations.

## **What is your return policy?**

If a product does not meet your needs, simply call within 30 days for a return authorization number. This number must be clearly written on the outside of the return box. Shipping and handling charges are not refundable, and a restocking fee may apply. Training materials are not returnable if opened. No returns for all Monitoring Program products.

# HOW TO ORDER



To order, visit our website at  
[ComplianceTrainingPartners.com](https://ComplianceTrainingPartners.com)  
or contact Compliance Training  
Partners by phone **888.388.4782**

## Delivery Terms:

All orders are subject to a shipping and handling charge. Orders are shipped UPS ground.

## Price Policy:

While every effort has been made to provide you with the lowest possible prices, occasionally unanticipated manufacturer increases make it necessary to change the prices listed in this catalog. We regret that price increases may sometimes occur.

## Back-orders:

Occasionally because of increased demand or vendor delays, it is necessary to back-order an item. You will be notified of any such delays along with an anticipated ship date.

## Returns and Exchanges:

Please inspect your shipment upon arrival. If you need to return an item, please call our Customer Service representative to obtain a return authorization number. Returned products must have been purchased within the previous 30 days and a 15% restocking fee will be applied. We ask that all goods be in resalable condition to receive full credit. \*Some products are non-refundable, see product description for details.

## Mailing Address:

**1919 Federal Blvd, Ann Arbor, MI 48103**



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### TRAINING

- ☐ ☐ Are employees provided annual training on all applicable OSHA regulations including Hazard Communications, Bloodborne Pathogens, and TB?
- ☐ ☐ Are new employees provided training before performing duties?
- ☐ ☐ Are training records kept for a minimum of 5 years?
- ☐ ☐ Are all safety practices and procedures updated annually?

### HAZARD COMMUNICATION

- ☐ ☐ Is a written hazard communication program customized, reviewed, updated annually and accessible to all employees?
- ☐ ☐ Are SDS Sheets on file?
- ☐ ☐ Has a chemical inventory list containing all hazardous materials been created?
- ☐ ☐ Are all hazardous products labeled properly?
- ☐ ☐ Do all employees understand the emergency spill procedures?
- ☐ ☐ Is there a spill kit available?
- ☐ ☐ Have employees been trained on use of the eyewash station?
- ☐ ☐ Is the eyewash station labeled and functioning properly?

### BLOODBORNE PATHOGENS

- ☐ ☐ Are waste containers in operatory or treatment room labeled with a biohazard label?
- ☐ ☐ Are waste containers covered or have a drop through opening?
- ☐ ☐ Are employees offered the Hepatitis B vaccination free and within 10 days of task assignment?
- ☐ ☐ Does a written exposure control plan exist and is it accessible to all employees?
- ☐ ☐ Is the plan reviewed and updated at least annually?
- ☐ ☐ Is all food and drink kept out of clinical and laboratory areas?
- ☐ ☐ Is handwashing performed before and after treating patients?
- ☐ ☐ Are all CDC Infection Control Guidelines for infection control being followed?

### GENERAL HOUSEKEEPING, STORAGE, WALKING SURFACES, MEANS OF EGRESS

- ☐ ☐ Are all areas of the office clean, uncluttered, and sanitary?
- ☐ ☐ Are all passageways and aisles marked and free from obstruction?
- ☐ ☐ Are lighted or glow in the dark exit signs in place?
- ☐ ☐ Are there at least 2 means of egress (exits)?
- ☐ ☐ Does the office have proper ventilation and air quality control (HVAC fan on during working hours, filters changed regularly)?
- ☐ ☐ Are electrical and medical gas closets free from stored items?

### **ELECTRICAL**

- ☐ ☐ Are all the electrical devices properly grounded (3 prong plug)?
- ☐ ☐ Are all electrical outlets in kitchens, bathrooms, labs and areas near water on a GFI circuit?
- ☐ ☐ Have you checked that extension cords are not in use?
- ☐ ☐ Are all cords and plugs free of visible wear?

### **MEDICAL EMERGENCIES, SAFETY & FIRST AID**

- ☐ ☐ Is at least one person on each shift trained in First Aid and Cardiopulmonary Resuscitation?
- ☐ ☐ Do all staff members know the proper post-exposure procedure?
- ☐ ☐ Is the eyewash station being inspected and tested weekly?
- ☐ ☐ Are monthly inspections of the facility being conducted, including the first aid kit and fire extinguisher?
- ☐ ☐ Is there an eyewash station within 25 feet or 10 seconds of hazardous chemicals?
- ☐ ☐ Is a fire extinguisher available?
- ☐ ☐ Have employees been trained on proper use of the fire extinguisher?
- ☐ ☐ Do stairs have a handrail with adequate headroom and lighting?

### **GRINDING EQUIPMENT & COMPRESSED GASES**

- ☐ ☐ Is grinding equipment in good and safe condition with guards and shields?
- ☐ ☐ Are the gas cylinders (nitrous oxide/oxygen) properly chained or cabled to a wall?
- ☐ ☐ Are gas cylinders properly labeled?
- ☐ ☐ Are employees trained on compressed gas safety?

### **EMPLOYEE FILES / RECORDKEEPING**

- ☐ ☐ Do employee files contain medical reports of workplace accidents or injuries?
- ☐ ☐ Do employee files contain vaccination history?
- ☐ ☐ Do employee files contain hepatitis B vaccination record or declination form?
- ☐ ☐ Are medical records maintained for the duration of employment plus 30 years?

### **PERSONAL PROTECTIVE EQUIPMENT (PPE)**

- ☐ ☐ Is proper personal protective equipment provided and maintained by the employer?
- ☐ ☐ Are gloves and masks changed after each patient?
- ☐ ☐ Are employees trained to put on and remove PPE?
- ☐ ☐ Are protective eyewear/shields worn?
- ☐ ☐ Are long sleeve lab coats and/or gowns worn and changed when visibly soiled and at the end of the day?
- ☐ ☐ Are nitrile or synthetic gloves provided to those who have sensitivity to latex?
- ☐ ☐ Is handwashing performed before and after gloving?
- ☐ ☐ During laser procedures, is laser protective eyewear available and used?
- ☐ ☐ During bonding/light curing procedures, are protective glasses or shields used?



### **POSTERS AND SIGNS PROPERLY DISPLAYED**

- ☐ ☐ Is the Federal Minimum Wage poster displayed?
- ☐ ☐ Is the OSHA 3165 poster displayed?
- ☐ ☐ Is the Equal Opportunity Employer poster displayed?
- ☐ ☐ Is the Family Medical Leave Act poster displayed (50 or more employees)?
- ☐ ☐ Is the Uniformed Service Employment and Reemployment Rights Act poster displayed?
- ☐ ☐ Is the Employee Polygraph Protection Act poster displayed?
- ☐ ☐ Is there an emergency evacuation plan?
- ☐ ☐ Are all state-specific posters displayed where required?
- ☐ ☐ Is a housekeeping schedule posted?

### **LAUNDRY**

- ☐ ☐ Is soiled laundry placed in marked bags or containers labeled with the biohazard symbol?
- ☐ ☐ Is protective clothing either laundered in-house or by a professional service?

### **SHARPS**

- ☐ ☐ Is there a sharps log available for documenting exposure incidents?
- ☐ ☐ Are sharps containers readily accessible in the area of use?
- ☐ ☐ Are filled containers transported by a biohazardous waste hauler?
- ☐ ☐ Are employees using a singled-handed needle recapping technique or a needle recapping device?
- ☐ ☐ Are filled sharps containers picked up at the time interval mandated by your state?
- ☐ ☐ Are reusable contaminated sharps transported in a closed leak-proof container?

### **NON-SHARP REGULATED WASTE**

- ☐ ☐ Is saturated gauze, cotton and other absorbent waste placed in a red bag?
- ☐ ☐ Is human tissue placed in a red bag?
- ☐ ☐ Is regulated waste placed in closable, leak-proof, biohazard labeled containers for pick up?

### **MONITORING**

- ☐ ☐ Are exposed employees wearing radiation dosimeters as required?
- ☐ ☐ If nitrous oxide is used, are nitrous monitors used quarterly as recommended?

#### **DISCLAIMER OF WARRANTY**

The employer is ultimately responsible for safety and compliance in their workplace and familiarity with all rules, laws and regulations that may apply. Compliance Training Partners, L.L.C. as well as its agents, dealers and distributors cannot be held responsible for any legal actions, citations, penalties or fines that may result from failure to comply. COMPLIANCE TRAINING PARTNERS, LLC AS WELL AS ITS AGENTS, DEALERS AND DISTRIBUTORS HEREBY DISCLAIMS ANY AND ALL REPRESENTATIONS, CONDITIONS AND WARRANTIES, WHETHER EXPRESS OR IMPLIED, ORAL OR WRITTEN, STATUTORY OR OTHERWISE, INCLUDING WITHOUT LIMITATION THE IMPLIED WARRANTIES OR CONDITIONS OF MERCHANTABILITY OR FITNESS FOR THE PURPOSE. At no time shall COMPLIANCE TRAINING PARTNERS, LLC, ITS AGENTS, DEALERS OR DISTRIBUTORS, be responsible for consequential, incidental or special damages, whether for loss of profits or otherwise, or for damages for fundamental breach of contract or breach of a fundamental term. COMPLIANCE TRAINING PARTNERS, LLC'S AND ITS AGENTS, DEALERS AND DISTRIBUTORS obligation to Buyer for defective services is limited to a refund of fees actually received from Buyer. At no time shall COMPLIANCE TRAINING PARTNERS, LLC'S, AND ITS AGENTS, DEALERS AND DISTRIBUTORS liability for any service provided by and supplied by it exceed the purchase price of such service. Warranty claims shall be made upon occurrence. COMPLIANCE TRAINING PARTNERS, LLC AND ITS AGENTS, DEALERS AND DISTRIBUTORS shall have no liability and no warranty of any kind for any failure or breakdown of a service not provided or controlled by it and unless it is fully paid for the services. COMPLIANCE TRAINING PARTNERS, LLC AND ITS AGENTS, DEALERS AND DISTRIBUTORS shall have no liability and no warranty of any kind for any service used for any purpose which CTP did not fully supervise, participate and/or complete. Please see our website, [www.compliance-trainingpartners.com](http://www.compliance-trainingpartners.com) for full disclaimer.

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- ☐ ☐ Is there an eyewash station within 25 feet or 10 seconds of hazardous chemicals?
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### MONITORING

- ☐ ☐ Are exposed employees wearing radiation dosimeters as required?
- ☐ ☐ If formaldehyde, ethylene oxide or halogenated anesthetic gas are used, is monitoring being performed as required?

#### DISCLAIMER OF WARRANTY

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**Y | N PERSONAL PROTECTIVE EQUIPMENT**

**Masks, Protective Eyewear and Face Shields**

- ☐ ☐ Do employees wear surgical masks during procedures likely to generate splashes or sprays of blood or saliva?
- ☐ ☐ Do employees wear eye protection with solid side shields or a face shield during procedures that are likely to generate splashes or sprays of blood or saliva?
- ☐ ☐ Do employees change masks between patients and during patient treatment if the mask becomes wet or visibly contaminated?
- ☐ ☐ Is PPE removed before leaving the work area?
- ☐ ☐ Is hand hygiene performed immediately after removal of PPE?

**Gloves**

- ☐ ☐ Do employees wear gloves for potential contact with blood, body fluids, mucous membranes, non-intact skin or contaminated equipment?
- ☐ ☐ Do employees change gloves between patients?
- ☐ ☐ Do employees wear puncture and chemical-resistant utility gloves when cleaning instruments and performing housekeeping tasks involving blood or OPIM (other potentially infectious materials)?
- ☐ ☐ Do employees remove gloves that are torn, cut or punctured and perform hand hygiene before putting on new gloves?

**Protective Clothing**

- ☐ ☐ Do employees wear protective clothing (e.g., reusable or disposable gown, lab coat, or uniform) that is long sleeved and covers personal clothing as well as skin (e.g. forearms) likely to be soiled with blood, saliva or OPIM?
- ☐ ☐ Do employees change protective clothing if visibly soiled and immediately or as soon as possible if penetrated by blood or OPIM?

**RESPIRATORY HYGIENE/COUGH ETIQUETTE**

- ☐ ☐ Are signs posted at entrances with instructions to patients with symptoms of respiratory infection?
- ☐ ☐ Are tissue and no-touch receptacles for disposal of tissue available?
- ☐ ☐ Are resources available to perform hand hygiene in waiting areas?
- ☐ ☐ Are face masks available for coughing patients and other symptomatic individuals who enter the office?
- ☐ ☐ Are all employees educated on recognition of signs, symptoms and transmission of TB?
- ☐ ☐ Is a written TB infection control plan available to all employees?
- ☐ ☐ Has baseline TB testing (TST) been performed on all employees who may have contact with possible TB active patients?

### **HAND HYGIENE**

- ☐ ☐ Is hand hygiene performed when hands are visibly soiled; before and after each patient; before and after gloving; and whenever touching contaminated surfaces?
- ☐ ☐ Is a surgical scrub performed before putting on sterile surgical gloves, which must be used in all surgical procedures (e.g. biopsy, periodontal surgery, apical surgery, implant surgery, and surgical extractions)?

### **SHARPS SAFETY**

- ☐ ☐ Are engineering controls used to prevent injuries (e.g., needle re-capping device, scalpel blade remover)?
- ☐ ☐ Are work practice controls used to prevent injuries (e.g., one-handed scoop technique, not breaking or bending needles)?
- ☐ ☐ Do employees use either one-handed scoop technique or a mechanical device designed for holding the needle cap when re-capping needles?
- ☐ ☐ Are sharps disposed of in a puncture-resistant sharps container located as close as possible to the area in which items are used?
- ☐ ☐ Are reusable contaminated sharps transported in a closed leak-proof container?

### **SAFE INJECTION PRACTICES**

- ☐ ☐ Are injections prepared using an aseptic technique, in a clean area free from contaminants or contact with blood, body fluids or contaminated equipment?
- ☐ ☐ Are needles and syringes used for only one patient?
- ☐ ☐ Is the dental cartridge syringe appropriately cleaned and heat sterilized before use on another patient?
- ☐ ☐ Is the rubber septum on a medication vial disinfected with alcohol before piercing?
- ☐ ☐ Are medication containers (single and multi-dose vials, ampules and bags) entered with a new needle and a new syringe?
- ☐ ☐ Are single-dose vials, ampules and bags or bottle of intravenous solutions used for only one patient?
- ☐ ☐ Are leftover contents of single-dose vials, ampules and bags of intravenous solutions not combined for later use.

#### **When using multi-dose medication vials:**

- ☐ ☐ Are multi-dose vials dedicated to individual patients whenever possible?
- ☐ ☐ Are multi-dose vials which are used for more than one patient kept in a centralized medication area?
- ☐ ☐ Are multi-dose vials dated when first opened and discarded within 28 days unless the manufacturer specifies a shorter or longer date for the opened vial?
- ☐ ☐ Are fluid infusion and administration sets (i.e., IV bags, tubing and connections) used for one patient only?



## **INSTRUMENT STERILIZATION AND DISINFECTION OF PATIENT-CARE ITEMS**

- ☐ ☐ Is the instrument processing area separated into 4 sections: A) Receiving, cleaning and decontamination, B) Preparation/packaging, C) Sterilization, and D) Storage?
- ☐ ☐ Are reusable critical and semi-critical dental items and devices cleaned and heat sterilized according to the manufacturer's instructions before using on patients (e.g. high speed handpieces, low speed motors and handpiece components, endodontic instruments, air-water syringe tips)?
- ☐ ☐ Are single-use devices discarded after one use and never used for more than one patient?
- ☐ ☐ Are work practice controls that minimize contact with sharp instruments used and appropriate PPE worn if manual cleaning is necessary (e.g., puncture resistant utility gloves)?
- ☐ ☐ Are items thoroughly cleaned and visually inspected for residual contamination before sterilization?
- ☐ ☐ Is an enzymatic cleaner or detergent used for pre-cleaning and discarded according to the manufacturer's instructions?
- ☐ ☐ Are instruments appropriately packaged for sterilization after pre-cleaning?
- ☐ ☐ Is a chemical indicator used internally and externally on all sterilization packaging?
- ☐ ☐ Are FDA-cleared medical devices designed for sterilization (autoclaves and dry heat sterilizers) used according to the manufacturer's instructions?
- ☐ ☐ Is a biological indicator used at least weekly and with every load containing implantable devices?
- ☐ ☐ Are sterile packages labeled, at a minimum, with the sterilizer used and the date of sterilization?
- ☐ ☐ Are sterilization records maintained (i.e., mechanical, chemical and biological) in compliance with state and local regulations?
- ☐ ☐ Are sterile packages inspected for integrity and are compromised packages reprocessed before use?
- ☐ ☐ After sterilization, are dental devices and instruments stored in such a manner that sterility is not compromised?
- ☐ ☐ Are reusable, heat-sensitive, semi-critical items that cannot be replaced by heat stable or disposable high-level disinfected according to the manufacturer's instructions?
- ☐ ☐ Are X-ray sensors heat sterilized between patients and covered with a FDA cleared barrier? If this is not done they are cleaned and disinfected between patients with an EPA-registered intermediate-level disinfectant, then covered with and FDA cleared barrier.
- ☐ ☐ Are X-ray sensor holding or positioning devices heat sterilized or high-level disinfected between patients?

### ENVIRONMENTAL INFECTION CONTROL

- ☐ ☐ Are clinical contact surfaces either barrier covered or cleaned and disinfected after each patient, using an EPA registered intermediate level disinfectant?
- ☐ ☐ Are cleaners and disinfectants used according to manufacturer's instructions?
- ☐ ☐ Is regulated medical waste handled and disposed of according to local, state and federal regulations?
- ☐ ☐ Are burs, polishing points, rag wheels, etc., sterilized or disinfected between patients or disposable replacements used?
- ☐ ☐ Is PPE used when handling items in the dental laboratory?
- ☐ ☐ Are contaminated items (e.g. bites, impressions, models) disinfected using an EPA registered intermediate level disinfectant?
- ☐ ☐ Are laboratory cases disinfected, and labeled as such, before being sent out?

### HOUSEKEEPING SURFACES

- ☐ ☐ Are walls, sinks and floors routinely cleaned with detergent and water or an EPA registered disinfectant/detergent?
- ☐ ☐ Are mops and cloths cleaned after use and allowed to dry?
- ☐ ☐ Are fresh cleaning and disinfecting solutions prepared daily?

### DENTAL UNIT WATER QUALITY

- ☐ ☐ Dental unit waterline treatment products/devices are used to ensure that water meets EPA regulatory standards for drinking water (<500 CFU/ml of heterotrophic water bacteria)?
- ☐ ☐ Is sterile saline or sterile water used as a coolant/irrigant when performing surgical procedures?
- ☐ ☐ Is dental unit water tested quarterly, as recommended, to ensure that it is below 500 CFU of heterotrophic water bacteria?

### TRAINING

- ☐ ☐ Is training conducted at least annually for all employees and immediately for new employees?
- ☐ ☐ Has someone in the office been designated to be in charge of infection control?

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## DETAILED INFECTION CONTROL CHECKLIST

FOR MEDICAL FACILITIES

### Y | N PERSONAL PROTECTIVE EQUIPMENT

#### Masks, Protective Eyewear and Face Shields

- ☐ ☐ Do employees wear surgical masks during procedures likely to generate splashes or sprays of blood or saliva?
- ☐ ☐ Do employees wear eye protection with solid side shields or a face shield during procedures that are likely to generate splashes or sprays of blood or saliva?
- ☐ ☐ Do employees change masks between patients and during patient treatment if the mask becomes wet or visibly contaminated?
- ☐ ☐ Is PPE removed before leaving the work area?
- ☐ ☐ Is hand hygiene performed immediately after removal of PPE?

#### Gloves

- ☐ ☐ Do employees wear gloves for potential contact with blood, body fluids, mucous membranes, non-intact skin or contaminated equipment?
- ☐ ☐ Do employees change gloves between patients?
- ☐ ☐ Do employees wear puncture and chemical-resistant utility gloves when cleaning instruments and performing housekeeping tasks involving blood or OPIM (other potentially infectious materials)?
- ☐ ☐ Do employees remove gloves that are torn, cut or punctured and perform hand hygiene before putting on new gloves?

#### Protective Clothing

- ☐ ☐ Do employees wear protective clothing (e.g. reusable or disposable gown, lab coat, or uniform) that is long sleeved and covers personal clothing as well as skin (e.g. forearms) likely to be soiled with blood, saliva or OPIM?
- ☐ ☐ Do employees change protective clothing if visibly soiled and immediately or as soon as possible if penetrated by blood or OPIM?

### RESPIRATORY HYGIENE/COUGH ETIQUETTE

- ☐ ☐ Are signs posted at entrances with instructions to patients with symptoms of respiratory infection?
- ☐ ☐ Are tissue and no-touch receptacles for disposal of tissue available?
- ☐ ☐ Are resources available to perform hand hygiene in waiting areas?
- ☐ ☐ Are face masks available for coughing patients and other symptomatic individuals who enter the office?
- ☐ ☐ Are all employees educated on recognition of signs, symptoms and transmission of TB?
- ☐ ☐ Is a written TB infection control plan available to all employees?
- ☐ ☐ Has baseline TB testing (TST) been performed on all employees who may have potential for contact with a TB active patient?

### HAND HYGIENE

- ☐ ☐ Is hand hygiene performed when hands are visibly soiled; before and after each patient; before and after gloving; and whenever touching contaminated surfaces?
- ☐ ☐ Is a surgical scrub performed before putting on sterile surgical gloves, which must be used for all surgical procedures?

### SHARPS SAFETY

- ☐ ☐ Are engineering controls used to prevent injuries (e.g., safety needles, needle re-capping device, scalpel blade remover)?
- ☐ ☐ Are work practice controls used to prevent injuries (e.g., one-handed scoop technique, not breaking or bending needles)?
- ☐ ☐ Do employees use either one-handed scoop technique or a mechanical device designed for holding the needle cap when re-capping needles?
- ☐ ☐ Are sharps disposed of in a puncture-resistant sharps container located as close as possible to the area in which items are used?
- ☐ ☐ Are reusable contaminated sharps transported in a closed leak-proof container?

### SAFE INJECTION PRACTICES

- ☐ ☐ Are injections prepared using an aseptic technique, in a clean area free from contaminants or contact with blood, body fluids or contaminated equipment?
- ☐ ☐ Are needles and syringes used for only one patient?
- ☐ ☐ Is the rubber septum on a medication vial disinfected with alcohol before piercing?
- ☐ ☐ Are medication containers (single and multi-dose vials, ampules and bags) always entered with a sterile needle and syringe?
- ☐ ☐ Are single-dose vials, ampules and bags or bottle of intravenous solutions used for only one patient?
- ☐ ☐ Leftover contents of single-dose vials, ampules and bags of intravenous solutions are not combined for later use.

#### **When using multi-dose medication vials:**

- ☐ ☐ Are multi-dose vials dedicated to individual patients whenever possible?
- ☐ ☐ Are multi-dose vials which are used for more than one patient kept in a centralized medication area?
- ☐ ☐ Are multi-dose vials dated when first opened and discarded within 28 days unless the manufacturer specifies a shorter or longer date for the opened vial?
- ☐ ☐ Are fluid infusion and administration sets (i.e., IV bags, tubing and connections) used for one patient only?

### INSTRUMENT STERILIZATION AND DISINFECTION OF PATIENT-CARE ITEMS

- ☐ ☐ Is the instrument processing area separated into 4 sections: A) Receiving, cleaning and decontamination, B) Preparation/packaging, C) Sterilization and D) Storage?
- ☐ ☐ Are reusable critical and semi-critical items and devices cleaned and heat sterilized according to the manufacturer's instructions before using on patients?
- ☐ ☐ Are single-use devices discarded after one use and never used for more than one patient?
- ☐ ☐ Are work practice controls that minimize contact with sharp instruments used and appropriate PPE worn if manual cleaning is necessary (e.g. puncture resistant utility gloves)?
- ☐ ☐ Are items thoroughly cleaned and visually inspected for residual contamination before sterilization?
- ☐ ☐ Is an enzymatic cleaner or detergent used for pre-cleaning and discarded according to the manufacturer's instructions?
- ☐ ☐ Are instruments appropriately packaged for sterilization after pre-cleaning?
- ☐ ☐ Is a chemical indicator used internally and externally on all sterilization packaging?
- ☐ ☐ Are FDA-cleared medical devices designed for sterilization (autoclaves and dry heat sterilizers) used according to the manufacturer's instructions?
- ☐ ☐ Is a biological indicator used at least weekly and with every load containing implantable devices?
- ☐ ☐ Are sterile packages labeled, at a minimum, with the sterilizer used and the date of sterilization?
- ☐ ☐ Are sterilization records maintained (i.e. mechanical, chemical and biological) in compliance with state and local regulations?
- ☐ ☐ Are sterile packages inspected for integrity and, are compromised packages reprocessed before use?
- ☐ ☐ After sterilization, are medical devices and instruments stored in such a manner that sterility is not compromised?
- ☐ ☐ Are reusable, heat-sensitive, semi-critical items that cannot be replaced by heat-stable or disposable high-level items disinfected according to the manufacturer's instructions?

### ENVIRONMENTAL INFECTION CONTROL

- ☐ ☐ Are clinical contact surfaces either barrier-covered or cleaned and disinfected after each patient, using an EPA-registered intermediate level disinfectant?
- ☐ ☐ Are cleaners and disinfectants used according to manufacturer's instructions?
- ☐ ☐ Is regulated medical waste handled and disposed of according to local, state and federal regulations?
- ☐ ☐ Are contaminated items disinfected using an EPA-registered intermediate-level disinfectant?

### HOUSEKEEPING SURFACES

- ☐ ☐ Are walls, sinks and floors routinely cleaned with detergent and water or an EPA-registered disinfectant/detergent?
- ☐ ☐ Are mops and cloths cleaned after use and allowed to dry?
- ☐ ☐ Are fresh cleaning and disinfecting solutions prepared daily?

### TRAINING

- ☐ ☐ Is training conducted at least annually for all employees and immediately for new employees?
- ☐ ☐ Has someone in the office been designated to be in charge of infection control?

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Y | N

### GENERAL

- ☐ ☐ The practice management software selected is HIPAA-compliant and is the latest updated version.
- ☐ ☐ The HIPAA Coordinator has been appointed. This person may also serve as the Privacy Officer and/or Security Officer.
- ☐ ☐ A written training program has been developed for the training of all employees on all aspects of HIPAA as it relates to the office.
- ☐ ☐ Training logs/contracts have been developed to document that training has occurred.
- ☐ ☐ A competent and experienced IT organization that understands how to set up a secure system has been selected to set up and maintain the computer system.
- ☐ ☐ Sanction policies have been implemented which outline disciplinary actions based on the severity of the HIPAA violation.
- ☐ ☐ Any sanctions or actions imposed by the office on the employee have been documented, signed and dated. A copy is maintained in the employee file.

### PRIVACY

- ☐ ☐ The Privacy Officer has been appointed. The individual serves as the primary expert on all privacy matters and reports to the HIPAA Coordinator.
- ☐ ☐ Privacy training has been provided and documented for all new employees.
- ☐ ☐ A written Privacy Policy Plan exists and is reviewed/updated annually.
- ☐ ☐ The Notice of Privacy contains the necessary information to meet the requirements of the Privacy Rule (use and disclosure, patient's rights, covered entity's responsibilities).
- ☐ ☐ A written Notice of Privacy Policy is provided on or prior to the first delivery of service, prominently displayed and posted on the office's website.
- ☐ ☐ All patients have signed a written acknowledgment stating they have been offered a copy of the Notice of Privacy Policy.
- ☐ ☐ Authorization forms are used to obtain approval to use or disclose PHI for all non-TPO (treatment, payment, health care operations) related purposes.
- ☐ ☐ Employees are granted access to PHI based on their assigned job responsibility.
- ☐ ☐ A process for confidential communication with patients has been implemented.
- ☐ ☐ All employees have signed a Non-disclosure/Confidentiality Agreement.
- ☐ ☐ Business Associate Agreements have been signed by all business associates as defined by HIPAA law and the office maintains a list of all business associates.
- ☐ ☐ Business Associates and their subcontractors (should they utilize them) are aware of their "downstream" responsibility.
- ☐ ☐ A policy exists for Breach Notification of the patient, should a breach of their PHI occur.

## SECURITY

### Technical Safeguards

There are access control policies and procedures, which include:

- ☐ ☐ Unique User Identification - assign a unique name and/or number for identifying and tracking user identity.
- ☐ ☐ Emergency Access Procedure - establish and implement as needed, procedures for obtaining necessary E-PHI during an emergency.
- ☐ ☐ Automatic Logoff - implement electronic procedures that terminate an electronic session after a predetermined time of inactivity.
- ☐ ☐ Encryption and Decryption - implement a mechanism to encrypt and decrypt E-PHI.

- ☐ ☐ There are audit controls which include: Hardware, software and/or procedural mechanisms that record and examine activity in information systems that contain or use E-PHI.
- ☐ ☐ There are mechanisms to authenticate E-PHI and to corroborate that E-PHI has not been altered or destroyed in an unauthorized manner.
- ☐ ☐ Authentication - there are procedures to verify that a person or entity seeking access to E-PHI is the one claimed.
- ☐ ☐ Integrity Controls - there are security measures that exist to ensure that electronically transmitted E-PHI is not improperly modified without detection until disposed of.
- ☐ ☐ Encryption - mechanisms to encrypt E-PHI when sending it electronically have been implemented.

### PHYSICAL SAFEGUARDS

There are Facility Access Controls, which include:

- ☐ ☐ Contingency Operations - procedures that allow facility access in support of restoration of lost data in the event of an emergency.
- ☐ ☐ Facility Security Plan - policies and procedures to safeguard the facility and the equipment from unauthorized physical access, tampering and theft.
- ☐ ☐ Access Control and Validation - procedures to control and validate a person's access to facilities based on their role or function (visitor control and control of access to software programs for testing).
- ☐ ☐ Maintenance Records - policies and procedures to document repairs and modifications to the physical components of a facility which are related to security (hardware, walls, doors and locks).
- ☐ ☐ Workstation Use - policies and procedures that specify the proper functions to be performed and the way those functions are to be performed.
- ☐ ☐ Workstation Security - physical safeguards for all workstations that access E-PHI to restrict access to unauthorized users.

There are Device and Media Controls, which include:

- ☐ ☐ Disposal - policies and procedures to address the final disposition of E-PHI and/or the hardware on which it was stored.
- ☐ ☐ Media Re-Use - procedures for removal of E-PHI from electronic media before the media is made available for reuse.
- ☐ ☐ Accountability - records of the movements of hardware and electronic media and any person responsible for the movement.
- ☐ ☐ Data Backup and Storage - a retrievable, exact copy of E-PHI when needed.

### **ADMINISTRATIVE SAFEGUARDS**

There are a Security Management Processes in place, which include:

- ☐ ☐ The Security Officer has been appointed. This person serves as the primary expert on all security matters.
- ☐ ☐ Risk Analysis was performed to see where PHI is being used and stored in order to determine all potential HIPAA violations.
- ☐ ☐ Risk Management - sufficient measures exist to reduce these risks to an appropriate level.
- ☐ ☐ Sanction Policy - a sanction policy exists for those employees who fail to comply.
- ☐ ☐ Information Systems Activity Reviews - regular reviews of system activity, logs audit trails, etc.
- ☐ ☐ Protection Against Malware - procedures for guarding against, detecting and reporting malicious software.
- ☐ ☐ Login monitoring - monitoring of logins to systems and reporting of discrepancies is conducted.
- ☐ ☐ Password Management - there are procedures for creating, changing and protecting passwords.
- ☐ ☐ Response and Reporting - identification, documentation and response to security incidents is performed.
- ☐ ☐ Contingency Plan - there are accessible backups of E-PHI and there are procedures in place to restore any lost data.
- ☐ ☐ Emergency Mode - a system has been established to enable continuation of critical business processes for protection and security of E-PHI while operating in emergency mode.

### MISCELLANEOUS

- ☐ ☐ Off-site, encrypted backups are performed regularly.
- ☐ ☐ Business class HIPAA compliant firewalls are installed and functioning properly.
- ☐ ☐ The network is scanned for ports that should be blocked.
- ☐ ☐ If a wireless system is used, it is business class and encrypted.
- ☐ ☐ Server data is encrypted.
- ☐ ☐ The operating system software is tested annually.
- ☐ ☐ The server has been physically secured in a locked room, cabinet, or cage.
- ☐ ☐ The firewall has been set to allow access only to websites needed for business operations.
- ☐ ☐ Only the business owner has the “key” code for the computer system and separate wireless networks exist for patient and business use.



## SECURITY ANALYST CHECKLIST

To be completed in conjunction with  
your IT professional.

### ARE FIREWALL AND ROUTER CONFIGURATION STANDARDS ESTABLISHED AND IMPLEMENTED THROUGHOUT THE OFFICE TO INCLUDE THE FOLLOWING:

Y | N    NOTES

Is there a formal process for approving and testing all network connections and changes to the firewall and router configurations?

☐ ☐ \_\_\_\_\_

Is there a current network diagram that documents all connections in the office and other networks, including any wireless networks?

☐ ☐ \_\_\_\_\_

Is there a process to ensure the diagram is kept current and in a location that is easily accessible to all staff members?

☐ ☐ \_\_\_\_\_

Is there a firewall implemented at each internet connection in the office? i.e., between local networks and wireless networks?

☐ ☐ \_\_\_\_\_

Is the current network diagram up-to-date and consistent with HIPAA firewall configuration standards?

☐ ☐ \_\_\_\_\_

Do firewall and router configurations include a documented list of services, protocols and ports that are open or can be accessed? ☐ ☐ \_\_\_\_\_

Is there a justification and approval for each listed above? ☐ ☐ \_\_\_\_\_

Does the office review firewall and router configurations at least every six months? ☐ ☐ \_\_\_\_\_

Is the office or technician for the office verifying that all available updates and patches to the router and firewall are being installed monthly, quarterly or annually? ☐ ☐ \_\_\_\_\_

Are firewall and router rules reviewed at least every six months? ☐ ☐ \_\_\_\_\_

Do firewall and router configurations restrict connections between untrusted networks and trusted network systems protecting databases in the network? ☐ ☐ \_\_\_\_\_

Is direct public access prohibited between the Internet and the internal networks holding patient data? ☐ ☐ \_\_\_\_\_

Are anti-spoofing methods implemented to detect and block forged sourced IP addresses from entering the network? ☐ ☐ \_\_\_\_\_

Are only established connections permitted into the network? ☐ ☐ \_\_\_\_\_

Are measures in place to prevent the disclosure of private IP addresses and routing information to the Internet? ☐ ☐ \_\_\_\_\_

Are all disclosures of private IP addresses and routing information to external entities authorized? ☐ ☐ \_\_\_\_\_

Are security policies and operational procedures for managing firewalls documented? ☐ ☐ \_\_\_\_\_

## COMPUTER SYSTEMS AND NETWORK COMPONENTS

Are vendor-supplied defaults always changed before installing a system on the network? ☐ ☐ \_\_\_\_\_

Are default or guest accounts removed or disabled before installing a system on the network? ☐ ☐ \_\_\_\_\_

Are encryption keys changed from default at installation and changed when an employee with access to the private keys leaves the company? ☐ ☐ \_\_\_\_\_

Are administrative passwords to network devices changed when an employee with access to that information leaves the company? ☐ ☐ \_\_\_\_\_

Are default passwords on routers or access points from third parties changed at installation? ☐ ☐ \_\_\_\_\_

Is firmware on the router and wireless devices updated to support security from hacking, encryption viruses, etc. ☐ ☐ \_\_\_\_\_

Are there proper anti-virus systems in place on each device that is on the network? ☐ ☐ \_\_\_\_\_

Are anti-virus systems checked for updates? ☐ ☐ \_\_\_\_\_

Are anti-virus programs capable of detecting, removing, and protecting against all known types of malicious software (i.e., viruses, trojans, spyware, adware, rootkits and encryption viruses installed) on the computer system? ☐ ☐ \_\_\_\_\_

#### **STORED DATA**

Is the data storage amount and retention time compliant with legal, regulatory and business requirements? ☐ ☐ \_\_\_\_\_

Are there defined processes in place for securely deleting data when no longer needed for legal, regulatory, and or business reasons? ☐ ☐ \_\_\_\_\_

Are there specific retention requirements for the data that is held in your industry? ☐ ☐ \_\_\_\_\_

Does the office have written documentation to support retention requirements? ☐ ☐ \_\_\_\_\_

Is there a backup of the data? ☐ ☐ \_\_\_\_\_

Is the backup properly managed? ☐ ☐ \_\_\_\_\_

Who is responsible for daily follow-up of the backups? ☐ ☐ \_\_\_\_\_

Is there a policy in place for hourly, daily, weekly or monthly backups? ☐ ☐ \_\_\_\_\_

Are the backups held on site? ☐ ☐ \_\_\_\_\_

If stored on removable media, is the removable media encrypted? ☐ ☐ \_\_\_\_\_



Are all backups encrypted?	<input type="checkbox"/> <input type="checkbox"/>	_____
Is the office utilizing cloud-based backups?	<input type="checkbox"/> <input type="checkbox"/>	_____
Are cloud-based solutions HIPAA-compliant and did the cloud company sign a BAA?	<input type="checkbox"/> <input type="checkbox"/>	_____
Does the office have access to the passwords or encryption keys for these backups?	<input type="checkbox"/> <input type="checkbox"/>	_____
Does the office have a plan for obtaining backups in a timely manner?	<input type="checkbox"/> <input type="checkbox"/>	_____
Is there a policy in place for a data breach?	<input type="checkbox"/> <input type="checkbox"/>	_____
Are appropriate facility entry controls in place to limit and monitor physical access to the network devices including routers, firewalls, servers and workstations?	<input type="checkbox"/> <input type="checkbox"/>	_____
Are there video cameras or access-control mechanisms in place to monitor physical access?	<input type="checkbox"/> <input type="checkbox"/>	_____
Are physical and/or logical controls in place to restrict access to publicly accessible networks jacks (i.e., waiting rooms, etc.)?	<input type="checkbox"/> <input type="checkbox"/>	_____
Is media or data sent outside the office encrypted to protect the sensitive patient information?	<input type="checkbox"/> <input type="checkbox"/>	_____
Is the office using encrypted emails or a service to send sensitive patient information?	<input type="checkbox"/> <input type="checkbox"/>	_____

**For more information on HIPAA Compliance Internet Security, please visit our website at:**  
<https://ComplianceTrainingPartners.com/Reference-Materials/#internet>





## Hazard Communication Standard Labels

OSHA has updated the requirements for labeling of hazardous chemicals under its Hazard Communication Standard (HCS). All labels are required to have pictograms, a signal word, hazard and precautionary statements, the product identifier, and supplier identification. A sample revised HCS label, identifying the required label elements, is shown on the right. Supplemental information can also be provided on the label as needed.



U.S. Department of Labor



For more information:  
**OSHA**® Occupational  
 Safety and Health  
 Administration  
[www.osha.gov](http://www.osha.gov) (800) 321-OSHA (6742)

SAMPLE LABEL	
CODE _____ Product Name _____	<b>Product Identifier</b>
Company Name _____ Street Address _____ City _____ State _____ Postal Code _____ Country _____ Emergency Phone Number _____	<b>Supplier Identification</b>
Keep container tightly closed. Store in a cool, well-ventilated place that is locked. Keep away from heat/sparks/open flame. No smoking. Only use non-sparking tools. Use explosion-proof electrical equipment. Take precautionary measures against static discharge. Ground and bond container and receiving equipment. Do not breathe vapors. Wear protective gloves. Do not eat, drink or smoke when using this product. Wash hands thoroughly after handling. Dispose of in accordance with local, regional, national, international regulations as specified.  <b>In Case of Fire:</b> use dry chemical (BC) or Carbon Dioxide (CO <sub>2</sub> ) fire extinguisher to extinguish.  <b>First Aid</b> If exposed call Poison Center. If on skin (or hair): Take off immediately any contaminated clothing. Rinse skin with water.	<b>Hazard Pictograms</b>   <b>Signal Word</b> <b>Danger</b>  <b>Hazard Statements</b> Highly flammable liquid and vapor. May cause liver and kidney damage.
<b>Precautionary Statements</b>	<b>Supplemental Information</b> Directions for Use _____ _____ _____ Fill weight: _____ Lot Number: _____ Gross weight: _____ Fill Date: _____ Expiration Date: _____

OSHA 3492-01R 2016



## Etiquetas Estándar para la Comunicación de Peligro


De acuerdo con su Norma de Comunicación de Peligro (HCS), la OSHA ha actualizado los requisitos para las etiquetas de los productos químicos peligrosos. Todas las etiquetas se requieren incluir pictogramas, una palabra de advertencia, indicaciones de peligro, consejos de prudencia, identificación del producto y la identificación del proveedor. A la derecha se presenta la muestra de una etiqueta modificada de acuerdo con la HCS, que indica los elementos obligatorios. La etiqueta puede contener también información suplementaria según sea necesario.



Departamento de Trabajo  
de los EE. UU.

**Para más información:**  
**OSHA®** Administración de  
Seguridad y Salud  
Ocupacional

[www.osha.gov](http://www.osha.gov) (800) 321-OSHA (6742)

ETIQUETA DE MUESTRA	
<b>CÓDIGO</b> _____ <b>Nombre del producto</b> _____	<b>Identificación del producto</b>
<b>Nombre de la empresa</b> _____ <b>Dirección</b> _____ <b>Ciudad</b> _____ <b>Estado</b> _____ <b>Código postal</b> _____ <b>País</b> _____ <b>Número de teléfono de emergencia</b> _____	<b>Identificación del proveedor</b>
<b>Mantener el contenedor herméticamente cerrado.</b> <b>Almacenar en un lugar fresco, bien ventilado y cerrado bajo llave.</b> <b>Mantener alejado de fuentes de calor, chispas o llama abierta. No fumar.</b> <b>Usar sólo con herramientas que no generen chispas.</b> <b>Usar equipo eléctrico a prueba de explosiones.</b> <b>Tomar medidas de precaución contra descargas estáticas.</b> <b>Fijar y conectar a tierra el equipo contenedor y receptor.</b> <b>No respirar los vapores.</b> <b>Usar guantes protectores.</b> <b>Abstenerse de comer, beber o fumar cuando se usa este producto.</b> <b>Lavarse muy bien las manos después de manejar este producto.</b> <b>Desechar el producto según las especificaciones y los reglamentos locales, regionales, nacionales e internacionales.</b>	
<b>En caso de incendio:</b> usar un extintor de polvo químico (tipo BC) o de bióxido de carbono (CO <sub>2</sub> ).	
<b>Primeros auxilios</b> <b>Si hay exposición a este producto, llamar al Centro de Control de Intoxicaciones.</b> <b>En caso de contacto con la piel o el cabello: quitar de inmediato toda la ropa contaminada. Lavar la piel con agua.</b>	
<b>Pictogramas de peligro</b>  	
<b>Palabra de advertencia</b> <b>Peligro</b>	
<b>Líquido y vapores muy inflamables.</b> <b>Puede provocar daños al hígado y los riñones.</b>	
<b>Indicaciones de peligro</b>	
<b>Consejos de prudencia</b>	
<b>Información suplementaria</b> <b>Instrucciones de uso</b> _____ _____ _____	
<b>Peso lleno:</b> _____ <b>Número de lote:</b> _____ <b>Peso bruto:</b> _____ <b>Fecha de llenado:</b> _____ <b>Fecha de caducidad:</b> _____	



[ComplianceTrainingPartners.com](http://ComplianceTrainingPartners.com)

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