

INFECTION CONTROL - 2 credits VIRTUAL CE & SOCIAL



DATE: April 16, 2021
TIME: 9-12:00

COURSE TITLE: INSTRUMENT REPROCESSING WORK FLOW

COURSE DESCRIPTION: We utilize instruments over and over. Therefore, we need to validate the proper steps in safe transport, cleaning, packaging, and processing of reusable critical devices to keep clinicians and patients safe.

Upon completion of this course you will be able to:

1. Understand Spaulding's classifications.
2. Identify the steps in safe instrument reprocessing and what to look for to validate proper sterilization has taken place.

SPEAKER: Gaylene Baker, RDH, BSDH, MBA



BIO: After a 27 year clinical dental hygiene career Gaylene decided it was time to leave the operatory and help dental facilities with their infection control and prevention needs. Many dental offices are well intended but with the complexity of infection control in dentistry they often fall short with proper implementation. Gaylene came full circle combining her passion of dentistry with her passion for safety. She offers in office evaluations, trains sales teams on infection control and prevention products, and offers continuing education presentations. Gaylene received her BSDH from the University of Iowa and MBA from Aurora University, she holds a PHDH certificate in Illinois, has completed multiple OSAP Bootcamps, received the OSAP-DALE Foundation Dental Infection Prevention Certification, is a member of ADHA, and a Past President of the IDHA.

COST:

FREE TO ADHA MEMBERS
\$50 NON-MEMBERS

YOU WILL BE SENT AN EMAIL WITH THE ZOOM LINK A WEEK BEFORE THE EVENT
AN EVALUATION OF THE COURSE WILL BE REQUIRED TO RECEIVE A CE CERTIFICATE

TWO WAYS TO REGISTER: Individuals can mail a check or register on line at: <http://wi-dha1.square.site>

Groups must fill the form out below and mail check to: Patty Hooper WI-DHA Treasurer
W338S228 Foxtail Ct.
Oconomowoc, WI 53066

QUESTIONS? Email widhatreasurer@gmail.com

PLEASE PRINT AND WRITE LEGIBLY

NAME/ADHA #: _____ CITY: _____

NAME/ADHA #: _____ EMAIL: _____

NAME/ADHA #: _____ PHONE #: _____

NAME/ADHA #: _____ **COST: FREE x ___ and/or \$50 x ___**

NAME/ADHA #: _____ **TOTAL: \$ _____**