York Region
Infection Prevention and Control Lapse Report

Initial Report

Premises/Facility under investigation (name and address)

Aurora Dental Centre
89 Wellington Street East
Aurora, Ontario
L4G 1H7

Type of Premises/Facility

Dental Clinic

Date Board of Health became aware of IPAC lapse (yyyy/mm/dd)	**Date of Initial Report posting (yyyy/mm/dd)**
2025/06/03	2025/06/23
Date of Initial Report update(s) (if applicable) (yyyy/mm/dd)	**How the IPAC lapse was identified**
	Referral

Summary Description of the IPAC Lapse

- Non-compliance with adherence to the Manufacturer's Instructions for Use (MIFU) and "PIDAC Best Practices for Cleaning, Disinfection, and Sterilization of Medical Equipment/Devices in All Health Care Settings, 3rd Edition, May 2013", for the sterilization of multi-use dental equipment/devices.
- Alcohol-based hand rub (ABHR) did not have a Natural Product Number (NPN), was expired, was not labelled, and was refilled and/or topped up.
- Ultrasonic cleaning device was not tested weekly and in accordance with Manufactures' Instruction for Use (MIFU) for cleaning performance, using a commercially available testing kit.

IPAC Lapse Investigation	**Yes**	**No**	**N/A**	**Please provide further details/steps**
Did the IPAC lapse involve a member of a regulatory college?	☒	☐	☐	Royal College of Dental Surgeons of Ontario (RCDSO)
If yes, was the issue referred to the regulatory college?	☒	☐	☐	Royal College of Dental Surgeons of Ontario (RCDSO)
Were any corrective measures recommended and/or implemented?	☒	☐	☐	
Please provide further details/steps	**Corrective measures for Premises/Facility:** • Reprocess all reusable dental devices after each use in accordance with the "PIDAC Best Practices for Cleaning, Disinfection and Sterilization of Medical Equipment/Devices in All Health Care Settings, 3rd Edition, May 2013. • Monitor sterilizer parameters (time, temperature and pressure) at intervals during each cycle and log test results. • Complete three consecutive successful biological indicators (BI) in a process challenge device (PCD) following a sterilizer cycle disruption, or power failure before releasing dental devices. • Provide alcohol-based hand rub (ABHR) between 70-90%, that has a Natural Product Number (NPN), is not expired, is labelled, and is not refilled or topped up. • Test ultrasonic cleaning device at least weekly, and in accordance with Manufactures' Instruction for Use			

	(MIFU) for cleaning performance using a commercially available testing kit.

Date any order(s) or directive(s) were issued to the owner/operator (if applicable) (yyyy/mm/dd)

HPPA Section 13 Order issued on 2025/06/03.

Initial Report Comments:

HPPA Section 13 order was issued on 2025/06/03, ordering the operator to correct conditions related to reprocessing of all reusable dental devices after each use in accordance with the “PIDAC Best Practices for Cleaning, Disinfection and Sterilization of Medical Equipment/Devices in All Health Care Settings, 3rd Edition, May 2013.

Any additional Comments: (Please do not include any personal information or personal health information)

If you have any further questions, please contact
Health Connection

Telephone Number	Email Address
1-800-361-5653	Health.inspectors@york.ca

Final Report

Date of Final Report posting (yyyy/mm/dd)

2025/06/23

Date any order(s) or directive(s) were issued to the owner/operator (if applicable) (yyyy/mm/dd)

Brief description of corrective measures taken :

Re-inspection was conducted on June 10, 2025. Operator obtained three consecutive spore tests using Biological Indicators (BI) with the Ritter M9 UltraClave and Midmark M9 UltraClave before releasing dental devices for use following a sterilizer cycle disruption, or power failure. Corrective measures were implemented on June 10, 2025.

Date of all corrective measures were confirmed to have been completed (yyyy/mm/dd)

2025/06/10

Final Report Comments and Contact Information

Any Additional Comments: (Please do not include any personal information or personal health information)

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