



Dental Assisting National Board

in collaboration with



# Certified in Dental Infection Prevention and Control (CDIPC)®

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## Exam Outline and Suggested References

The purpose of the CDIPC exam is to ensure that individuals meet the minimum national standard for knowledge-based competence in dental infection prevention and control for the clinician. See [dentalinfectioncontrol.org](http://dentalinfectioncontrol.org) for CDIPC exam eligibility requirements.

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# CDIPC

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## Exam Outline Overview

### Exam Weighting by Domain

- I. Policies and Administrative Responsibilities (15%)
- II. Patient and Dental Health Care Provider Protection (25%)
- III. Environmental Asepsis and Disinfection (30%)
- IV. Sterilization and Instrument Processing (30%)

### Exam Administration

Number of Multiple-Choice Questions	100
Time for Exam (minutes)	75

The exam is administered in-person and through remote online proctoring. The candidate may choose the method they prefer. Remote proctoring allows candidates to take exams using their own computer while being monitored by webcam and microphone.

# CDIPC Exam Outline

## I: Policies and Administrative Responsibilities (15%)

- A. Laws, rules, regulations, standards and guidelines as they apply to infection prevention and control, including but not limited to:
  - 1. infection prevention and control policies and procedures.
  - 2. infection prevention and control programs and compliance.
  - 3. manufacturer's instructions for use and reuse of devices.
  - 4. personal protective equipment (PPE).
  - 5. Centers for Disease Control and Prevention (CDC) immunization for healthcare personnel.
- B. Hazard communication standards as they relate to infection prevention and control practices and products, including but not limited to:
  - 1. disinfection and sterilization chemicals.
  - 2. safety data sheets.
  - 3. regulated medical waste disposal.
- C. Infection prevention and control supplies inventory.

## II: Patient and Dental Healthcare Personnel Protection (25%)

- A. Infection prevention and control concepts, including but not limited to:
  - 1. chain of infection.
  - 2. modes of infectious disease transmission.
  - 3. transmission of emerging diseases.
- B. Patient and dental healthcare personnel safety
  - 1. Maintain aseptic conditions.
  - 2. Standard precautions to prevent the spread of infectious diseases.
  - 3. Patient clinical safety precautions, including safety eyewear.
  - 4. Hand hygiene protocols based on procedure, including selection of product and duration.
  - 5. Protect the patient and dental healthcare personnel by using PPE.
    - a. Select PPE for use based on task.
    - b. PPE protocols, including but not limited to:
      - i. donning.
      - ii. doffing.
      - iii. preparing for reuse.
      - iv. disposal.
  - 6. Prevent backflow in low-volume evacuation.

**C. Occupational exposure and safety**

1. Protocols for exposure prevention and post-exposure management.
2. Sharps safety, including but not limited to:
  - a. engineering and work practice controls.
  - b. selection, evaluation and use of sharps safety devices.
  - c. safe injection practices.
3. Personnel work restrictions as they apply to medical conditions and work-related illnesses.

**III: Environmental Asepsis and Disinfection (30%)**

**A. Infection prevention and control protocols to prevent cross-contamination.**

**B. Manufacturers' Instructions for Use (IFU).**

**C. Surface Asepsis**

1. Procedures and preparation of products for cleaning/disinfection contaminated surfaces.
2. Use of surface barriers, including but not limited to:
  - a. selection.
  - b. placement.
  - c. removal and disposal.

**D. Infection prevention and control protocols, including but not limited to:**

1. radiography.
2. laboratory materials/equipment.
3. evacuation systems.
4. biological materials.
5. high-tech devices.
6. laser/electrosurgery plumes or surgical smoke.
7. oral surgical procedures.
8. technique for parenteral medications.

**E. Dental unit water quality protocols, including but not limited to:**

1. maintaining water quality.
2. monitoring and testing.
3. improvement methods.
4. use of sterile irrigation water.
5. boil-water advisories and procedures.

**F. Incoming/outgoing lab cases and laboratory equipment processing protocols.**

**G. Disposal procedures, including but not limited to:**

1. waste types.
2. disposable items.

**IV: Sterilization and Instrument Processing (30%)**

**A. Sterilization/disinfection procedures based on Spaulding classifications.**

**B. Instrument processing procedures, including but not limited to:**

1. preparing work area for reprocessing contaminated items.
2. transporting and receiving items.
3. cleaning and/or decontaminating items.
4. inspecting items for cleanliness and functionality.
5. following manufacturer's instructions for reprocessing items.
6. selecting packaging method and materials.
7. assembling, packaging and labeling items, including slow-speed/high-speed handpieces (with or without motors).
8. selecting and placing biological, chemical, and/or mechanical indicators.
9. loading and unloading sterilizer.
10. preparing work area for sterile storage.
11. storing and distributing sterile items to point-of-use.
12. immediate use sterilization.

**C. Sterilization documentation.**

1. Document sterilization load contents.
2. Record instrument processing in sterilization logbook.

**D. Sterilization monitoring.**

1. Package integrity (pre-sterilization, post-sterilization).
2. Sterilization failure and device malfunctions.
3. Output of sterilization tests and sign-off procedures.

## CDIPC Exam Suggested References

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DANB exam committees use the following textbooks and reference materials to develop this exam. This list does not include all available study materials; these are the resources that exam committees have determined provide the most up-to-date information needed to meet a determined level of competence on this exam. Any one reference will likely not include all the study material required to pass the exam. **Please note that previous editions of the resources below may be used for study purposes if the previous version was published within the past 5 years.**

This list is intended to help prepare for this exam. It is not an endorsement of the publications. You should prepare for the exam using as many different study materials as possible.

### Suggested Exam Preparation References

- Centers for Disease Control and Prevention (CDC). [www.cdc.gov](http://www.cdc.gov).
  - Guidelines for Infection Control in Dental Health-Care Settings — 2003* (MMWR, Vol. 52, RR 17). [www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a1.htm)
  - Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care*. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Oral Health; 2016. [www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/index.html](http://www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/index.html)
- U.S. Department of Labor, Occupational Safety and Health Administration (OSHA). [www.osha.gov](http://www.osha.gov).
  - Hazard Communication standard* (Code of Federal Regulations #29, Part 1910). <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1200>
  - Bloodborne Pathogens Standard* (1910.1030). [www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030](http://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030)
- Miller, C.H. (2018). *Infection Control and Management of Hazardous Materials for the Dental Team* (6th ed.). Elsevier Health Sciences (US).

### Additional/Optional Study Resources

- Bird, Doni L., and Debbie S. Robinson. *Essentials of Dental Assisting*. 6th ed. Elsevier/Saunders, 2017.
- Bird, Doni L., and Debbie S. Robinson. *Modern Dental Assisting*. 12th ed. Elsevier/Saunders, 2018.
- Phinney, Donna J., and Judy H. Halstead. *Dental Assisting: A Comprehensive Approach*. 5th ed. Delmar, 2018.
- The Organization for Safety, Asepsis and Prevention (OSAP). [www.osap.org](http://www.osap.org).
  - From Policy to Practice: OSAP's Guide to the Guidelines
  - OSAP Dental Infection Control Bootcamp™
  - OSAP's OSHA & CDC Guidelines: Interact Training System
- The DALE Foundation. [www.dalefoundation.org](http://www.dalefoundation.org).
  - DANB ICE Review*
  - DANB ICE Practice Test*
- OSAP-DALE Foundation. [www.dentalinfectioncontrol.org](http://www.dentalinfectioncontrol.org)
  - OSAP-DALE Foundation Dental Infection Prevention and Control eHandbook*
  - Understanding CDC's Summary of Infection Prevention Practices in Dental Settings*
  - General Aspects of Instrument Processing*

# Exam Development and Maintenance

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## How exams are developed

DANB exams are developed using this exam outline, which is annually reviewed by subject matter experts. The outline is developed using a content validation study, which includes a job analysis survey where practicing DANB certificants and certificate holders are asked how often tasks are performed and how critical competent performance of tasks is to the health and safety of the public and oral healthcare worker. This study is conducted every five to seven years to ensure the outline is consistent with current clinical practices. The Organization for Safety, Asepsis and Prevention (OSAP) Board of Directors and OSAP members participated in the CVS and development of this exam outline, which was reviewed and approved by DANB's Board of Directors.

## How the passing standard is determined

The exam passing standard is evaluated and a Standard Setting Study is conducted the year following a Content Validation Study. DANB uses a modified Angoff standard setting method and convenes a panel of subject matter experts to evaluate and make judgements about the difficulty of the exam items and the criticality of the content of the exam items. Modified Angoff standard setting methods are commonly used to set the passing standards for certification exams. DANB's Board of Directors approves all changes to DANB exam passing standards.

## How exams are scored

In a criterion-referenced examination, a candidate must obtain a score equal to, or higher than, the passing score to pass the test. A minimum passing scaled score of 400 must be obtained to pass the exam with scores ranging from 100 to 900 points. Exam results are reported as a "scaled score" which is neither a "number correct" nor a "percent correct" score. Performance on the exam is not compared to the performance of others taking the exam.

## Receiving your exam results

You will be notified by email within 1-3 business days after your exam that your exam results are available in your online DANB account.

## State Regulations

Each state's dental board implements regulations and establishes rules for delegating legally allowable duties to dental assistants. Passing one or more of the DANB component exams or earning DANB certification only conveys authority to perform these duties in those states that recognize these exams or this certification as meeting state dental assisting requirements. This information is available at [www.danb.org](http://www.danb.org).