Organisation name Site or unit		POLICY Single-use items and reprocessing limits	
Document ID	DEN-POL-001	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Policy · DEN-POL-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 31.4

At a glance

- Items labelled single-use are used once and then discarded.
- An item is reprocessed only where the manufacturer permits it.
- Each reprocessing is recorded with its cycle.
- No single-use item is reprocessed for any reason.
- Stop and get help straight away if: a single-use item is cleaned and used on a second patient.

1. 1. Purpose

To make sure single-use items are never reused and that any reprocessing is allowed and recorded (31.4).

2. 2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. 3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. 4. Background

A needle, bur or file made for one use that is cleaned and used again can break, transmit infection or fail in the mouth. Single-use items must be discarded after one patient.

5. 5. Responsibilities

Role	Responsibility	Competence
Clinical director	Approves the list of items that may be reprocessed	Medical director
Clinical staff	Use and discard single-use items as labelled	Clinical director

6. 6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. 7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. 8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. 9. Procedure

Step 1. Check the label.

- Before use, check the item is labelled for single use or for reprocessing.

Key point: Checked.

Step 2. Discard after use.

- Discard a single-use item after one patient.
- Do not clean it for reuse.

Key point: Discarded.

10. 10. Decision points

- No decision points in this procedure.

11. 11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. 12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. 13. Monitoring

Measure	Target	Frequency	Owner	If not met
Single-use items reprocessed without permission	0	Monthly	Clinical director	Escalate to the medical director

14. 14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility's records policy years

15. 15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. 16. Related documents

ID	Title	Use
DEN-REG-001	Sterilisation cycle and load register	Register

17. 17. Evidence

Reference	Note
E-009	Based on the CDC guidelines for infection control in dental health-care settings (Kohn et al., 2003), ISO 17665 for moist-heat sterilisation, the Minamata Convention on Mercury (2013), IAEA Specific Safety Guide SSG-46 (2018), Council Directive 2013/59/Euratom, and the ADA guidelines on sedation (2016).
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. 18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

19. References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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