Decontamination Agreement

To: *[Dental Laboratory/Supplier]*

From: *[Dental Practice]*

All dental impressions and appliances from the above dental practice have

been disinfected by immersion in *[specify agent, duration and temperature]*

All handpieces and other instruments from the above dental practice have

been decontaminated by *[specify method used to clean and sterilize]*

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Version history**

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| **Date** | **Version No.** | **Summary of change(s)** | **Updated by** | **Next review date** |
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