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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