

PUBLIC HEALTH UNIT INFECTION PREVENTION AND CONTROL LAPSE REPORT

Initial Report

Premise/facility under investigation (name and address)	Parodi Denture & Implant Clinic 11-226 Speedvale Ave, Guelph ON, N1H 1C4
Type of premise/facility: (E.g. clinic, personal services setting)	Denturist
Date Board of Health became aware of IPAC lapse	August 6, 2026
Date of Initial Report posting	September 8, 2026
Date of Initial Report update(s) (if applicable)	N/A
How the IPAC lapse was identified	Complaint by a member of the public
Summary Description of the IPAC Lapse	During the complaint inspection it was observed that pre-cleaning, cleaning, and sterilization practices did not follow the Provincial Infectious Diseases Advisory Committee (PIDAC) Best Practice Standards for medical/dental device reprocessing.

IPAC Lapse Investigation

Did the IPAC lapse involve a member of a regulatory college?	Yes
If yes, was the issue referred to the regulatory college?	Yes
Were any corrective measures recommended and/or implemented?	Yes
Please provide further details/steps	Follow Infection Prevention and Control (IPAC) Best Practice documents as provided by the Provincial Infectious Diseases Advisory Committee (PIDAC) and the Canadian Safety Association (CSA) as they relate to reprocessing medical/dental equipment.
Date any order(s) or directive(s) were issued to the owners/operators (if applicable)	N/A

Initial Report Comments and Contact Information	
Any Additional Comments (Do not include any personal information or personal health information)	Staff responded immediately to implement IPAC practices as per current PIDAC Best Practice for cleaning and reprocessing of dental equipment. Staff voluntarily agreed to use single-use equipment until reprocessing of reusable equipment meets PIDAC Best Practice.
If you have any further questions, please contact:	
Name	Gillian Dyck
Title	Manager, Infection Control
E-mail address	Gillian.Dyck@wdgpublichealth.ca
Phone number	1-800-265-7293 x4452
Final Report	
Date of Final Report posting:	
Date any order(s) or directive(s) were issued to the owner/operator (if applicable)	
Brief description of corrective measures taken	
Date all corrective measures were confirmed to have been completed	
Final Report Comments and Contact Information	
Any Additional Comments (Do not include any personal information or personal health information)	
If you have any further questions, please contact:	
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Title	Manager, Infection Control
Email address	Gillian.Dyck@wdgpublichealth.ca
Phone number	1-800-265-7293 x4452