

Practice & Equipment

COMPLIANCE TRACKER 2026

Practice Name:

Managing Owner Name:

Practice Address:

Status	Action Item	Description	Date Completed
☐	Amalgam Separator Maintenance	Execute and document structural servicing, filter replacements, and annual recycling collection logs for mercury amalgam waste streams.	
☐	Biomedical Waste Disposal	Renew contracts with medical waste haulers and maintain manifest tracking logs for the disposal of sharps and biohazardous materials.	
☐	Dental Unit Waterline Testing	Conduct biological testing of all operator waterlines.	
☐	Radiation Machine Facility Registration	File annual x-ray machine facility renewals and coordinate physical tube calibrations with state health departments or radiation control boards.	
☐	Fire & Emergency Systems Inspection	Complete and document annual inspections of facility fire extinguishers, exit signage, smoke alarms, and emergency lighting.	
☐	Medical Gas Systems Testing	Verify structural integrity, pressure levels, and scavenging efficiency for nitrous oxide and oxygen delivery systems.	
☐	Facility-Wide Security Risk Assessment	Execute and document Security Risk Analysis evaluating encryption, network data pathways and patient record storage vulnerabilities.	
☐	Business Associate Agreements (BAAs)	Audit, update, and execute active BAAs for all corporate third-party infrastructure vendors.	
☐	HIPAA Privacy Officer Designation	Formally document the appointment of the practice's privacy and security officers responsible for enterprise data oversight.	
☐	Exposure Control Plan	Annual review, signature verification, and localized updating of the practice's physical, written OSHA Exposure Control Plan.	
☐	Hazard Communication Manual	Audit and update the Safety Data Sheets (SDS) repository for all compounds and chemical products utilized across clinical operations.	
☐	OSHA Poster Verification	Ensure current state and federal labor compliance and safety posters are visibly displayed in designated employee areas.	



Equipment Log

COMPLIANCE TRACKER 2026

Practice Name:

Managing Owner Name:

Practice Address:

Servicing & Maintenance Log

Service Date	Equipment Name & Model	Serial / Asset ID	Service Type	Work Performed & Notes	Technician / Firm (Sign)
			☐ Routine/Prev ☐ Repair/Calib		
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