COVID-19 Personal Protective Equipment Guidelines 2/4/2021



Definitions:

Normal Use- The practice of using PPE for one encounter with one patient and then disposing of it.

Extended Use- The practice of wearing the same PPE for repeated close contact encounters with several patients, without removing PPE between encounters.

Reuse- The practice of using the same PPE for multiple encounters with patients but removing it after each encounter.

Low Risk- No Patient Contact			
Patient	Source Control for Patient	Provider/Staff	Required Mask (No PPE)
No patient contact	 Social Distancing (6 feet)/Barriers 	 Non-clinical duties/environment (e.g., enclosed registration windows and clinic administrators) 	■ Cloth Mask- extended use/reuse

PPE Extended Use/Reuse Guidelines

- A cloth mask may be worn by staff whose duties do not involve patient contact, but should only be used for source control and not considered PPE.
- Cloth masks should be laundered daily and re-used.
- When available, facemasks are preferred over cloth face coverings for Health Care Practitioners (HCPs)

Low Risk- Indirect Patient Care			
Patient	Source Control for Patient	Provider/Staff	Required PPE
 Indirect patient contact only 	 Procedural mask for all patients 	 Clinical care that does not involve direct physical contact with patients (e.g., screening at building entrances). 	 N95 Mask/PAPR- not required Procedural Mask- extended use Face Shield/Goggles- clean after shift and reuse Gown- extended use Gloves- extended use
PPF Extended Use/Reuse Guidelines			

- Procedural masks may be worn throughout shift when performing indirect patient care duties. Discard mask at the end of a shift, or immediately if risk of exposure (e.g., patient coughs or sneezes) or visibly soiled or damaged.
- If gown is required, may be worn throughout shift unless soiled or damaged and discarded at the end of the day. Do not re-use or store used gowns.
- If gloves are required, may be worn for up to two hours unless soiled or damaged. Hand hygiene should be performed regularly over gloves, including after contact with anyone and before/after putting on or taking off gloves.

Low Risk- Direct Patient Care (Non-COVID & Asymptomatic)			
Patient	Source Control for Patient	Provider/Staff	Required PPE
 Asymptomatic patient that is not a Patient Under Investigation (PUI) for COVID 	 Procedural mask for all patients 	 Procedural mask should be used during routine clinical care of all patients, including those who are asymptomatic and have no known exposure risks. 	 N95 Mask/PAPR- not required Procedural Mask- extended use Face Shield/Goggles- reuse Gown- If indicated, single use Gloves- If indicated, single use

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PPE Extended Use/Reuse Guidelines

- Procedural masks may be worn throughout shift when providing routine care to asymptomatic patients who are not under investigation for COVID-19. Discard mask at the end of a shift, or immediately if risk of exposure (e.g., patient coughs or sneezes) or visibly soiled or damaged.
- If gown or gloves are required, they should be discarded after each patient encounter.

Moderate Risk- Direct Patient Care [COVID (non-aerosol generating procedure), and/or Symptomatic]			
Patient	Source Control for Patient	Provider/Staff	Required PPE
 Patient with confirmed COVID-19 or Patient Under Investigation (PUI) 	Procedural Mask	 Non-procedure encounters & routine clinical care (e.g., wound check, x-ray, lab draw, exam). 	■ N95 Mask/PAPR- extended use/re-use ■ Face Shield/Goggles- reuse ■ Gown- single use ■ Gloves- single use

PPE Extended Use/Reuse Guidelines

- N95 respirator may be worn for extended periods in COVID-19 testing areas (e.g., drive-through testing sites) when used in combination with a face shield. Use of a surgical mask over an N95 may negatively affect performance of the respirator and is not approved for use.
- N95 masks may also be considered for re-use during periods of short supply. Extended use is preferred over re-use whenever possible due to potential risk of self-contamination through frequent donning and doffing of the same equipment.
- Follow manufacturer's recommendations for maximum number of uses (up to five consecutive uses or 8 hours of continuous use if no recommendations given).
- Replace N95 respirator if it can no longer maintain a good seal or becomes wet, visibly soiled or damaged, or hard to breathe through.
- Discard N95 masks in designated reprocessing bin after each aerosol generating procedure.
- Discard gown and gloves after each aerosol generating procedure.
- Face shields and goggles may be reused when cleaned with an approved disinfectant for recommended "wet time" between uses.

High Risk- Aerosol Generating Procedures			
Patient	Source Control	Provider/Staff	Required PPE
 Patient with confirmed COVID-19 Patient Under Investigation (PUI) for COVID-19 	Procedural Mask	 COVID screening with NP swabs Nebulizer therapy Other aerosol generating procedures 	■ N95 Mask/PAPR- extended use/re-use ■ Face Shield/Goggles- re-use ■ Gown- single use ■ Gloves- single use

PPE Extended Use/Reuse Guidelines

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- N95 masks may also be considered for re-use during periods of short supply. Extended use is preferred over re-use whenever possible due to potential risk of self-contamination through frequent donning and doffing of the same equipment.
- Follow manufacturer's recommendations for maximum number of uses (up to five consecutive uses or 8 hours of continuous use if no recommendations given).
- Replace N95 respirator if it can no longer maintain a good seal or becomes wet, visibly soiled or damaged, or hard to breathe through.
- Discard N95 masks in designated reprocessing bin after each aerosol generating procedure.
- Discard gown and gloves after each aerosol generating procedure.
- Face shields and goggles may be reused when cleaned with an approved disinfectant for recommended "wet time" between uses.