

## All Types of PPE

- Ensure only essential personnel enter patient care areas to limit the amount of PPE used on patients.
- Consider alternative mechanisms for healthcare provider (HCP) and patient interactions including telephones, video monitoring, and video-call applications on cell phones or tablets.
- Restrict or exclude visitors from entering the rooms of patients with known or suspected COVID-19 and other diagnosis requiring isolation/PPE use by HCPs.
- Consider storing PPE in secure locations to ensure utilization only by approved HCP.
- Consider delaying or rescheduling elective visits, admissions, surgeries and procedures.
- If gowns or masks are being reused, ensure that staff are educated on how to properly remove and store items to prevent contamination (<https://www.cdc.gov/niosh/npptl/pdfs/PPE-Sequence-508.pdf>)

## N-95 Respirators

- Limit respirator use to HCP who are performing an aerosol generating procedure, working in a sterile field, or may be exposed to high velocity splashes, sprays, or splatters of blood or body fluids.
- OSHA has allowed that annual fit testing can be temporarily suspended if a HCP has already been fit tested to that respirator (see memo here: <https://www.osha.gov/memos/2020-03-14/temporary-enforcement-guidance-healthcare-respiratory-protection-annual-fit>). If fit testing must be performed, qualitative methods should be used.

## Gowns

- Prioritize the use of gowns with COVID-19 patients for:
  - Aerosol-generating procedures (such as suctioning, nebulizer treatments, and other respiratory treatments or procedures)
  - Care activities where splashes and sprays are anticipated
  - High-contact patient care activities that provide opportunities for transfer of pathogens to the hands and clothing of healthcare providers (dressing, bathing/showering, transferring, providing hygiene, changing linens, changing briefs or assisting with toileting, device care/use, or wound care)
- Consider extending the use of single use gowns for healthcare providers without changing the gown between patients who have the same infectious disease diagnosis or exposure and are maintained in a confined area. If the gown becomes contaminated, replace it.
- Continue to use gowns for patients on Contact Precautions for multi-drug resistant organisms (e.g. MRSA, CRE, etc.)

## Surgical Masks

- Re-use surgical masks during care for multiple patients during activities with low transmission risk (such as dispensing medications). If the mask becomes contaminated, replace it.
- Use surgical masks beyond the manufacturer-designated shelf life in a setting where there is a lower risk of transmission (e.g. non-aerosol generating procedures). Masks should be visibly inspected prior to use, and discarded if there are concerns (such as degraded materials or visible tears).

Adapted from:

- <https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html>
- <https://www.fda.gov/medical-devices/letters-health-care-providers/surgical-mask-and-gown-conservation-strategies-letter-healthcare-providers>
- <https://www.fda.gov/medical-devices/letters-health-care-providers/surgical-mask-and-gown-conservation-strategies-letter-healthcare-providers>