

MSHS COVID-19 Personal Protective Equipment (PPE) Practices

Updated: March 25, 2020

This policy is subject to change based upon updated information from the CDC, NYS Department of Health, and other sources.



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PUI and COVID-19 Positive Definitions

PUI = Person/Patient under investigation


- Test pending for COVID-19
- Isolation Room Type = Single Room*
- Isolation Designation: Special Droplet + Contact Precautions

COVID-19 Positive


- Positive result for COVID-19
- Cohorting allowed*
- Isolation Designation: Special Droplet + Contact Precautions

****Does not need to be negative pressure unless requiring frequent aerosolized procedures***


Isolation Precaution Signage




Special Droplet Precautions



Visitor Restriction.
ALL visitors must check in at nursing desk before entering.
Las visitas deben anunciarse en el mostrador de enfermería antes de entrar a esta habitación.




Clean hands when entering and exiting the room
Límpiese las manos al entrar y salir del cuarto




Put on a surgical mask prior to entering for usual care
Colóquese una máscara quirúrgica antes de entrar


OR




Put on a fitted N-95 mask prior to entering for aerosolizing procedures
Colóquese una máscara N-95 a medida antes de entrar




Put on a face shield prior to entering
Colóquese una máscara quirúrgica antes de entrar



Disinfect shared patient equipment
Desinfecte equipo que se comparta entre pacientes



Keep the door closed
Mantenga la puerta cerrada



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COVID-19 03-20



Contact Precautions



Visitors must report to the nurses' station before entering this room.
Las visitas deben anunciarse en el mostrador de enfermería antes de entrar a esta habitación.



Clean hands when entering and exiting the room
Límpiese las manos al entrar y salir del cuarto



Put on a gown and gloves
Póngase una bata y guantes



Disinfect shared patient equipment
Desinfecte equipo que se comparta entre pacientes



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PPE = Personal Protective Equipment

► Who Requires PPE?

- Staff caring for any PUI or confirmed positive COVID-19 patient will follow Special Droplet Precautions in addition to Contact Precautions

► What constitutes PPE for PUI, and Positive COVID-19?

- Surgical mask, Gown, Gloves, Eye protection (N95-respirator instead of surgical mask for aerosol generating procedures*)



Recommendations for Gown Use in the Setting of COVID-19 Pandemic

- ▶ COVID-19 patients and patients under investigation (PUIs) are on Special Droplet and Contact Precautions; gowns should be worn to protect from droplets
- ▶ The gowns currently available in our hospitals for care of a COVID-19 patient are adequate to protect the healthcare worker from contamination even during aerosol generating procedures
- ▶ The same gown can be worn when caring for COVID-19 patients cohorted in the same room or on an entire COVID unit. This allows the healthcare worker to complete their tasks efficiently and avoid the risk of contamination by doffing less frequently
 - If a COVID-19 patient is not cohorted in a COVID-19 unit, gowns and gloves must be discarded before leaving the room
- ▶ Gloves need to be removed (doffed) and hand hygiene performed in between COVID-19 patients
- ▶ If the gown becomes visibly soiled or torn, please exit the room or the unit and remove and discard as per usual practices

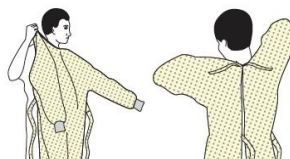
Sequence for Putting on (Donning) PPE

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



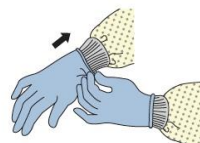
3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



4. GLOVES

- Extend to cover wrist of isolation gown



USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene



Sequence for Taking off (Doffing) PPE

HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. Remove all PPE before exiting the patient room except a respirator, if worn. Remove the respirator after leaving the patient room and closing the door. Remove PPE in the following sequence:

1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggle or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container

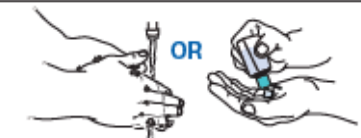


4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE



*Note, Example 2 for doffing which is commonly used in the OR can be found at this website: <https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf>

Surgical Face Mask General Practices

- ▶ Based on the current situation and recommendations, in both the inpatient and outpatient setting, when providing direct patient care we recommend a surgical mask should be worn
 - Surgical masks can be worn when collecting nasopharyngeal and oropharyngeal swabs for COVID-19 testing
- ▶ For providers and staff who have had a high risk exposure to COVID-19, surgical masks should be worn in patient care areas and all common areas, unless an N95 respirator is indicated
- ▶ Wear a mask for the duration of the work shift unless it becomes soiled or wet, in which case it should be changed
- ▶ Please discard your surgical mask before you leave work

Appropriate Use of Face Masks

Setting	Activity	Type of Mask
Inpatient, including Emergency Department*		
Patient/Procedure Room	Any	Surgical mask
	Performing an aseptic procedure	Surgical mask (eye protection with face shield or goggles may be necessary if splashes can occur)
	Providing usual care** for People Under Investigation (PUI) or COVID-19 patients (Special Droplet precautions)	Surgical mask with eye protection (attached or separate face shield/ goggles)
	Performing aerosol-generating procedures for PUI or COVID-19 patients (e.g., tracheal intubation, non-invasive ventilation, tracheostomy, cardiopulmonary resuscitation, bronchoscopy)	N-95 respirator with eye protection (attached or separate face shield/goggles)
Laboratory	Working in Mycobacteriology Lab	N-95 respirator with eye protection (attached or separate face shield/goggles)
	Working in the AFB lab or working with respiratory samples	Surgical mask (with eye protection if risk of splash)
Administrative Areas	Administrative tasks that do not involve contact with patients	No mask needed
Urgent Care	Any	Surgical mask
	Collecting specimens	Surgical mask with eye protection (attached or separate face shield/goggles)
All Testing Sites	Any	Surgical mask
	Collecting specimens	Surgical mask with eye protection (attached or separate face shield/goggles)
Ambulatory facilities, not covered by the above		
Triage	Screening of patients	Surgical mask
	Cleaning between patients	Surgical mask
Consultation Room	Examination of patients with <u>NO</u> respiratory symptoms	Surgical mask
	Examination of patients with respiratory symptoms	Surgical mask with eye protection (attached or separate face shield or goggles)
	Cleaning between patients	Surgical mask
Administrative Areas	Administrative tasks that do not involve contact with patients	No mask needed

***High risk exposure to COVID-19, surgical masks should be worn in patient care areas and all common areas, unless an N95 respirator is indicated**

****Usual Care:** includes direct care as well as cleaning of the patient room and delivering meals

What procedures require an N95 Respirator to prevent a high risk exposure?

► **An N95 respirator is needed for the following aerosolizing procedures:**

- BIPAP, CPAP, and high flow (for the duration of therapy)
- Intubation and bronchoscopy
- Sputum induction or endotracheal aspirate collection
- Nebulizers
- Tracheostomy
- Chest physiotherapy
- Trach and airway suctioning
- Bronchoalveolar lavage



If N95 is indicated, do not use surgical mask

****Please note that collecting nasopharyngeal (NP) and oropharyngeal (OP) swabs for testing for respiratory viruses including COVID-19 testing and TEE/EGD procedures are not considered aerosolizing and do not require an N95 Respirator***

N-95 Respirator General Practices

- ▶ N-95 respirators should be worn for the routine care of COVID-19 patients or Persons Under Investigation (PUI) when the unit/treatment area is endemic and has regularly occurring aerosolizing procedures (Surgical masks should be worn in all other situations)
- ▶ MSHS supports both extended use (wearing the same N95 respirator for repeated close contact encounters with several different patients *without removing* between patient encounters) and limited reuse (using the same N95 respirators for multiple encounters with patients *but doffing after each encounter*)
- ▶ MSHS has a reprocessing program that sterilizes used N95 respirators and face shields that are not misshapen, heavily soiled or wet

Limited Reuse and Extended Use of N95 Respirators and Face Shields

► LIMITED REUSE

- **Limited reuse** refers to the practice of using the same N95 respirators for multiple encounters with patients, but doffing after each encounter
- The respirator is stored in between encounters and is donned prior to the next encounter with a patient

► EXTENDED USE

- **Extended use** refers to the practice of wearing the same N95 respirators for repeated close contact encounters with several different patients, *without removing* between patient encounters
- Extended use is well suited to situations wherein multiple patients with the same infectious disease diagnosis, whose care requires use of a respirator, are cohorted (e.g., housed on the same hospital unit or same room)
- **Instructions:** The Limited Reuse instructions on the next slide applies when patient care is complete or at the end of shift

Instructions for the Limited Reuse of N95 Respirators and Face Shields

After completing care of a known or suspected COVID-19 patient:

1. Doff all PPE except mask and face shield while in the patient room
2. Perform hand hygiene while in the patient room
3. Exit room while wearing face shield and mask
4. Apply a clean pair of gloves
5. Remove face shield from the back of the head
6. Use a hospital-approved, non-bleach germicidal wipe (e.g. hydrogen peroxide) to disinfect face shield (wipe inside to outside) and allow to dry for recommended time on the germicidal wipe canister
7. Place clean face shield in dedicated paper bag to that individual employee (and patient if applicable) & place in designated area/hang outside of patient room
8. Remove gloves
9. Perform hand hygiene
10. Put on clean gloves
11. Remove N95 respirator from back of head
12. Place N95 respirator in dedicated paper bag to that individual employee (and patient if applicable) and place in designated area
13. Prior to reuse, wipe the face shield with alcohol to remove any residue
14. Discard the N95 respirator and face shield at the end of the users shift.

Available Masks

Masks from a variety of sources are available on the units. All masks below have approved for use by MSHS with special droplet precautions.



Precert 65-3348
DualGard™ Foam
Shield™ Surgical Mask
w/Stitch Knit Ties



Medline NON27381
Surgical Cone-Style Face
Mask with 1 band, blue



Precept 15220
Lite Pouch Surgical
Mask



Precert 65-3344
DualGard™ Surgical Mask
w/Extended Shield



*Medline NON27412EL/
NON27375/ NON27120*
Procedure Face Mask;
Pink, Blue, Yellow



Medline NON27710
Fluid-Resistant
Surgical Face Masks
with Eye Shield



Precert 65-3344
FluidGuard™ 160 Anti-Fog
Mask w/Anti-Glare Shield



Precept
14401/15111/15121
FluidGuard™ Procedure
Mask; Blue and Yellow



3M NEXCARE 1820
Nexcare™ Earloop
Mask, H1820



Halyard 48247
Surgical Mask Fluid Shield
with Visor, Orange



Precept 15215, Aramsco
A24139;
Surgical Mask



Halyard 48100, 48105
Surgical Mask Lite
One, Green and Blue

Eye Protection in the Setting of COVID-19

- ▶ Acceptable eye protection: a surgical mask with an attached face shield, a full face shield, or goggles
- ▶ According to the CDC, goggles are an effective alternative to face shields and will protect the eyes from splashes, sprays and droplets
- ▶ The benefit of a full face shield is that it helps with the conservation of surgical masks or N-95 respirators as they are less likely to be contaminated during any encounters with COVID-19 patients and PUIs

PPE Recommendations for Entire Unit of COVID+/PUIs (or Patient Room with Multiple COVID+/PUIs)

- ▶ PPE according to Special Droplet Precautions for the usual care of COVID+ patients or PUI: surgical mask, eye protection, gloves and gown
 - N95 respirator for aerosolizing procedures only
- ▶ Gloves must be changed between patients
- ▶ Hand hygiene must be performed when changing gloves
- ▶ The rest of the PPE does NOT have to be changed between patient encounters