

Using PPE Outside of Healthcare Settings

September 9, 2020

When should PPE be used?

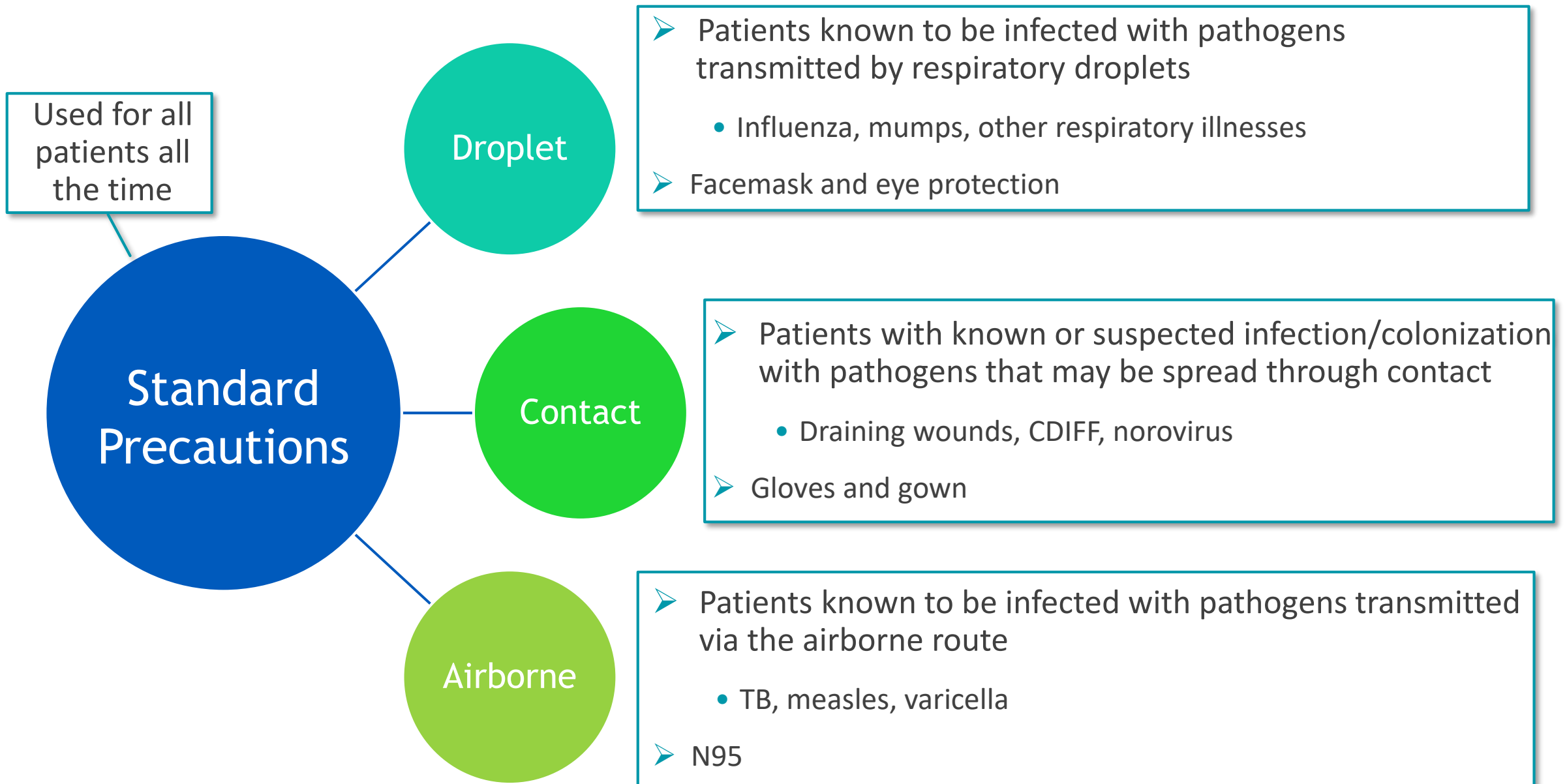


► Standard Precautions

- Should be used with all patients consistently regardless of infectious status
 - ◆ Gloves - when there will be contact with blood, body fluids, mucous membranes, non-intact skin, or other potentially infectious materials
 - ◆ Protective clothing (e.g. gowns) - when there will be contact with blood, body fluids, or other potentially infectious substances to protect skin and prevent soiling or contaminating clothing
 - ◆ Mouth, nose, and eye protection - when there will be splashes or sprays of blood, body fluids, secretions, or excretions

► Transmission-based Precautions

- Used when Standard Precautions alone are insufficient to prevent the spread of pathogens
 - ◆ Droplet
 - ◆ Contact
 - ◆ Airborne



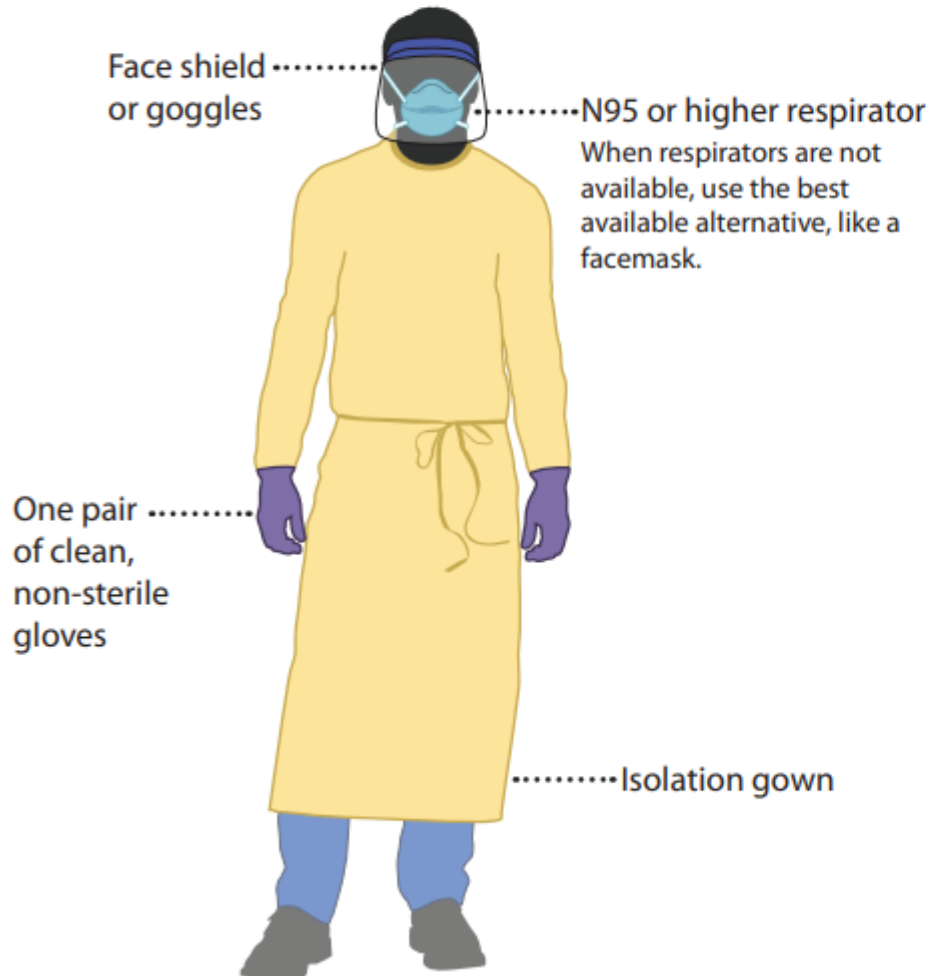
Transmission-based Precautions

- ▶ Which precautions are needed for COVID-19?
 - Standard Precautions + Droplet and Contact Precautions

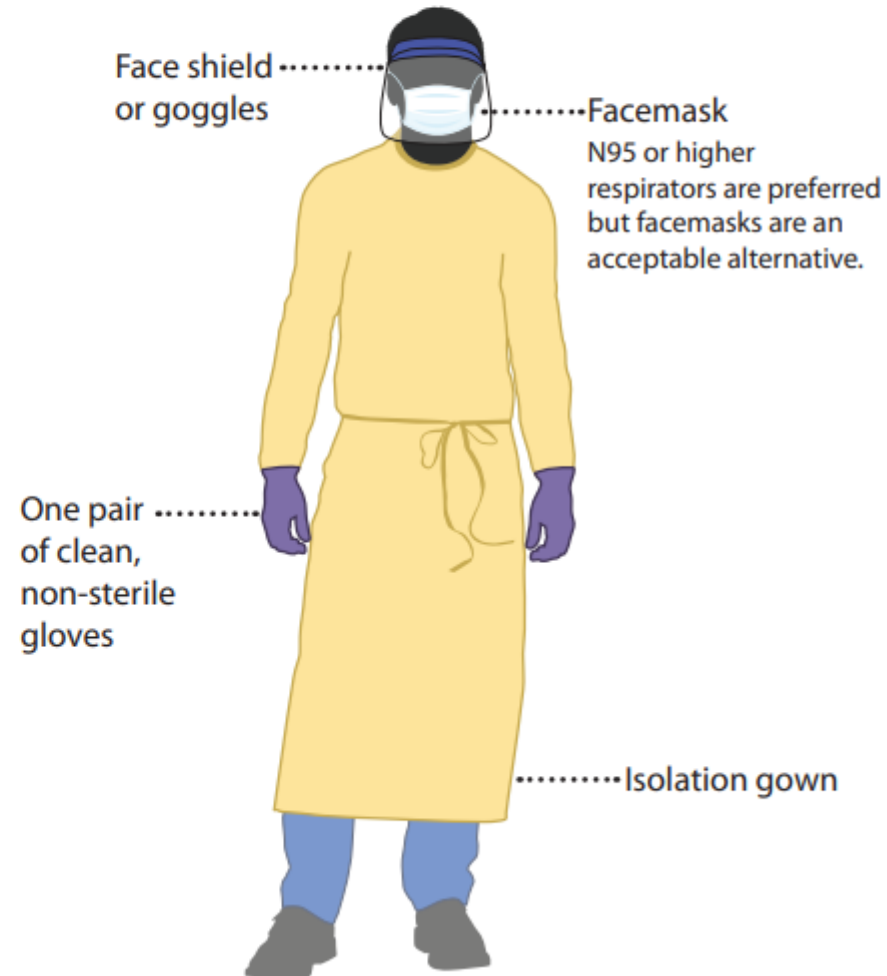
- ▶ People who are symptomatic or known to be infected with COVID-19 do **not** need to be cared for in negative pressure rooms
 - Place symptomatic/infected persons in a private room and keep the door closed
 - Staff caring for these persons should wear a N95 respirator, if possible, along with the other PPE listed on the next slide
 - ◆ If N95s are unavailable, wear a surgical facemask

COVID-19 Personal Protective Equipment (PPE) for Healthcare Personnel

Preferred PPE – Use N95 or Higher Respirator



Acceptable Alternative PPE – Use Facemask



► Other forms of PPE not listed in this screenshot (e.g., shoe covers, hair nets, etc.) are **not** recommended for COVID-19

COVID-19 PPE recommendations



- ▶ Staff should wear full PPE when providing care for (or interacting with the environment of):
 - Persons with known, active COVID-19 infection
 - Persons with suspected COVID-19 infection
- ▶ If students and/or faculty will be screened each day for signs and symptoms, staff who are performing the screenings should wear a mask, eye protection, and gloves if they will be within 6 feet of those being screened
 - Detailed screening recommendations are available [here](#)
- ▶ Full PPE is **not** needed when caring for people who have recovered
 - Recovered = met symptom-based, time-based, or test-based strategy
 - ◆ Note: the test-based strategy is **not** recommended in most situations, so a **negative result is NOT needed to allow someone back to school**
 - ◆ For more information on recovery, see CDC [guidance](#)

PPE recommendations (continued)

- ▶ Nebulizer treatments and peak flow meters
 - Unknown whether or not these can produce infectious aerosols
- ▶ Nebulizer treatments should be reserved for children who cannot use or don't have access to an inhaler
- ▶ If administering nebulizer treatments or peak flow meters to children with asthma
 - Do so in a room away from others
 - Limit the number of people present in the room during and immediately following the treatment
 - Staff should wear a surgical facemask or higher level respiratory protection, eye protection, and gloves
 - More information is available [here](#)

PPE recommendations (continued)



► Universal masking

- Facemask, N95, KN95, etc. are all acceptable for healthcare personnel or anyone else who will be caring for sick persons at school
- Staff **who will not be caring for** ill people may wear a cloth face covering
 - Cloth face coverings are **NOT** considered PPE, so staff who provide care must switch to a N95 or facemask if they will be within 6 feet of people who are either infected with or suspected of being infected with COVID-19
- If tolerated, all persons in public settings are encouraged to wear cloth face coverings
 - ◆ These should be changed when they become soiled, damp, or hard to breath through and they should be laundered regularly
 - ◆ See CDC's guidance for cloth face coverings in schools [here](#)

Donning and Doffing

Non-healthcare settings may not have access to all of the recommended PPE, but the next few slides provide instructions for proper donning and doffing of PPE



Donning sequence



[Click here for a video on how to don PPE](#)

Donning (putting on the gear):

More than one donning method may be acceptable. Training and practice using your healthcare facility's procedure is critical. Below is one example of donning.

1. **Identify and gather the proper PPE to don.** Ensure choice of gown size is correct (based on training).
2. **Perform hand hygiene using hand sanitizer.**
3. **Put on isolation gown.** Tie all of the ties on the gown. Assistance may be needed by another HCP.
4. **Put on NIOSH-approved N95 filtering facepiece respirator or higher (use a facemask if a respirator is not available).** If the respirator has a nosepiece, it should be fitted to the nose with both hands, not bent or tented. Do not pinch the nosepiece with one hand. Respirator/facemask should be extended under chin. Both your mouth and nose should be protected. Do not wear respirator/facemask under your chin or store in scrubs pocket between patients.*
 - » **Respirator:** Respirator straps should be placed on crown of head (top strap) and base of neck (bottom strap). Perform a user seal check each time you put on the respirator.
 - » **Facemask:** Mask ties should be secured on crown of head (top tie) and base of neck (bottom tie). If mask has loops, hook them appropriately around your ears.
5. **Put on face shield or goggles.** When wearing an N95 respirator or half facepiece elastomeric respirator, select the proper eye protection to ensure that the respirator does not interfere with the correct positioning of the eye protection, and the eye protection does not affect the fit or seal of the respirator. Face shields provide full face coverage. Goggles also provide excellent protection for eyes, but fogging is common.
6. **Put on gloves.** Gloves should cover the cuff (wrist) of gown.
7. **HCP may now enter patient room.**

Doffing sequence



[Click here for a video on how to doff PPE](#)

Doffing (taking off the gear):

More than one doffing method may be acceptable. Training and practice using your healthcare facility's procedure is critical. Below is one example of doffing.

- 1. Remove gloves.** Ensure glove removal does not cause additional contamination of hands. Gloves can be removed using more than one technique (e.g., glove-in-glove or bird beak).
- 2. Remove gown.** Untie all ties (or unsnap all buttons). Some gown ties can be broken rather than untied. Do so in gentle manner, avoiding a forceful movement. Reach up to the shoulders and carefully pull gown down and away from the body. Rolling the gown down is an acceptable approach. Dispose in trash receptacle.*
- 3. HCP may now exit patient room.**
- 4. Perform hand hygiene.**
- 5. Remove face shield or goggles.** Carefully remove face shield or goggles by grabbing the strap and pulling upwards and away from head. Do not touch the front of face shield or goggles.
- 6. Remove and discard respirator (or facemask if used instead of respirator).*** Do not touch the front of the respirator or facemask.
 - » **Respirator:** Remove the bottom strap by touching only the strap and bring it carefully over the head. Grasp the top strap and bring it carefully over the head, and then pull the respirator away from the face without touching the front of the respirator.
 - » **Facemask:** Carefully untie (or unhook from the ears) and pull away from face without touching the front.
- 7. Perform hand hygiene after removing the respirator/facemask** and before putting it on again if your workplace is practicing reuse.

Use Your Facemask the Correct Way



DO:



- Clean your hands before you put on and take off facemask
- Make sure facemask covers your mouth and nose
- Remove facemask touching only the straps, store in paper bag



DON'T:



- Do not touch your facemask or face
- Do not wear your mask:
 - On the top of your head
 - Around your neck
 - Under your nose
- Do not store your mask on your arm or in your pocket



Considerations

▶ PPE disposal

- If visibly caked or soiled with blood or other potentially infectious materials, dispose of in a red bag; Otherwise, used PPE can be disposed of in the regular garbage

▶ If reusing surgical facemasks or N95s, store in paper bag and label with personnel's name

- Always discard facemasks and N95s when they become soiled, contaminated, hard to breath through, or lose their shape

▶ Anytime staff touch or adjust their mask, they must immediately perform hand hygiene

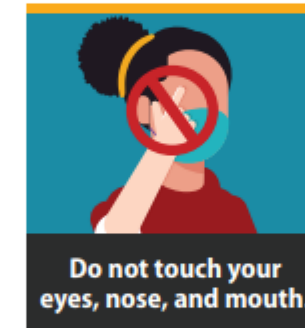
▶ In areas with high levels of community transmission, facilities may consider encouraging healthcare staff to wear eye protection in addition to a mask with each patient

Resources

- ▶ [Infection Control guidance](#)
- ▶ [Guidance for discontinuing isolation](#)
- ▶ [PPE guidance \(with signs, factsheets, and instructional videos\)](#)
- ▶ [PPE FAQs](#)
- ▶ [Strategies to optimize PPE](#)
- ▶ [CDC Training resources for healthcare professionals](#)
- ▶ [Transmission-based Precautions](#) (example signs included)
- ▶ [Screening Recommendations](#)
- ▶ [Considerations for Universal Screening in Schools](#)
- ▶ [Cloth Face Coverings in Schools](#)

Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.



cdc.gov/coronavirus

216017-A May 15, 2020 11:00 AM

Questions?

Please email InfectionControl@la.gov