



STANDARD WORK FOR:

Re-Use of Personal Protective Equipment: N95 Respirators & Surgical Masks

Used during times of high demand and supply shortages.

Utilized during Universal Masking, when caring for a mixed patient population of uninfected patients and those utilizing Airborne Precautions, and when leaving the area during the care of NRI patients in designated units or cohorts.

POSITION:

All staff required to wear PPE, either due to Precautions or Universal Masking Protocols

ITEMS REQUIRED FOR PROCESS:

- N95 Respirators and/or Procedure Masks
- Paper bags: Lawson **Size #5: Lawson #150078** Slightly smaller **size #2: Lawson #150079**
- Marking Pen to Label paper bags

STANDARD PROCESS STEP:	DESCRIPTOR – details, specifications of the step	NOTES: tips, tricks, exceptions, pictures, references...
1A. Use N95 respirators when caring for patients on inpatient NRI, Airborne precautions, or aerosol-generating procedures. 1B. Use procedure masks for Universal masking, Droplet Precautions, and as outlined in the PPE Guidance Document during Covid-19	Wash hands prior to donning and, for N95 respirators, performing fit check to ensure proper seal. Wash hands after re-donning the respirator or mask to prevent any self- or cross-contamination. Do not allow masks/respirators to dangle off of the face or body. Do not touch the front of the mask/respirator when on your face.	
2. If involved in direct patient care with an NRI Precautions patient, PUI, or patient with respiratory sx, cover with a face shield to prevent the N95/mask from droplet exposure.	Novel Respiratory Infection Precautions and care of patients not wearing masks during Covid-19 pandemic requires eye protection. Face shields protect the eyes and the exterior of the respirator/mask when worn in a patient’s room with respiratory symptoms. Remove face shields by strap only, clean and re-use face shields per SOP for their re-use.	This step is recommended to be performed while in the patient on Precautions’ room to prevent taking contamination out in to the hallway if possible.

<p>3. Remove and store N95/mask in a paper bag labeled with your name and date</p>	<p>When taking breaks, caring for non-respiratory/COVID patients on a mixed unit or moving between units. Remove by handling the ear loops or straps only and place directly into paper bag. Loosely fold the top of the bag over, do not seal. It is recommended to use a clean paper bag, if possible, with each removal to prevent cross-contamination.</p>	<p>Mask and Respirator removal are recommended to be performed outside of the patient's room, if possible. Set up paper bag, with top open, ahead of time, so that the mask may be dropped directly in with minimal contact to the exterior of the bag. Handle with washed hands. Paper bags can be stored in a common area outside of the patient's Precaution room, a common area on a designated NRI unit, or taken with you if moving to another unit to care for other patients requiring the use of a respirator. <i>They should not be laying out in the open, hanging by their straps from hooks, or sealed in an un-breathable container, such as plastic.</i></p>
<p>4. Discard</p>	<p>After your shift has ended, if they have been used 5 or more times, if they become soiled, damaged, or it becomes difficult to breathe through or (with N95s) you can no longer get a good seal during a fit check.</p>	
<p>5. Perform hand hygiene</p>	<p>Anytime after removing or touching the exterior of the mask/respirator</p>	

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