COVID-19 PPE Conservation Information for All Team Members – 3.25.20 0849

Our priority continues to be the safety of our team members and ensuring we can care for our communities. We must remain agile, as recommendations change daily as we learn more about the COVID-19 pathogen and our PPE supply. For employees who have concerns about the guidelines based on personal health conditions, please contact the Integrated Disability Management team.

General Guidelines:

- **PPE conservation:**
  - Each facility and unit should maintain control access to all PPE.
  - All standard isolation masks (“yellow masks”) for visitors are to be removed from unsecure public areas.
  - All PPE on units needs to be placed in a secure and monitored site and then secured when not attended.

- **Team member guide:**
  - For patients in isolation precautions, ensure that care is combined to minimize in and out of room to preserve supplies.
  - Utilize team members outside of patient care spaces to obtain and to deliver forgotten or needed patient care items to prevent the need for PPE removal.

- **Symptomatic Patients:** All symptomatic patients should be given 1 mask and instructed to wear it for the duration of their visit.

- **Visitors:** Any asymptomatic visitor accompanying a symptomatic patient can be given a mask. If an essential visitor is symptomatic and needs to come onsite, also provide a mask.

Personal Protective Equipment Information

**Standard isolation masks:**

- Do not touch mask or pull mask up and down over chin – this action leads to greatest risk.
- Leave mask in place for multiple patient encounters and wear until saturated or contaminated with blood or bodily fluids.
- If mask is removed, perform hand hygiene and store mask in secure location with name, date, and shift. Perform hand hygiene when re-donning mask.
- Discard mask at end of shift.

**N-95 Masks:**

- N-95 masks are only used for patients in airborne precautions and during aerosol-generating procedures on patients in enhanced droplet and severe respiratory precautions.
- N-95 masks are used for intubation of confirmed and suspected COVID-19 patients.
- If the N-95 mask is removed, perform hand hygiene and place mask in a secure location, labeled with your name.
- N-95 masks should be reused by an individual team member until the mask becomes contaminated with blood or body fluids.
- Perform hand hygiene when donning and doffing mask.
PAPRs/CAPR:
- Clean the PAPRs/CAPR hood and machine per manufacturer directions between use and between users by the person wearing the PAPR.
- PAPR/CAPR hoods should be reused by an individual team member.

Eye Protection:
- Eye protection including face shield and goggles can be reused and shared between team members.
- Disinfect eye protection with hospital-approved disinfectant upon removal.

Isolation Gowns:
- Isolation gowns should be changed between patients.
- Use of isolation gowns for the care of multiple patients must be approved by infection prevention.
- In in specimen collection settings, continuously use gown and change when soiled.

Clothing/Uniform:
- After a shift, wash your clothes with standard laundry soap in your household washing machine and completely dry your clothes in your household dryer to eliminate the virus. The heat from a household dryer is high enough to eliminate the contaminants.
- Surgical scrubs provided by the hospital are only for team members working procedural areas.
- Follow “Bare-below-the-elbow” standards. Removal of jewelry and watch is preferred.
- Any form of artificial nails (including dip) is strictly prohibited for team members who provide direct patient care.
- Wearing a clinical white coat is not currently recommended, unless laundered daily.