PPE Reduction Recommendations for Hazardous Medication Administration in Response to COVID-19 – April 1, 0935

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In anticipation of potential personal protective equipment (PPE) shortages due to COVID-19 response and the assumption that hazardous medication PPE may be used for isolation patients, an evaluation has been performed to determine the minimal PPE needed to maintain safe hazardous medication administration. Without evidence to indicate the amount of exposure to staff and patients given our current PPE standards, recommendations have been developed that can be applied across Spectrum Health.

**Recommendation:**

*Ambulatory* – Based on the **level of risk**, as described below in table, the following equipment should be used:

a. **Double gloves**, if supply available

b. **Hazardous medication gowns** will continue to be used for all patients receiving hazardous medications.

   i. Pediatric chemotherapy administration: One hazardous medication gown will be assigned per nurse, per week, unless contaminated by a spill or aerosolization. The gown will be folded upon itself after use and stored in a chemotherapy containment bag, labeled with the RN’s name, in a safe place in the infusion space.

c. Masks with face shields will be replaced with **goggles and a yellow mask**. Following use, disinfect goggles with Sani Wipes for reuse. Use of yellow masks will follow the same process as directed by the COVID-19 team.

   i. Pediatric chemotherapy administration: Based on current supplies, 4-5 pairs of goggles will be available daily.

*In-patient* – Based on the level of risk, as shown below, the following equipment will be use:

a. **Double gloves**, if supply available

b. **Hazardous medication gowns will continue to be used** for all patients receiving hazardous medications.

   i. Chemotherapy administration on pediatric units: One RN will use one gown per patient per day, unless contaminated by a spill or aerosolization. The gown will be hung in the patient room between uses.

   ii. Chemotherapy administration on adult units: The gown will be hung in the patient room between uses. One RN will use one gown per patient per day, unless contaminated by a spill or aerosolization.

c. Masks with face shields will be replaced with **goggles and a yellow mask**. Following use, disinfect goggles with Sani Wipes for reuse. Use of yellow masks will follow the same process as directed by the COVID-19 team.
## Hazardous Medication PPE Required Based on Risk:

<table>
<thead>
<tr>
<th>Hazardous Medication Formulation</th>
<th>Risk</th>
<th>PPE Required</th>
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<tbody>
<tr>
<td>Intact oral tablets/capsules; both chemotherapy and non-chemotherapy</td>
<td>Low</td>
<td>Single chemotherapy tested gloves</td>
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</table>
| Oral tablets that are crushed/cut; opened capsules/oral liquids/ophthalmic solutions; topicals; etc. | Moderate | *Oral liquids; ophthalmics; topicals*: Hazardous medication gown, chemotherapy tested double gloves  
*Facemask with eye protection required if risk for splash or if administered via a feeding tube  
*Crushed tablets*: chemotherapy tested double gloves and pill crusher with bags  
*Cutting/splitting tablets*: chemotherapy tested double gloves and patient specific hazardous medication dedicated pill splitter |
| Parenteral (injectable) chemotherapy and non-chemotherapy medications                           | High   | Chemotherapy tested double gloves, hazardous medication gown, and face mask with eye protection |

Key stakeholders including, Infection Prevention, Safety and Risk, have evaluated and approved this recommendation for inpatient and ambulatory sites. Team leaders need to obtain the appropriate equipment prior to implementing these changes.