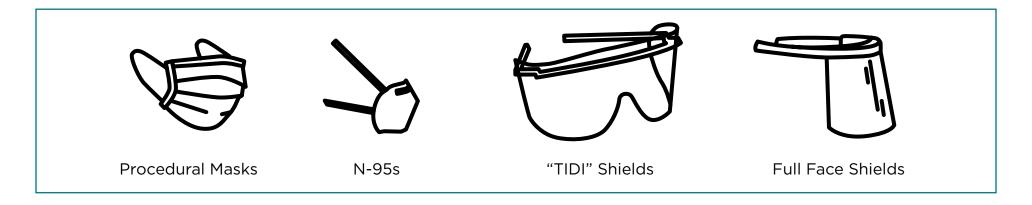
THE UNIVERSITY OF NEW MEXICO COVID-19 PPE GUIDANCE

■ Extended Use and Re-use of N95 Respirators and Protective Eyewear



Overview & Purpose:

There is a nationwide shortage of personal protective equipment (PPE) during the COVID-19 pandemic. This includes PPE such as procedure and surgical masks, N-95s, face and eye shields (referred to as "TIDI" shields).

We are working to protect you by ensuring that you have access to the necessary PPE to perform patient care safely. We need to extend and re-use PPE with the current and possible ongoing nationwide PPE shortage. This also needs to be done safely. Please see guidance below for detailed information.

Definitions:

- **Extended use** refers to the practice of wearing the same N-95 respirator for repeated encounters with several patients, without removing the respirator between the encounters.
 - o Eye protection may be left in place with the N-95 respirator for extended use.
- **Re-use** refers to the practice of using the same N-95 respirator for multiple encounters with patients but removing it ('doffing') between at least some of the encounters. The respirator is stored in between encounters.
 - o Re-use of full face shields will be permitted. Disinfection of the face shield will be required between uses.

Guiding Principles:

- The use of N-95 respirators is prioritized for those personnel doing work which places them at the highest risk of exposure.
- **Extended use is preferred over re-use.** It is safer for the employee to leave their mask and eye protection in place, to reduce the risk of self-contamination through frequent donning and doffing.
- Masks, N-95s and eye protection can be re-used in a careful and limited way during periods of short supply.
- Guidance is for re-use of N-95s and eye protection by a single person (no sharing).
- N-95 respirators may be re-used or worn for extended use as long as they are able to seal and have not reached the end of their use by being soiled, saturated, or damaged from sweat or insensible fluid loss.
- Always, limit the number of people requiring PPE by ensuring that only those essential for patient care enter the
 room; strategies include bundling of care, limiting or avoiding bedside clinical teaching, limiting operating room
 traffic, and use of iPad's or other communication devices where possible.
- Procedure masks covering N-95s during aerosol generating procedures should not be reused.
- N-95s, "TIDI" shields, and face shields should be recycled unless soiled, saturated, or damaged.

General Guideline:

- N-95 Respirators: Re-use guidelines apply only to those who are fit-tested for a specific type of N-95 respirator.
- A procedure mask or full face shield should be worn over an N-95 during an aerosol generating procedure to allow for extended use and re-use.
- Extended use or re-use is not recommended if the N-95 respirator has reached the end of its use through being soiled, saturated, or damaged.
- All supplies of N-95 respirators will be stored in locked or secured, designated areas (e.g. with unit director).
- Label the N-95 respirator and storage option (e.g. handled paper bag, paper towel, or plastic container without lid) with the user's name before using to prevent re-use by another individual. Write name on mask where straps are attachment or on elastic straps of N-95 mask.



GUIDANCE FOR EXTENDED USE & RE-USE OF N-95 RESPIRATOR WITH MASK & EYE PROTECTION OR FULL FACE SHIELDS

Donning

- Don the disposable N-95 respirator and perform the seal check.
- A **N-95 mask barrier** should be used to protect it from surface contamination.
 - o **Option 1:** Place a **procedure/surgical mask** over the N-95 and use with goggles, "TIDI" shields, or equivalent for eye protection.
 - o **Option 2:** Use a **full face shield** which protects the eyes as well as the N-95.
- DO NOT TOUCH your masks or eye protection during patient care.

Doffing

Doffing when a **procedure or surgical mask** barrier with separate eye protection is used:

- While in the patient's room, remove gown close to the doorway.
- As you remove the gown, peel off the gloves at the same time.
 - o Only touch the inside of the gloves and gown (the clean side) with your bare hands.
 - o If contamination occurs, wash hands with hand sanitizer.
- Remove procedure mask barrier that is used over N-95 by holding the ear loops.
 - o Do NOT touch the front of the mask. The front of the mask is potentially contaminated.
 - o Discard the procedure mask.
- Using a disinfectant wipe, open door and exit room. Use wipe to close door behind you.
 - o Discard wipe into waste container.
- Perform hand hygiene, don clean pair of gloves, use a germicidal wipe to prepare a surface upon which the "TIDI" shield will be placed and remove "TIDI" shield.
- If your unit is cleaning "TIDI" shields for reuse:
 - o Disinfect using an Oxivir wipe with 1 minute wet time. If residue builds up, use alcohol wipe to remove.
- If your unit is recycling "TIDI" shields for Bioquell:
 - o Grasp "TIDI" shield from the colored band close to the temples, do not touch your face.
 - o Pull away from face and place "TIDI" shield in the designated collection container to be picked up for Bioquell.
- Perform hand hygiene over gloves.
- Remove N-95 respirator and perform hand hygiene.
- After completing all doffing steps:
 - o Store "TIDI" shields for re-use.
 - o Continue doffing order to doff and store N-95 (storage instructions below).

Doffing when a full face shield barrier is used:

- While in the patient's room, ONLY remove gown then gloves close to the doorway.
- Perform hand hygiene.
- Exit patient room.
- Perform hand hygiene and don clean pair of gloves.
- Remove the face shield:
 - o Bend forward slightly at the hip do not bend your chin towards your chest.
 - o Without touching the front lens of the shield, grasp the two white tabs at the top of the headband.
 - o Pull the head band away from your head.
 - o Place face shield into the designated bin for cleaning and disinfection.
 - Reminder: The front is potentially contaminated, so remove carefully and do not touch your face.
- Perform hand hygiene over gloves.

Full face shield disinfection Process:

Supplies Needed: gloves, Oxivir wipe, isopropyl rubbing alcohol, clean 4x4 gauze or HIBI wipes.

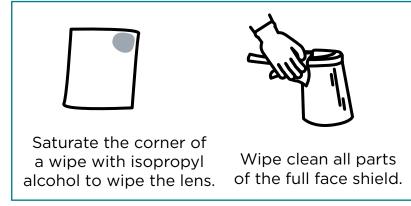
- Don clean gloves.
- With Oxivir wipe, disinfect all portions of the face shield.
 - o Be sure to clean all parts of the head band, and the front and back of the lens.
 - o Disinfect over the bin and away from your body.



GUIDANCE FOR EXTENDED USE & RE-USE OF N-95 RESPIRATOR WITH MASK & EYE PROTECTION OR FULL FACE SHIELDS CONT.

■ Full face shield disinfection Process Continued

- Observe a one minute wet time.
- Place disinfected face shield in designated clean holding bin.
- With a new wipe, disinfect the first bin used to hold used face shield.
- Observe a one minute wet time.
- Perform hand hygiene over gloves.
- Doff N-95 and perform hand hygiene.



- Transport the disinfected face shield to the alcohol station (can be at point of disinfection) to clean front and back of lens using isopropyl alcohol. Process below:
 - o Saturate the corner of a new clean wipe, or a 4x4 piece of gauze, with enough isopropyl alcohol to wipe both the front and back of the lens.
 - o Wipe the front and back of lens using saturated portion of wipe to remove as much residue as possible.
- After completing all doffing steps and shield is dried, it can be stored in designated clean storage area until next use.

Doffing N-95 respirator:

- Perform hand hygiene.
- Bend slightly forward at the hip do not bend your chin towards your chest.
 - o Without touching the front of the N-95 respirator, remove both straps over the top of your head.
 - o The front may be contaminated, so remove slowly and carefully.
- After removing N-95 respirator, visually inspect for contamination or distortion in shape/form.
 - o **If soiled,** saturated, or damaged please notify your supervisor in order to obtain a new mask and place the old mask in the recycling container.
 - o **If the N-95 respirator is NOT visibly contaminated or distorted,** carefully store face down to avoid destroying the shape of the mask. Ensure straps do not become contaminated by touching the front of the mask.
- Store the N-95 respirator in a dedicated, well-ventilated container
 - o Long-term storage: plastic container or paper bag with your name and date.
 - o An N-95 can be worn multiple days if not soiled, saturated, or damaged, and not touched while delivering patient care.
- Perform hand hygiene.

■ Process to Re-use Your Disposable N-95 Respirator

Remove N-95 mask from storage area and visually inspect for distortion. If creased or bent do not re-use.

Donning

- Perform hand hygiene.
- Don gown.
- Don gloves.
- Remove N-95 mask from storage area and visually inspect for distortion. If creased or bent do not re-use.
- Don the N-95 respirator.
- Perform a negative and positive seal check by doing the following:
 - o No air should be felt around the perimeter while blowing out. If you feel air coming out it is not a tight seal.
 - o When taking a small breath in, the mask should pucker in slightly. If it does not, it is not re-usable.
 - o When breathing out you should feel the respirator expand slightly. If it does not, it is not re-usable.
 - o If not a tight seal, the respirator cannot be re-used and should be placed in a recycling bin.
- Ensure the mask is breathable, if unable to breathe in the mask, the respirator cannot be re-used.
- Sanitize gloves using ABHS.
- Don procedure mask with "TIDI" shield or full face shield over N-95.
- · Continuing donning order.

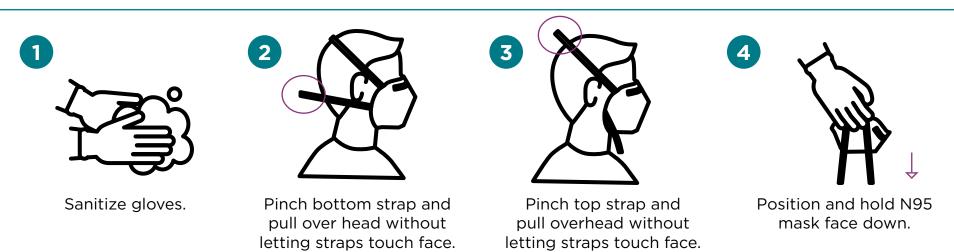
Ordering Information

Contact CDU or bring your requisition form if you need to order clean gauze or HIBI wipes and isopropyl alcohol.

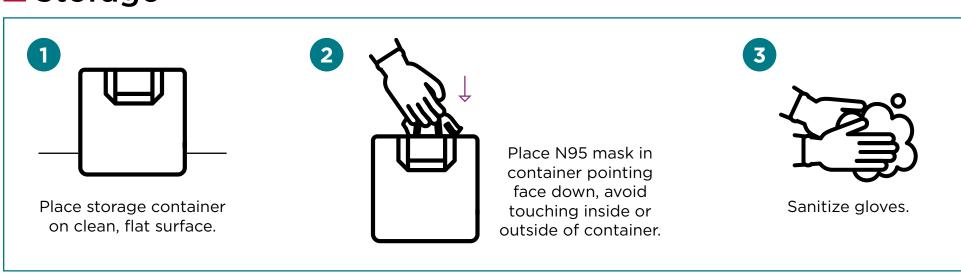


INSTRUCTIONS FOR STORING YOUR N-95

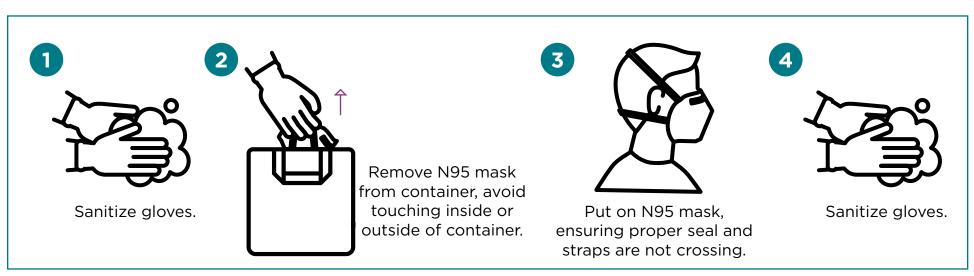
■ Doffing N95 Mask



Storage



Retrieval



INSTRUCTIONS FOR THE LIMITED RE-USE OF PAPR HOODS

■ Re-use of PAPRs Including Hoods

Donning:

- After performing a safety check, assemble the PAPR to connect the hood, hose belt and motor.
 - o Write name on the hood.
 - o Keep the plastic sleeve on the tubing by cutting the ends off to expose the screw caps.
- Perform hand hygiene.
- Don the PAPR by donning the belt, turning on the PAPR motor and donning the $\frac{1}{2}$ hood.
- Don gown over the PAPR belt.
 - o Use easy to undo bows to secure the ties.
 - o Tuck gown under the PAPR motor to avoid the gown occluding air inlet to the PAPR motor.
- Don gloves.

Doffing:

- While in the patient's room, remove gown then gloves prior to leaving.
- Perform hand hygiene.
 - o After exiting the patient's room, turn off PAPR motor, remove the PAPR hood, undo belt, clean, and store appropriately (see below).
 - o Perform hand hygiene.

Disinfection and Storage of PAPR components including the Hood for re-use:

- Don gloves and a procedure mask, and carry the PAPR to the PAPR processing area without holding it against you.
- Visually inspect the PAPR hood for contamination; discard and do not re-use if visibly contaminated.
 - o If visible contamination is not observed, do not disconnect any of the PAPR components if it will be reused during the shift.
 - o Do not remove the PAPR filters from the motor unless flow test fails due to clogged filters.
- Disinfect the PAPR motor, belt, hose and hood using EPA approved germicidal wipes labeled to kill human coronaviruses, while observing contact time using the following order:
 - 1. PAPR motor and filters (avoid introducing liquid into the filter holes)
 - 2. Belt
 - 3. Tubing sleeve
 - 4. Hood (wipe the hood inside then the outside)
- Once completely dry, remove the hood from the hose and place the PAPR in a clean area close to where it will be reused.

Disinfection, Disposal and Storage of Used PAPR Components:

- Follow above procedure for cleaning and disinfecting PAPR with the following exceptions:
 - o Disconnect PAPR belt to disinfect separately and reattach to PAPR motor when dry.
 - o Disconnect and dispose of PAPR hood.
 - o Return PAPR motor with filters, belt and tubing attached to unit storage area.
 - Plug in PAPR motor to recharge battery.

