

Updated Recommendations for Conservation and Reuse of Personal Protective Equipment (PPE) and Other Supplies
June 2, 2020 (published 3/20/20 and reissued May 15, 2020)

As NYP's response to COVID-19 continues, the safety of our patients and our front line staff remains our paramount concern. The following updated recommendations, which are consistent with CDC guidance for front line staff, are critical to conserve essential supplies. At the present time, the supply of N95 respirators remains the focus of greatest attention. The guidance provided below outlines current strategies for conservation and use of PPE and other supplies.

NEW UPDATES FROM PRIOR GUIDANCE PUBLISHED ON 3/20/20:

- Removed restriction on size of care team for hospitalized and ED patients on contact, droplet or airborne precautions for NON COVID-19 indications
- PPE reuse guidance within units with designated "zone infection control" areas
- Extended use of face shields and face masks

GENERAL STRATEGIES FOR PPE CONSERVATION

- Use PPE only when clinically indicated.
 - Do not use N95 respirators when a face mask is indicated
 - Do not use a face mask with a face shield when a face mask without a face shield is indicated (e.g., staff member who did not receive annual influenza vaccine)
- **Limit the size of the care team providing direct care to patients with confirmed or suspected COVID-19** to the smallest number possible that still allows for safe patient care.
- Limit unnecessary entry into patient rooms.
 - Bundle activities (for example, schedule medications to be administered together, when possible)
 - Consult services should use extra discretion for room entry (i.e., if the consult service is not performing a procedure, and if recommendations can reasonably be formulated without direct physical exam, avoid room entry).
 - Support services (care coordination, pastoral care) should endeavor to deliver care via telephone.
- In circumstances where a visitor is allowed (i.e., pediatric and obstetric patients), conduct family meetings outside patient rooms. [Note: this does not apply to patients with suspected or confirmed COVID-19.]
- Make sure PPE stock is secured so that it is not taken for non-patient care use or otherwise used inappropriately.

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SPECIFIC STRATEGIES FOR CONSERVATION OF INDIVIDUAL TYPES OF PPE AND OTHER SUPPLIES

N95 respirators:

- Use N95 respirators only when clinically indicated.
- For N95 respirators used during the care of patients with confirmed or suspected TB or measles: The N95 respirator can be reused and used during the care of multiple patients. The N95 respirator should be kept clean between uses. Discard the N95 respirator only when soiled, contaminated or wet or if the wearer is unable to pass a fit check.
- N95 respirators used during the care of patients with confirmed or suspect COVID-19:
 - The use of a surgical mask or full face shield over an N95 respirator can prevent droplet contamination of the N95. Thus, if the N95 is covered, it can be reused multiple times until visibly soiled, contaminated, or wet or the wearer is unable to pass a fit check.
 - When consecutively seeing multiple patients with confirmed COVID-19 in the same room or within “zone infection control” areas designated by Infection Prevention and Control, HCP should remove their gloves, perform hand hygiene, and don new gloves prior to contact with the next patient. Gown, eye protection and mask/respirator do **not** need to be changed.

Face masks:

- Surgical face masks worn for surgery/sterile procedures: routine protocols should be followed.
- Face masks worn for indications other than Droplet Precautions (e.g., universal mask use by all healthcare personnel (HCP), HCP who did not receive the influenza vaccine): the same face mask should be used/reused throughout multiple shifts, inclusive of seeing different patients. Mask should be discarded when it is visibly soiled, contaminated, or wet.
- Face masks used during the care of patients with confirmed or suspected COVID-19:
 - When consecutively seeing multiple patients with confirmed COVID-19 in the same room or within “zone infection control” areas designated by Infection Prevention and Control, HCP should remove their gloves, perform hand hygiene, and don new gloves prior to contact with the next patient. Gown, eye protection and mask/respirator do **not** need to be changed.
 - Outside of “zone infection control” areas, when multiple sequential encounters with suspected/confirmed COVID-19 patients are anticipated, extended use of face mask can also be employed. Prior to seeing patients without COVID-19, the used face mask should be discarded and a new face mask should be donned.

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Cover gowns:

Cover gowns used during the care of patients with confirmed or suspect COVID-19:

- When consecutively seeing multiple patients with confirmed COVID-19 in the same room or within “zone infection control” areas designated by Infection Prevention and Control, HCP should remove their gloves, perform hand hygiene, and don new gloves prior to contact with the next patient. Gown, eye protection and mask/respirator do **not** need to be changed.

Eye protection such as goggles and welder-style face shields (reusable and disposable):

When multiple sequential encounters with suspected/confirmed COVID-19 patients are anticipated, extended use of eye protection can be employed outside of designated “zone infection control” areas. Extended use refers to wearing the same eye protection for encounters with several different patients, without removing the eye protection. During extended use, eye protection may need to be briefly removed to put on a new gown. Extended use may be applied to disposable and reusable eye protection devices. Eye protection should be cleaned and disinfected after doffing following the completion of patient care activities after either single use or extended use. HCP should take care to avoid touching their eye protection and should perform hand hygiene if they do touch their eye protection. .

Adhere to recommended manufacturer instructions for cleaning and disinfection, when available.

When manufacturer instructions for cleaning and disinfection are unavailable, such as for single use disposable eye protection, perform the following steps so the eye protection can be reused:

1. While wearing clean gloves, carefully wipe the *inside, followed by the outside* of the eye protection using a non-bleach disinfectant wipe and achieving the manufacturer-recommended contact time.
2. Fully dry (air dry or use clean absorbent towels) to avoid getting disinfectant in eyes.
3. Remove gloves and perform hand hygiene.

Cleaning / Disinfecting supplies – Be judicious in use of hand sanitizer and disinfectant wipes (e.g., only use the number of wipes necessary to achieve required contact time)

Thank you for your assistance and support.