

Procedure covers all care delivery requiring N95 respirators. Reuse of single N95 respirator is approved for a single provider for multiple patients on a unit over multiple shifts.

****Notes****

- *Most important steps are hand hygiene and use of clean gloves*
- *N95 should be discarded at any time if deformed, moist, or does not produce an adequate seal*
- *This guidance applies to any patients (including COVID-19 suspect or confirmed) undergoing aerosol-generating procedures (See list below)*

1. N95 RESPIRATOR DONNING PROCEDURE

- Prepare storage bag
 - Obtain clean single use paper bag
 - Label bag with your name to prevent reuse by another individual
- Label the inside edge of a new N95 with your first initial, last name and date of first use with a marker
- Follow standard N95 donning procedure

2. REMOVE N95 RESPIRATOR

- Perform hand hygiene and don clean gloves
- Grasp the bottom elastic of the N95, followed by the one at the top
- Remove N95; avoid touching the inside of the respirator

3. STORE N95 RESPIRATOR

- Place N95 in previously labeled paper bag being careful not to crumple or crush
- Remove gloves
- Perform hand hygiene
- Store bagged N95 in designated storage location or on a hook outside of room

4. DONNING PROCEDURE FOR REUSE

- Prepare a new storage bag as in #1 above
- Perform hand hygiene and don clean gloves
- Carefully remove N95 from bag by the straps and inspect integrity
- Follow standard donning procedure
- Perform seal check (see [BILH COVID-19 N95 Donning and User Seal Check Instructions](#))
- Dispose of single use bag in regular trash
- Remove gloves
- Perform hand hygiene
- Perform patient care as usual, adhering to Standard Precautions
- When ready to remove N95, repeat steps #2-3 for N95 removal and storage

Aerosol-generating procedures should be performed when necessary for patient care/are needed emergently and not on an elective basis. Potentially aerosol-generating procedures (generally considered cough-generating procedures) include:

- Nebulizer treatments
- Diagnostic sputum induction
- Bronchoscopy
- Airway suctioning without inline closed suction
- Endotracheal intubation
- Positive pressure ventilation via face mask (e.g., BiPAP, CPAP)
- High-frequency oscillatory ventilation
- Bag mask ventilation through an artificial airway
- ENT endoscopy procedures