

BILH INTERIM PERSONAL PROTECTIVE EQUIPMENT (PPE) GUIDELINE

Updated 4/16/24
Infection Control

This guideline covers care delivery in all patient care areas.

- PPE is used to protect healthcare personnel from exposure to infectious organisms as part of Transmission-based precautions and as protection from contamination (e.g., splash and spray during procedures) as part of Standard precautions
- Note that masks may also be used to prevent transmission of respiratory secretions from the wearer’s nose and mouth to those around them.

****Notes****

- Strict attention to hand hygiene and avoiding touching your face is critical in preventing self-contamination*
- PPE from home is not permitted. All PPE will be provided by BILH (with the exception of prescription eye protection after review with your local safety officer)*

Instructions for use for each type of PPE, including indications and cleaning/disinfection, are outlined below.

Surgical Masks

- **Masks should be worn as required in the following situations:**
 - Transmission-based or Standard precautions, as indicated by signage, at the request of a patient, and per Employee Health policies
- **Universal masking is not required *except in the following situations:***
 - For entry into the room/bedspace of a patient who is within 100 days post-autologous or allogenic bone marrow transplant, CAR-T therapy, or solid organ transplant (will be indicated by a “Mask Required” sign)
 - At the request of a patient
 - When instructed by local Infection Control (e.g., in a unit-based outbreak of respiratory viruses)
 - Per Employee Health policy (e.g., healthcare personnel returning to work before Day 10 after COVID-19 diagnosis)
- Staff who choose to wear a mask may do so continuously for care/room entry of sequential patients until removed, *as long as the mask does not become contaminated (by splash or spray) and the patient is not on isolation precautions.*
- Masks should not be stored or put down on a surface, if worn in a patient care area
- If removed partially (e.g., taken off one ear to take a sip of water in a designated area) or if held by the ear loop, the mask can be reused
- Masks should be discarded and replaced at any time if moist, torn or visibly soiled

Reusable Respirators (including 3M elastomeric respirators and MSAs)

- Reusable respirators should be the first choice of respiratory protection when a respirator is required
- After exiting the patient's room, if a respirator will be needed for care of the next patient, the respirator may be left in place (*extended use*) as long as it has not been contaminated by splash or spray (or was covered by a face shield or mask)
 - When performing extended use, perform a seal check before every room entry to ensure continued appropriate fit and adjust as necessary
 - MSA elastomeric respirators may develop condensation inside the mask during extended use due to the absence of an exhalation valve. If so, remove the mask and wipe the inside of the mask dry prior to performing cleaning and disinfection.
- If exiting the room and the respirator will be removed, please refer to the procedure for disinfection and storage of your respirator in the appropriate protocol:
 - [MSA Elastomeric Respirator Training – One Page Handout](#)
 - [3M Elastomeric Respirator Training – One-Page Handout](#)

N95 Disposable Respirators (no reuse)

- Disposable N95 respirators should be single-use for the care of one patient for a single entry into the room/bedspace and then discarded
- Disposable N95 respirators should not be reused (i.e., do not store in a bag or container for future use)
- Disposable N95s should be discarded and replaced at any time if moist, torn or visibly soiled

Eye Protection

- Eye protection should be worn as indicated by Transmission-based or Standard precautions (when at risk of splash or spray)
- Eye protection may be worn continuously for the care of multiple patients but should either be:
 - Disinfected whenever removed or contaminated, *or*
 - Discarded
- See [Eye Protection Reuse Procedure](#) for information on cleaning and disinfection

Gowns (no reuse)

- See Sequence of PPE Don/Doff Procedure documents for donning and removal by gown type
 - Disposable Gown Posters
 - [Sequence for PPE Donning with Disposable Gown](#)
 - [Sequence for PPE Doffing with Disposable Gown](#)
 - Laundered Gown Posters
 - [Sequence for PPE Donning with Laundered Gown](#)
 - [Sequence for PPE Doffing with Laundered Gown](#)
- Gowns should be discarded after the care of each patient into either the laundry bin (laundered gowns) or trash (disposable gowns), as appropriate

Gloves (no reuse)

- Gloves should be removed between patients followed by performance of meticulous hand hygiene
- Gloves should be changed as needed during patient care using Standard Precautions