**Personal Protective Equipment (PPE)**

Perform hand hygiene before and after donning ANY mask. It is important to NOT touch the outside of the face mask with your hands.

If you touch or adjust your face mask, you must perform hand hygiene IMMEDIATELY.

### Contact

**Disposable Gown**
- Extended use and reuse: Disposable gowns are to be prioritized for aerosol-generating procedures, care activities where splashes and sprays or contact with body fluids are anticipated and patients in contact isolation precautions.
- Recommended for reuse by multiple HCWs for low- or moderate-risk scenarios and for patients on contact precautions for MRSA, VRE or MDRO. Discard when visibly soiled or contaminated and at the end of a shift.
- Low-risk scenarios:
  - Basic patient care.
- Moderate-risk scenarios:
  - Performing blood draws, suturing, establishing IV access, wound/ostomy care.
- Not recommended for reuse in high-risk scenarios.
- High-risk scenarios:
  - Precautions for suspected or confirmed COVID-19.
  - Invasive procedures or surgery.
  - Lengthy, fluid-intense procedures.
  - Trauma cases.
  - Special contact precautions.
  - Precautions for CRE.
- Discard after use.

### Droplet

**Surgical/Procedural Mask**
- Extended use and reuse:
  - In patient-facing areas with direct care of patients: one per staff or provider, per shift (can be used with multiple patients).
  - In patient-facing areas without direct care of patients: one per staff or provider. May be used on multiple shifts/days.
    - Reuse mask until damaged or soiled then discard.
  - Store in paper bag with employee name when not in use.
  - Discard mask if soiled or damaged.

### Airborne

**N95 Respirator**
- Extended use and reuse:
  - One per staff or provider, per shift, if clinically indicated (can use with multiple patients).
  - Store in paper bag with employee name when not in use.
  - At end of shift, place the mask in your paper bag, write your name and unit on the bag and take to UV reprocessing center and retrieve after processing for reuse.
  - Discard if contaminated with body fluids or compromised (damaged or difficult to breathe through).
  - For use in all interventional and surgical procedures, care of obstetrical patients in active labor, and for procedures likely to generate respiratory aerosols, including:
    - Naturalization
    - Airway suction
    - Sputum induction
    - High-flow oxygen (>6L)
    - Positive-pressure ventilation (BIPAP, CPAP)
    - Mechanical ventilation
    - High-frequency oscillatory ventilation
    - Tracheotomy
    - Endotracheal intubation
    - Positive pressure sleep
    - GI Endoscopy
    - Pulmonary Function Test
    - Chest physical therapy
    - Bronchoscopy
    - Nasopharyngeal swab
    - Nasal wash
    - Transesophageal Echocardiography (TEE)
    - Lung biopsy
    - G-tube placement
    - Tracheostomy
    - ENT procedures (laryngoscopy/nasal endoscopy)

**Powered Air Purifying Respirator (PAPR)**
- Extended use and reuse:
  - Use for multiple HCWs.
  - Clean and disinfect hood and PAPR device after each use.
  - Discard hood if torn, visibly soiled or damaged.

### Eye Protection

**Reusable Goggles**
- Extended use and reuse:
  - Use for multiple HCWs.
  - Clean and disinfect after each use.
  - Discard if damaged.
  - Personal eyeglasses do not provide protection.

**Half-Mask Respirator**
- Extended use and reuse:
  - Use for surgical or interventional procedures if in contact isolation precautions.
  - Clean and disinfect after each use.
  - Discard if torn or damaged.
- Face mask with shield is single-user only, but can be used in encounters with multiple patients.

**Goggles**
- Extended use and reuse:
  - Clean and disinfect after each use.
  - Discard if torn or damaged.

**Face Shields and Face Masks with Shield**
- Face shields are extended use and reuse:
  - Clean and disinfect after each use.
  - Discard if torn or damaged.

**Patient use (e.g., for transport):**
- Provide one per patient over the course of hospitalization.
- Store in paper bag in patient room with patient name when not in use.
- Patient can wear mask home when discharged.

**Airway suction**
- At end of shift, place the mask in your paper bag, write your name and unit on the bag and take to UV reprocessing center and retrieve after processing for reuse.

**Note, half-mask respirator cannot be used during surgical or sterile procedures if in direct line of the operative or procedural field.**