Process for Reuse of Respirators and Face Shields

This document outlines the practice for reuse and extended use of NIOSH-certified N95 respirators which will be effective immediately following CDC criteria.

Please review the video for donning and doffing PPE process located at: https://vimeo.com/397424618/5e69e27680

Definitions

Reuse
- The practice of using the same N95 respirator for multiple encounters with patients but removing it (‘doffing’) after each encounter.
- The respirator is to be stored in a paper bag between encounters to be put on again (‘donned’) prior to the next encounter with a patient. See process below.
- These can be reused on multiple patients with the same respiratory pathogen.

Extended Use
The practice of wearing the same N95 respirator for repeated close contact encounters with several patients, without removing it IN BETWEEN patient encounters. Extended use may be implemented when multiple patients are infected with the same respiratory pathogen and patients are placed together in dedicated waiting rooms or hospital wards.

Guidelines

- Staff entering an airborne isolation room are to be minimized and limited to those essential for care only. Minimize entrance into rooms by clustering care.
- Students should not be entering airborne rooms.
- Visitors should also be limited to Care Partner, parents or guardians for minors, only.
- N95 respirators may be reused by one healthcare provide only for care of patients requiring airborne precautions.
- The healthcare provider is to be provided with one N95 respirator at the beginning of their shift.
- Replace the N95 respirator and face shield:
  - At the end of your shift
    - When collection containers are available at your Delivery Network, respirators and face shields are to be placed in designated collection container if not visibly soiled or damaged. **DO NOT** dispose of in trash.
      - After an aerosol-generating procedures such as intubation, open endotracheal/nasopharyngeal or tracheal suctioning.
      - If contaminated with patient’s blood, respiratory or nasal secretions, or other bodily fluids.
      - If damaged.
      - If respirator becomes difficult to breathe through.
- Perform **hand hygiene**
  - Before and after touching or adjusting the respirator (if necessary for comfort or to maintain fit).
- If inadvertent contact is made with the inside of the respirator.

**Storage:**
- Place in a paper bag labeled with the user’s name in a manner to ensure they do not become damaged or deformed. –OR–
- Label the strap with the wearer’s name and hang in a dedicated storage area (multiple respirators or eye protection should not touch each other)

**Process for removal of PPE, storage and reuse:**

**For removal** after a patient encounter:
- Inside the patient room, doff your gown and gloves by grasping the front of the gown and pulling it away from your body, breaking the ties. Ensure touching only the front of the gown with gloved hands. Roll into a ball. Remove gloves and discard both.
- Perform hand hygiene upon exiting the patient room.
- Outside the room, don a new pair of gloves.
- Doff your face shield, ensuring you do not touch the front of the shield. Wipe surfaces using a disinfectant wipe.
- Place face shield in a labeled paper bag.
- Perform hand hygiene.
- Grasp the bottom strap of the N95 and pull it over your head, then the top strap and lift the respirator forward and away from your face.
- Place in the same paper bag

**Prior to reuse,**
- If entering a room also requiring contact, don a gown and gloves. If just airborne precautions, don a clean pair of gloves to inspect for damage.
  - For respirator—ensure intact and shape maintained, not stretched out, nosepiece intact.
- Don respirator and conduct a seal check
- Don face shield
- Remove gloves and perform hand hygiene before entering patient room.
  - Don a new pair of gloves if entering contact precautions room.

**Process for extended or intermittent use:**

- Respirator to be donned at the beginning of care.
- Respirator **CAN** be worn throughout shift while caring for patients with the same infectious organism as long as it maintains it fit and function.
- If need to doff during shift (for example breaks, toileting) follow process for reuse.

*Thank you for your attention to practice detail so that we may keep our staff and patients safe.*