

## GUIDE FOR NON-COVID-19 UNITS

This is a guide to use for facilities that do not have dedicated COVID units to provide direction on how to utilize and conserve Personal Protective Equipment (PPE).

- Masks should be worn by all healthcare providers while in a healthcare facility (includes dietary, housekeeping, and all other leaders and ancillary stakeholders).
  - Masks should be used appropriately, at the mask level needed for a specific clinical situation.
    - As we all know, no mask is 100% guaranteed to prevent the spread of COVID-19, although some are better designed to do so (e.g., surgical or N95).
  - Use of surgical or non-surgical (e.g., Ezywrap) are appropriate for most everyday clinical activities, except as set forth below. **Note:** Homemade masks would only be used by stakeholders if no other approved masks are available (per CDC guidelines).
    - If you care for a resident in isolation or on respiratory or droplet precautions, wear a surgical mask and a face shield/goggles if aerosol generating procedures or splashes are likely.
    - And if you care for a resident that is suspected or positive for COVID-19, wear a surgical grade mask or fit tested N95 (especially for aerosol generating procedures) and a face shield/goggles.
- Surgical masks may be conserved and reused by stakeholders until visibly soiled, wet or torn.
  - Masks would be stored in a brown paper bag labeled with the stakeholder’s name and date.
  - Brown paper bags should be discarded if soiled, torn or wet and each time a stakeholder receives a new mask.
  - Store masks when on break, lunch and/or when not in the facility
- Reusable masks will also be stored in brown bag per instructions above for surgical masks
- Gloves **must** be changed between caring for every resident
- Hand hygiene **must** be performed when changing gloves
- Per CDC guidelines on preserving PPE, gowns **only** need to be worn when caring for residents in isolation where splashes are likely or for encounters where close resident care is being provided (ex. wound care, catheter care/insertion, bathing, etc.) unless otherwise required by state specific regulations/guidance.
  - If the facility is using reusable gowns, follow the process for wearing and reusing gowns
  - If disposable gowns are being reused, residents in isolation will have their own gown for each stakeholder going in the room.
    - The stakeholder will carefully doff the gown before exiting the room and hung right inside the door

Doffing: Storing N95/Surgical masks for Extended/Reuse	Donning: Extended/Reused Masks
1. Remove all PPE except for mask and face shield/goggles	1. Remove N95 respirator or surgical mask from storage bag (do NOT touch inside of mask).
2. Perform hand hygiene	3. Does not hold form? Yes = <b>Discard</b> ; No = Continue with process
3. Exit resident room	2. Put on N95 Respirator or surgical mask
4. Apply clean pair of gloves	3. If wearing a N95 respirator and the mask does not fit tightly, <b>discard</b> and Don a new mask
5. Remove face shield from back of head or goggles from sides	3. Perform hand hygiene
6. Clean face shield/goggles with disinfectant wipe from inside to outside	4. Continue donning the rest of your PPE.
7. Place clean face shield/goggles in designated location	
8. Remove gloves	
9. Perform hand hygiene	

10. Remove N95 Respirator from back of head or surgical mask from earpieces	
11. Check condition of Mask: a. Does not hold form or wet? Yes = <b>Discard</b> ; No = Continue to next step	
12. Cleanliness Check: a. Heavily Soiled? Yes = <b>Discard</b> ; No = Reuse and Continue to next step	
13. Place in paper bag, name and date should be written on the bag.	
14. Discard paper bag daily, with mask change or when soiled, torn or wet.	