

LATEST UPDATES

Tuesday, March 17, 2020

Stay Informed and Stay Protected

COVID-19 is top news and has become a daily concern. It is essential to ensure that we managing the correct information to ensure that we are supporting our patients, and community. As of today, we have not had anybody tested positive for coronavirus.

We are taking measures to have more controlled environment. We have secured our campus. Initiated screening at entry points. We have been opening the communication to you with this update and emails. We have actively re-directed our education and leadership to support and address departmental and hospital needs. We need you all to ensure the we are all aligned in addressing the personal protective equipment (PPE). We have a good supply of PPEs, however with a pandemic, there is a rationing to ensure we are stocked as we prepare for the future.

Personal protective equipment is used to prevent cross-contamination. PPE is our barrier between infectious materials and your skin, nose, mouth or eyes. This barrier has the potential to block the transmission of contaminants from blood, bodily fluids or respiratory secretions. This is our continuous reminder that PPE is pivotal in protecting all of us. Proper usage and continuous teamwork to ensure that we are managing our supplies appropriately and if you have any questions, please get to your leadership. With the COVID-19 pandemic, it is a good reminder that we have PPE necessary to stay safe. We need to all be clear on the guidelines. In today's UPDATE, we are including:

- Mask guidelines during a pandemic
- PPE categories
- 3. COVID-19 guidelines as it relates to PPE categories

If there are any questions, please direct it to you leaders.





Types of PPE Used in Healthcare Settings



- GLOVES protect hands
- GOWNS/ APRONS protect skin and/or clothing
- MASKS and RESPIRATORS protect mouth/nose RESPIRATORS – protect respiratory tract from airborne infectious agents.



FACE SHIELDS – protect face, mouth, nose, and eyes



Guidelines For Extended Use of N95 and Surgical Mask

During this pandemic, it is essential that Healthcare facilities address potential shortage of respiratory protection to conserve respirators, before facilities respiratory protection supplies deplete.

According to the Centers for Disease Control and Prevention (CDC) and Association for Professionals in Infection Control (APIC) Disposable N-95 respirators, when used solely to prevent occupational exposure to droplet/airborne viruses, can be safely used until contaminated, damaged, or no longer form a good seal.

Reuse of respiratory protection consist of removing and re-donning the device between encounters. However, we need to ensure that we do not contaminate the respirators. This is minimized, when health care personnel adhere stringently to hand hygiene before and after handling the respiratory protection device.

Key Safety Guides for Respirator Usage/Re-usage

- The respirator should not be removed, adjusted, or touched during patient care activities.
- Avoid contamination during use by not touching the outside of the respirator.
- Care should be taken to prevent touching the inside of the respirator.
- The respirator should be discarded after being used during an aerosol-generating procedure .
- The respirator should be discarded if it becomes grossly contaminated with the patient's body fluids, including blood or respiratory secretions. Note: this may be difficult for the wearer to discern. Healthcare personnel should be aware that even if not visibly soiled, the external surface of the respirator is considered to be contaminated.
- The respirator must be discarded if it becomes obviously soiled or damaged (e.g., creased, torn, or saturated) or if breathing through the device becomes difficult.
- Consider using a surgical/procedure mask or face shield over the respirator to reduce/prevent contamination of the device. If masks are also in short supply, face shield use should be encouraged to help conserve masks.
- Care should be taken during removal of the mask or face shield to ensure the respirator is not contaminated.
- The respirator should be removed carefully to avoid cross-contamination.
- Personnel should be instructed to use hand hygiene after putting the respirator on and following removal/placement in a storage location.
- The respirator should be stored in a clean, dry location that prevents it from becoming contaminated and maintains its
 physical and functional integrity Store the respirator in a breathable container, such as a paper bag, or hang the respirator in a
 designated area.
- If the respirator is to be stored in a container, the container/bag should be labeled with the user's name.
- The container/bag is a single use item because the inside can become contaminated due to storing a used respirator;
 therefore, the container/bag should be discarded after the respirator is re-donned.
- Consider labeling the respirator with the user's name to prevent staff from reusing another's respirator.
- Labeling should be written on the straps whenever feasible to prevent damage to the respirator.
- The respirator should be inspected before each use to ensure its physical integrity is intact and a seal-check should be
 performed by the healthcare personnel to ensure an adequate fit. Respirators that are damaged or cannot achieve an
 adequate fit during the seal check should be discarded.



LATEST UPDATES Continued..

AIRBORNE PRECAUTIONS VISITORS
Report to nurse before entering. STOP **Patient Placement** m an AIIR (Airborne Infection Isolation Room).

Monitor air pressure daily with visual indicators (e.g., flutter strips). Keep door closed except for entry and exit. In ambulatory settings instruct patients with a known or suspected airborne infection to wear a surgical mask and observe Respiratory Hygiene/Cough Etiquette. Once in an AIIR, the mask may be removed.

Patient Transport Limit transport and movement of medically-necessary purposes. vement of patients to

If transport or movement outside of an AIIR is necessary, instruct patients to wear a surgical mask, if possible, and observe Respiratory Hygiene/Cough Etiquette.

Hand Hygiene Standard Precautions

Personal Protective Equipment Wear a fit-tested NIOSH-approved **N95** or higher level respirator for respiratory protection when entering the room of a patient when the following diseases are suspected or confirmed: Listed on back.

DROPLET PRECAUTIONS



Don a mask upon entry into the patient roo

Hand Hygiene according to Standard Precautions.

Patient Placement Private room, if possible. Cohort or place patient as far away from other patients as possible if private room is not available.

Patient Transport Limit transport and movement of patients to medically-necessary purposes.

If transport or movement outside of an AIIR is necessary, instruct patients to **wear a surgical mask**, if possible, and observe Respiratory Hygiene/Cough etiquette.

No mask is required for persons transporting patients on Droplet Precautions.

CONTACT PRECAUTIONS

VISITORS
Report to nurse before entering.



Don gloves upon entry into the room or cubicle.

intact skin or surfaces and articles in close proximity to the patient.

Hand Hygiene according to Standard Precautions.

Don gown upon entry into the room or cubicle Remove gown observe hand hygiene before leaving the patient-care environment.

Patient Transport

Limit transport of patient to medically necessary purposes.

Remove and dispose of contaminated PPE and perform hand hygiene prior to transporting patients on contact precautions. Don clean PPE to handle the patient at the transport destination.



Gloves

Wear gloves whenever touching the patient's

Remove gloves before leaving patient room.



Ensure that infected or colonized areas of the patient's body or contained and covered.

Patient-Care Equipment

Use disposable noncritical patient-care equipment or implement a patient-dedicated use of such equipment.

CONTACT PRECAUTIONS

VISITORS
Report to nurse before entering.



Hand Hygiene

Use soap and water.

DO NOT use alcohol-based sanitizers.



Don gloves upon entry into the room or cubicle.

Wear gloves whenever touching the patient's intact skin or surfaces and articles in close proximity to the patient.

Remove gloves before leaving patient room.



Don gown upon entry into the room or cubicle Remove gown observe hand hygiene before leaving the patient-care environment.



Limit transport of patient to medically necessary purposes.

Ensure that infected or colonized areas of the patient's body or contained and covered.

Remove and dispose of contaminated PPE and perform hand hygiene prior to transporting patients on contact precautions.

Don clean PPE to handle the patient at the



Use disposable noncritical patient-care equipment or implement a patient-dedicated use of such equipment.





COVID -19: Existing CDC guidelines recommend a combination of approaches to conserve supplies while safeguarding health care workers in such circumstances as a COVID-19 Pandemic

	ISOLATION	PATIENT ROOM	MASKS	REUSABLE
COVID 19 w/o aerosol treatment	DROPLET	REGULAR ROOM	N-95	Yes
COVID 19 with aerosol treatment	AIRBORNE	NEGATIVE ROOM /HEPAFILTER	N-95. Unless when an employee failed fit test and needs to wear PAPR.	Discard N95 respirators following use during aerosol generating procedures

- Discard N95 respirators following use during aerosol generating procedures.
- Discard N95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients. b.
- Discard N95 respirators following close contact with any patient co-infected with an infectious disease requiring contact precautions. C.
- Use a cleanable face shield (preferred) or a surgical mask over an N95 respirator and/or other steps (e.g., masking patients, use of engineering controls), when feasible to d. reduce surface contamination of the respirator.
- Hang used respirators in a designated storage area or keep them in a clean, breathable container such as a PAPER BAG between uses. To minimize potential crosscontamination, store respirators so that they do not touch each other and the person using the respirator is clearly identified. Storage containers should be disposed of or cleaned regularly.
- Clean hands with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator (if necessary for comfort or to maintain fit).
- Avoid touching the inside of the respirator. If inadvertent contact is made with the inside of the respirator, perform hand hygiene as described above. g.
- Use a pair of clean (non-sterile) gloves when donning a used N95 respirator and performing a user seal check. Discard gloves after the N95 respirator is donned and any adjustments are made to ensure the respirator is sitting comfortably on your face with a good seal.