

GUIDANCE ON CAPR MANAGMENT



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Purpose	To provide guidance for staff on Controlled Air Purifying Respirator (CAPR) training, use, distribution, disinfection, and storage.
Scope	NYC Health and Hospitals System
Criteria for Use	<p>Staff Prioritization</p> <ul style="list-style-type: none"> • Healthcare staff in the Emergency Department, Intensive Care Units, and Anesthesia Departments shall be prioritized for CAPR use during aerosolizing procedures and/or airway procedures. <p>Procedure Prioritization</p> <ul style="list-style-type: none"> • Intubation • Bronchoscopy • Tracheostomy • Sputum Induction • Suctioning • Chest PT • Non-invasive ventilation (BiPAP/CPAP) • Nebulization • Bag mask ventilation
Training	<p>Just-in-Time Donning/Doffing MaxAir Training Video.</p> <p>Competency training can occur outside OHS. Competency training documentation must be submitted to facility Occupational Health Services.</p>
Process	<p>Storage of CAPRs in Central Sterile Services Department (CSS)</p> <ul style="list-style-type: none"> • CAPRs will be housed in the facility CSS in a clean area accessible to CSS staff and Hospital Administrators. • CAPRs are to be stored with all its components: <ul style="list-style-type: none"> ○ Head cover –Reusable ○ Battery Pack (must be plugged in to charge)- Reusable ○ Filter Cover Cap (FCC)- Reusable ○ Disposable Lens Cuff (DLC) –Disposable ○ HE Filer Cartridge- Disposable • IFUs must be available.

- CAPRs must be plugged in to charge when stored.
- Staff log sheet must be easily accessible. See Appendix I for log sheet.

Distribution of CAPRs

1. Staff shall obtain DLC shield from OHS.
2. Staff shall obtain CAPR in CSS.
3. Staff must sign in to the CAPR Staff Log within CSS.
 - The following must be filled on the log form in the CSS Department upon distribution:
 - Date Taken Out
 - Time Taken Out
 - CAPR Serial Number
 - Department, Floor, and Suite
 - Name of Requesting Staff and TKID#
 - In the event a CAPR is needed during the off hours of CSS, the Off-Tour ADN must be contacted via their cell to obtain CAPRs in CSS.
4. Transport of CAPR to Unit
 - CAPR must be placed into a clean, clear bag OR clean rigid container on a clean cart.
 - Bag must be labeled.

Pre-Cleaning of CAPR Immediately After Use

1. Once CAPR is appropriately doffed, all disposable parts must be discarded at point of use.
2. Pre-cleaning must be performed at point of use by unit staff: CAPRs and components (helmet, cord, battery, belt) are to be disinfected utilizing hospital issued Super Sani Wipes (Purple Top), following manufactures IFU.

CAPR Return After Use

1. CAPRS will be returned by unit staff to dedicated decontamination suite in CSS IMMEDIATLEY after point of use pre-cleaning.
2. Used CAPRS must be transported to CSS within red biohazard bag with appropriate labeling OR place CAPR in rigid container with a lid, and place on a clean cart. Cart and container should be routinely disinfected.

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- 3. Staff should not wear gloves during transport
- 4. The following must be filled out on the log form upon return of CAPR:
 - Date Returned
 - o Date and Time Returned
 - o Receiving CSS Staff Initials
 - o Matching CAPR Serial Numbers (yes/no)

Disinfection of CAPR by CSS

- 1. Disinfection of CAPR must be performed upon return by CSS staff: CAPRs and components are to be disinfected utilizing hospital issued Super Sani Wipes (Purple Top), following manufactures IFU.
- 2. CSP staff will don appropriate PPE (Impervious gown, faceshield, face mask, 12"-16" cuffed decontamination gloves, and knee high shoe covers).
- 3. CAPR units will be inspected upon receipt in the decontamination suite for the following: Disposable pieces have been removed, tears or breaks, damage to battery units, and contamination from blood or other bodily fluids not safely removed by following approved disinfection procedures.
- 4. Apply a suitable wipe with a decontaminating agent over all outside reachable surfaces, and then over all inside surfaces. CAPR System must NOT be soaked or submerged in liquids.
- 5. CAPR Units are transferred to the Prep & Pack area via pass-through window and allowed to air dry prior to storage.
- 6. Once dried CAPR batteries are placed on the charger units.
- 7. Upon retrieval by the end user, CAPR units are placed in a clear bag with a clean label.

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SEQUENCE FOR REMOVING (DOFFING) PERSONAL PROTECTIVE EQUIPMENT (PPE)

****If hands become visibly contaminated during PPE removal clean hands before continuing to remove PPE****

Inside patient room

1. Ensure doffing location at least 3 feet from patient

2. Disinfect gloved hands

3. Discard gloves:

- Remove gloves only touching the outside of the first glove and the inside of the second. Discard in waste bin.



4. Disinfect hands

5. Remove gown - avoid touching front/outer surface:

- Unfasten gown ties.
- Grab gown at shoulder and pull forward away from neck.
- Touching only the inside, turn gown inside out & roll it up.
- Discard gown in waste bin.



6. Disinfect hands

In the ante room or immediately outside of the patient's room if no ante room present

7. Don gloves

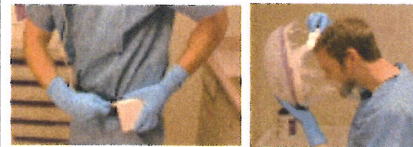
8. Set up CAPR disinfection area:

- Place several Sani wipes on a flat surface where you can rest your CAPR without contaminating the area.



9. Remove CAPR:

- Unplug battery.
- Loosen the adjustment knob at the back of the helmet.
- Tilt forward, then lift helmet off head with a forward motion.
- Place CAPR on top of the Sani wipes.



10. Remove DLC while the helmet rests on the Sani wipes

- Free the DLC from the posts of the helmet one at a time.
- Discard DLC in waste bin.



11. Disinfect gloved hands

12. Doff battery/belt & disinfect CAPR assembly:

- Remove belt and battery.
- Discard comfort strips.
- Use EPA approved disinfectant wipes to disinfect helmet, cord, battery, and belt.



13. Doff gloves

14. Perform hand hygiene

15. Return the CAPR helmet, battery, and belt to the designated area



