

**SUMMARY OF UPDATES**

*The following sections have been updated as of 8/16/2021:*

1. Protective eyewear should continue to be used for all patient encounters.
2. Universal masking is required at all NYC H+H facilities.
3. N95 respirators should be worn when caring for patients with confirmed or possible COVID-19.
4. N95 respirator use when caring for patients not suspected of COVID-19 during times of moderate to substantial community transmission.

Purpose	To provide guidance for PPE use for all healthcare personnel at NYC H+H. <b>Please note, all guidance is subject to change as additional information becomes available.</b>
Scope	NYC Health + Hospitals Health System
Requirements	Centers for Disease Control and Prevention (CDC)
Universal PPE Wear in all Areas	All personnel (staff, faculty, students, and volunteers), regardless of vaccination status, are required to wear a NYC H+H issued facemask at all times while on NYC H+H property.  In addition to universal facemask wear, specific transmission-based precautions are to be followed if applicable.
PPE Required for Confirmed or Possible SARS-CoV-2 Infection	PPE required for HCPs caring for patients with confirmed or possible SARS-CoV-2 Infection: <ul style="list-style-type: none"> <li>• N95 Respirator or equivalent or higher-level respirator</li> <li>• Isolation gown</li> <li>• Gloves (1 pair)</li> <li>• Eye Protection (face shield or goggles)</li> </ul>
PPE Guidelines	While on duty, staff working in a clinical area must wear the NYC H+H issued facemask throughout their shift, regardless of being in clinical or public space.  <b>Facemasks</b> are source control to prevent COVID-19 transmission and must fit closely to the face and cover the mouth and nose.  Facemasks are not required: <ul style="list-style-type: none"> <li>• When an individual is alone in a private office. A private office is a room with a door and walls to the ceiling and the room is designated for one person and other individuals enter infrequently.</li> </ul>

**Administrative or Non-Clinical Areas:**

- All personnel, regardless of past history of laboratory-confirmed COVID19 and recovered or being fully vaccinated, are required to wear a surgical, procedure, KN95 or cloth masks with two or more layers.
- Scarves, bandanas and cloth masks with exhalation valves are not allowed.
- Facemasks are required in waiting rooms, breakrooms/lounges, restrooms and elevators.
- While eating, staff may remove their facemask temporarily but should maintain social distancing by not sitting closer than 6 feet from each other.

\* Please note, cloth masks are not PPE and should NOT be used in place of surgical or procedure masks or NIOSH-approved respirators, OR as a strategy to achieve better fit when wearing a surgical or procedure mask when in clinical care areas.

**Protective Eyewear – Face shields/Goggles**

Wear protective eyewear in the following situations:

- All clinical care encounters
- When providing direct patient care
- During aerosol generating procedures (AGPs)
- When working in triage, registration, point of entry or screening areas or any location where an individual may present without a face mask and are unwilling or unable to put on a face mask promptly
- When obtaining nasopharyngeal swab samples
- As indicated by isolation precaution signage

**Gloves**

- Wear gloves when providing direct patient care of suspect or confirmed COVID-19 patient.
- If potential for contact with blood or body fluids, mucous membranes, non-intact skin, potentially contaminated environment is anticipated.

**Isolation Gown**

- Wear isolation gown for direct, close patient contact of suspect or confirmed COVID-19 patients.

N95 Respirator  
Use

**N95 Respirator User Requirements:**

- The User must be appropriately fit tested and trained on donning and doffing of the N95 respirator upon onboarding then annually, a change in N95 respirator model at the facility or a 10-pound weight gain or loss.

**N95 respirators or equivalent or higher-level respirators should be used for:**

- Patients with confirmed or possible SARS-CoV-2 infection when being evaluated medically
- Caring for a patient on Airborne Precautions or Airborne + Contact + Eye Protection Precautions OR Enhanced Droplet + Contact + Eye Protection Precautions
- All aerosol-generating procedures regardless of SARS-CoV-2 infection status
- When caring for patients not suspected of COVID-19 during times of moderate to substantial community transmission, HCP should use eye protection and one of the following: N95 respirator, a respirator approved under standards used in other countries that are similar to NIOSH-approved N-95 filtering facepiece respirators, or a well-fitting face mask.
  - Well fitted facemask means the lower half of the face, from the nasal bridge to under the chin must be covered without gaps in coverage around side of the face.

**CONSULT YOUR SUPERVISOR TO SEE IF N95 EXTENDED USE HAS BEEN ACTIVATED.**

**N95 Extended Recommendations:**

- If wearing an N95 respirator and a full-face shield, the N95 respirator may be worn repeatedly from patient to patient as long as it is not contaminated with patient blood and/or body fluids (includes nasal or respiratory secretions), wet or damaged or if it becomes difficult to breathe through
- If wearing a N95 respirator alone, place a surgical mask on top so as to extend the use the N95 repeatedly from patient to patient. Perform seal check after donning simple mask to ensure seal is intact.
- When doing extended use of N95, inspect N95 before each donning to ensure its physical integrity is intact and perform a seal-check to ensure an adequate fit; discard if damaged.
- Use a pair of clean (non-sterile) gloves when donning an extended 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.
- 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).

	<ul style="list-style-type: none"> <li>• Perform hand hygiene after discarding N95.</li> <li>• Discard N95 respirators following close contact with, or exit from, the care area of any patient co-infected with an infectious disease requiring contact precautions.</li> </ul> <p>To perform a “seal check,” cover the respirator with one or both hands. Be careful not to disturb the position of the respirator. Inhale and exhale. If air leaks around the nose or edges, re-adjust the respirator. Make sure respirator seals snugly against the face. If you CANNOT achieve a proper seal after adjusting, get an unused respirator. Immediately notify your supervisor with questions.</p> <p><b>DO NOT</b></p> <ul style="list-style-type: none"> <li>• <b>Do NOT</b> wear a N95 respirator which was already used by someone else.</li> <li>• <b>Do NOT</b> wear a N95 respirator if compromised (e.g., soiled, wet, damaged, etc.).</li> <li>• <b>Do NOT</b> wear a N95 respirator if you have facial hair and cannot obtain a tight seal.</li> <li>• <b>Do NOT</b> remove, adjust or touch the N95 respirator during patient care activities. If wearing a N95 respirator for extended use, avoid touching to front of the mask to minimize risk of self-contamination.</li> </ul> <p><b>N95 respirator should be exchanged and should NOT be extended use if:</b></p> <ul style="list-style-type: none"> <li>• Damaged</li> <li>• Contaminated with patient blood and/or body fluids (including respiratory or nasal secretions)</li> <li>• Physical integrity is not intact (e.g., straps no longer functional)</li> <li>• Cannot achieve adequate fit</li> <li>• Cannot achieve seal</li> </ul> <p>Discard N95 respirators after use in the regular trash unless free flowing blood noted.</p>
<p>Surgical or Procedure Mask Use</p>	<p><b>Surgical and Procedure Mask Extended Use Recommendation:</b></p> <ul style="list-style-type: none"> <li>• Surgical and procedure masks may be worn repeatedly from patient to patient for four hours unless it is damaged, wet or contaminated with patient blood and/or body fluids (includes nasal or respiratory secretions) OR if it becomes difficult to breathe through.</li> <li>• Discard the surgical or procedure mask in the regular trash unless free flowing blood noted.</li> </ul>

	<ul style="list-style-type: none"> <li>Do not touch front of the mask after use as it is contaminated after use. If during the shift, the mask gets compromised discard and get a new one.</li> </ul>													
<p>Eye Protection – Goggles and Face Shield Use</p>	<p><b>Eye Protection Extended Use Recommendations</b></p> <ul style="list-style-type: none"> <li>Eye Protection includes face shields or goggles.</li> <li>Eye Protection may be worn for an extended period when caring for multiple patients.</li> <li>Eye Protection may be worn from patient to patient if the eye protection is not touched, does not become contaminated with blood or body fluids, and is not removed.</li> </ul> <p><b>To reduce contact transmission after donning, take the following steps:</b></p> <ul style="list-style-type: none"> <li>Discard face shield or goggle contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.</li> <li>Perform hand hygiene with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the face shield or goggle</li> <li>Discard any face shield, goggle or eyewear that is damaged or is unable to maintain its fit and function</li> </ul>													
<p>Definitions</p>	<table border="1"> <tr> <td data-bbox="454 1035 709 1167"><b>Aerosol Generating Procedure</b></td> <td data-bbox="716 1035 1427 1167">Any procedure carried out on a patient that may produce infectious aerosols or droplets</td> </tr> <tr> <td data-bbox="454 1167 709 1230"><b>CAPR/PAPR</b></td> <td data-bbox="716 1167 1427 1230">Continuous, Powered, Air Purifying Respirators</td> </tr> <tr> <td data-bbox="454 1230 709 1352"><b>Clinical Care Encounter</b></td> <td data-bbox="716 1230 1427 1352">Any interaction between patient and healthcare personnel for the purpose of providing healthcare service(s) or assessing the health status of a patient</td> </tr> <tr> <td data-bbox="454 1352 709 1415"><b>Eye Protection</b></td> <td data-bbox="716 1352 1427 1415">Includes face shield/visors and goggles</td> </tr> <tr> <td data-bbox="454 1415 709 1682"><b>Extended Use</b></td> <td data-bbox="716 1415 1427 1682">Refers to the practice of wearing the same PPE for repeated close contact encounters with several patients, without removing the item 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.</td> </tr> <tr> <td data-bbox="454 1682 709 1908"><b>Healthcare Personnel (HCP)</b></td> <td data-bbox="716 1682 1427 1908">HCP refers to all persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances; contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air</td> </tr> </table>	<b>Aerosol Generating Procedure</b>	Any procedure carried out on a patient that may produce infectious aerosols or droplets	<b>CAPR/PAPR</b>	Continuous, Powered, Air Purifying Respirators	<b>Clinical Care Encounter</b>	Any interaction between patient and healthcare personnel for the purpose of providing healthcare service(s) or assessing the health status of a patient	<b>Eye Protection</b>	Includes face shield/visors and goggles	<b>Extended Use</b>	Refers to the practice of wearing the same PPE for repeated close contact encounters with several patients, without removing the item 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.	<b>Healthcare Personnel (HCP)</b>	HCP refers to all persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances; contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air	
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DOC ID HHCMPA42020 v12

Effective Date: August 16, 2021

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	<p><b>N95 Respirator</b></p>	<p>A N95 respirator is a respiratory protective device designed to achieve a very close facial fit and very efficient filtration of airborne particles.</p>
	<p><b>Source Control</b></p>	<p>Source control is to wear a facemask to cover a person's nose and mouth to prevent spread of respiratory secretions from the wearer to other people.</p>
<p>References</p>	<p>CDC- <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#Infection-Control">https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#Infection-Control</a></p> <p>CDC - <a href="https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html">https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html</a></p> <p>CDC - <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html</a></p> <p>CDC - <a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html</a></p>	

**Reviewed and/or Revised**

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**Previous Versions of this Guidance**

Signature	Title	Date
Machelle Allen	SVP/CMO	Version 1 - February 27, 2020
Machelle Allen	SVP/CMO	Version 2/3 - Revised March 24, 2020
Machelle Allen	SVP/CMO	Version 4 – Revised April 13, 2020
Machelle Allen	SVP/CMO	Version 5 – Revised May 5, 2020
Machelle Allen	SVP/CMO	Version 6 – Revised May 26, 2020
Machelle Allen	SVP/CMO	Version 7 – Revised June 10, 2020
Machelle Allen	SVP/CMO	Version 8 – Revised September 28, 2020
Machelle Allen	SVP/CMO	Version 9 – Revised January 13, 2021
Machelle Allen	SVP/CMO	Version 10 – Revised March 12, 2021
Machelle Allen	SVP/CMO	Version 11 – Revised May 14, 2021