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NYC HEALTH+

HOSPITALS

SUMMARY OF UPDATES

The following sections have been updated as of 5/14/2021:

- 1) PPE for Suspected and Confirmed COVID-19 Patients
- 2) PPE in healthcare facilities
- 3) PPE in non-clinical areas

Purpose	To provide guidance for (1) PPE use for suspected and confirmed COVID19 patients, (2) N95 respirator use or equivalent/higher, (3) universal PPE wear in all areas.			
	Please note, all guidance is subject to change as additional information becomes available.			
Scope	NYC Health + Hospitals Health System			
Requirements	Centers for Disease Control and Prevention (CDC)			
	New York State Department of Health (NYSDOH)			
Universal PPE in All Areas	All personnel (staff, faculty, students, and volunteers), regardless of vaccination status, are required to wear a facemask all the time on NYC H+H property.			
	NYC H+H issued facemasks are required in all clinical locations and areas w patients may be present.			
	In addition to universal facemask wear, specific transmission-based precautions are to be followed if applicable.			
PPE for Confirmed	PPE for HCPs Caring for Patients with Confirmed or Possible SARS-CoV-2 Infection:			
or Possible SARS- CoV-2 Infection	 N95 Respirator or equivalent or higher-level respirator 			
	Isolation gown			
	Gloves (1 pair)			
	Eye Protection (face shield or goggles)			
	HCP Administering COVID-19 Vaccines:			
	Surgical or procedure mask			
	Gloves (1 pair)			
	 Community Engagement Specialists (CES)/ Contact Tracers/Community Care N95 Respirator OR surgical OR procedure mask Gloves (1 pair) (as needed) 			



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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.
	Facemasks 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: 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. When eating, however staff should maintain social distancing by not sitting closer than 6 feet from each other.
	 Administrative or Non-Clinical Areas: All personnel, regardless of past history of laboratory-confirmed COVID- 19 and recovered or being fully vaccinated, are required to wear a surgical, procedure, KN95 or cloth masks with two layers. Scarves, bandanas and cloth masks with exhalation valves are not allowed.
	* Please note, cloth masks are not personal protective equipment 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: 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.
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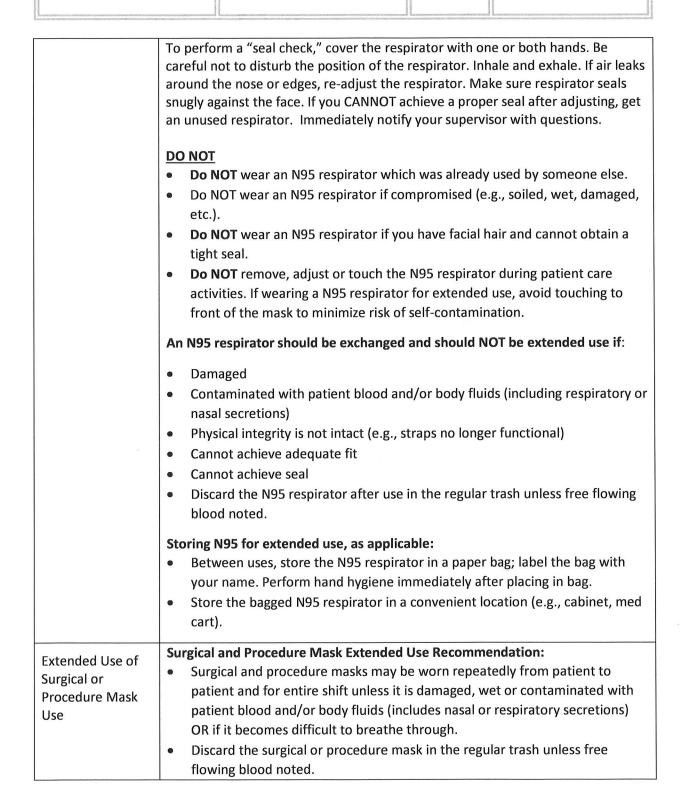
5	Isolation Gown
	• Wear isolation gown for direct, close patient contact of suspect or
	confirmed COVID-19 patients;
	Upon entry to an open COVID-19 unit
	N95 Respirator User Requirements:
N95 Respirator	 The User must be appropriately fit tested and trained on donning and
Use	doffing of the N95 respirator upon onboarding, 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
	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,
	wet or damaged.
	 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.
	• Use the same N95 Respirator for the entire shift 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.
	• 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 a 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)
	Perform hand hygiene after discarding N95.
	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.

PERSONAL	PROTECTIVE	EQUIPMENT	GUIDANCE	for COVID-19	
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	• 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.			
Extended Use of Eye Protection – Goggles and Face Shield Use	 Eye Protection Extended Use Recommendations Eye Protection includes face shields or goggles Eye Protection may be worn for an extended period when caring for multiple patients. 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. To reduce contact transmission after donning, take the following steps: Discard face shield or goggle contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients. 			
	 secretions, or other bodily fluids from patients. Perform hand hygiene with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the face shield or goggle Discard any face shield, goggle or eyewear that is obviously damaged or is unable to maintain its fit and function 			
Definitions	Aerosol Generating Procedure	Aerosol generating procedure: Any procedure carried out on a patient that may produce infectious aerosols or droplets		
	CAPR/PAPR	Continuous, Powered, Air Purifying Respirators		
Clinical Care Encounter		An interaction between a patient and healthcare provider(s) for the purpose of providing healthcare service(s) or assessing the health status of a patient.		
	Enhanced Droplet+Contact+Eye Protection	A Transmission-Based Precaution which includes placing patient on Droplet+Contact+Eye Protection and wearing a N95 respirator or equivalent; to be used if Airborne Infection Isolation Rooms (AIIRs) are not available.		
	Extended Use	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.		

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	Eye Protection	Includes face shield/visors and goggles.	
	Healthcare Personnel (HCP)	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.	
	N95 Respirator	An N95 respirator is a respiratory protective device designed to achieve a very close facial fit and very efficient filtration of airborne particles.	
	Open COVID-19 Unit	A multi-bed location where patients are not located in individual negative pressure rooms.	
	Source Control	The use of well-fitting face masks or respirators to cover a person's mouth and nose to prevent spread of respiratory secretions when they are talking, sneezing, or coughing. They are recommended for everyone in a healthcare facility, even if they do not have symptoms of COVID-19.	
References	CDC- <u>https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#Infection-</u> Control		
	<u>CDC - https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-</u> recommendations.html		
	CDC – https://www2.cdc.gov/vaccines/ed/covid19/moderna/40130.asp		
	NYSDOH - https://coronavirus.health.ny.gov/system/files/documents/2021/01/nysdoh- hcp-webinar-1.14.21.finalpdf		



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Reviewed and/or Revised

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Title

Date

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

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