

# PPE Required in Patient Care Areas During COVID-19 Pandemic: Acute and Long-term Care

This document provides the best current guidance for PPE use in patient care areas in acute and long-term care. It will be updated if guidance changes.

All Inpatient Care Areas (including Mental Health, Pediatric, Adult and Long-term Care, Porters and Lab Techs)								
Patient Description	Excellent Hand Hygiene	Gown	Gloves	Surgical Mask	Face Shield/Visor or Goggles*	N95 Mask	Head and Neck Covers	Doffing
No respiratory symptoms or fever reported by patient or detected by assessment.	✓	Not required	✓	✓	Use Safety Glasses	Not required	Not required	Change gloves between patients. Don a mask at the beginning of your shift, only changing the mask if it is too damp, soiled, or damaged for safe use. Masks should be removed at the start of a meal break and replaced with a new mask when the meal break is over.
Patient reports/develops respiratory symptoms or fever.	✓	✓	✓	✓	✓	Not required	Not required	Full doffing of all elements, except face shield/visor, which requires cleaning.
Known or highly suspected COVID (i.e., awaiting testing) patient.	✓	✓	✓	✓	✓	Not required	Not required	Full doffing of all elements, face shield/visor requires cleaning.
COVID Cohorted Unit.	✓	✓	✓	✓	✓	Not required	Not required	May use same mask and eye protection between patients, but must change gloves and perform hand hygiene between patients. When leaving care area or unit, doff and dispose mask and clean face shield/visor. (i.e., going for break, end of shift.)
Aerosol generating procedures not itemized in next row (see footnote** as well).	✓	✓	✓	Not required	✓	✓	Not required	Doff all elements. N95 put into receptacle for reprocessing. Face shield/visor require cleaning.
Performance of specific aerosol generating procedure: intubation and extubation, bronchoscopy, TEE, gastroscopy.	✓	✓	✓	Not required	✓ (Face Shield)	✓	Not required	Doff all elements. N95 put into receptacle for reprocessing. Face shield/visor require cleaning.

\* Note: Safety glasses are considered adequate eye protection except in high risk areas.

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## Emergency Department Staff & Physicians

Patient Description	Excellent Hand Hygiene	Gown	Gloves	Surgical Mask	N95 Mask	Face Shield/ Visor or Goggles*	Head and Neck Cover	Doffing
All ED patients until status known.	✓	Not required	✓	✓	Not required	Use safety glasses	Not required	Doff mask and dispose of it when leaving care area (i.e., on break or end of shift). Don a mask at the beginning of your shift, only changing the mask if it is too damp, soiled, or damaged for safe use. Masks should be removed at the start of a meal break and replaced with a new mask when the meal break is over. If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area (see below).
Patient reports/develops respiratory symptoms or fever.	✓	✓	✓	✓	Not required	✓	Not required	Full doffing of all elements, eyewear requires cleaning. Report new symptoms to MRP to assess whether COVID testing indicated and determine staff exposure management plan.
Known or highly suspected COVID (i.e., awaiting testing) patient.	✓	✓	✓	✓	Not required	✓	Not required	Full doffing of all elements, eye protection requires cleaning.
COVID cohorted unit.	✓	✓	✓	✓	Not required	✓	Not required	May use same mask and eye cover between patients, but change gloves between patients. When leaving care area, doff mask and clean eye protection (i.e., going for break, end of shift).
Aerosol generating procedures not itemized in next row (see footnote** as well).	✓	✓	✓	Not required	✓	✓	Not required	Doff all elements. N95 put into receptacle for reprocessing. Face shield/eye protection require cleaning.
Performance of specific aerosol generating procedures: intubation and extubation, bronchoscopy, TEE, gastroscopy.	✓	✓	✓	Not required	✓	✓ (Face Shield)	Not required	Doff all elements. N95 put into receptacle for reprocessing. Face shield/eye protection require cleaning.

\* Note: As per Infection Prevention and Control (IPAC), appropriate eye protection is visor, face shield or goggles.

# PPE Required in Patient Care Areas During COVID-19 Pandemic

Operating Rooms										
Role	COVID-19 Swab	Excellent Hand Hygiene	Surgical Gown	Gloves	Surgical Mask	N95 Mask	Face Shield/Visor or Goggles*	Head Covers	Doffing	Workflow
Anesthetist	N/A	✓	✓	✓	✓ (except for AGMP)	✓ (only for AGMP)	Face Shield	✓	Doff all elements. N95 put into receptacle for reprocessing. Face shield/visor require cleaning.	<ol style="list-style-type: none"> <li>1. Only Anesthetist and RN/assistant are in the room during intubation.</li> <li>2. Wait seven air exchange cycles (length of time varies by site).</li> <li>3. Surgical team (including nurses and surgeon) don surgical PPE as per regular procedure, Surgery occurs, patient is closed.</li> <li>4. Surgical team leaves OR.</li> <li>5. Anesthetist and RN/anesthetic assistant extubate patient.</li> <li>6. Wait seven cycles for air to clear.</li> <li>7. Exit OR.</li> </ol>
Assistant	N/A	✓	✓	✓	✓ (except for AGMP)	✓ (only for AGMP)	Face Shield	✓		
Surgical Team (nurses and surgeon)	N/A	✓	✓ Regular surgical PPE per usual processes.			✓	Face Shield	✓		
Patient Description	COVID-19 Swab	Excellent Hand Hygiene	Surgical Gown	Gloves	Surgical Mask	N95 Mask	Face Shield/Visor or Goggles*	Head Cover	Doffing	Workflow
Patient has fever or respiratory symptoms.	Yes, time permitting	✓	✓	✓	Not required	✓	✓	✓	Doff all elements. N95 put into receptacle for reprocessing. Face shield/visor require cleaning.	<b>Note:</b> Whole team wears PPE.

\* Note: As per Infection Prevention and Control (IPAC), appropriate eye protection is visor, face shield or goggles.