

PPE Use in the Operative Environment

Intubation and extubation are considered aerosol-generating procedures (AGPs)

For all patients, while the provider(s) is(are) intubating or extubating, he/she(they) should be alone in the room and wearing an N95 mask, face shield, gown, and gloves. All others must leave. If other personnel must be in the room at time of intubation, they should wear the same PPE.

- Intubations/extubations performed in MCE, 4 South and Children's ORs require the use of a portable HEPA filter during the procedure as they do NOT have built in HEPA filters (not required for Main VUH ORs or FEL).

For all other aerosol generating procedures including bronchoscopy, airway or sinus surgery, and other procedures as approved by the PPE Request Review Committee (submit requests to <mailto:vumccoronavirus@vumc.org>), all personnel in the room should:

- Use an N95 mask, face shield, gloves, and gown.
- N95 should be single use in these cases. Please submit for disinfection/reprocessing.
- AGP performed in MCE, 4 South and Children's ORs require the use of a portable HEPA filter during the procedure as they do NOT have built in HEPA filters (not required for Main VUH or FEL ORs).

For non-aerosol generating procedures NOT noted above:

- **Non-suspected or non-confirmed COVID-19 Patients, all personnel in the room should:**
 - Use usual PPE as per routine care including standard surgical mask.
- **Suspected or Confirmed COVID-19 Patients, all personnel in the room should:**
 - Use gown/gloves, standard surgical mask, and eye protection.
 - Goggles and face shields may be reused. Clean with a purple top wipe and store in a plastic bag labeled with your name. Other PPE is single use.

What is the difference between N-95 and PAPR?

- **N-95 with eye protection is clinically equivalent to a PAPR in this setting**
- PAPR is multi-use ([video](#)) and you must be officially trained by VEHS in order to use
- VUMC has positioned PAPRs in locations where a high volume of AGPs are performed
 - **To clean a PAPR:** Turn off device, unlatch belt & hose (place on 1st Chux pad), wipe with disinfectant wipes, place clean PAPR on 2nd Chux pad. Allow to dry. Remove hood (wiping inside first, then outside)- place on 2nd Chux pad to dry.

Environmental Cleaning Recommendations after Procedure:

- Non-suspected/non-confirmed COVID-19 patients after any procedure including AGP→Standard cleaning
- **Suspected or confirmed COVID-19 patients: VUH Main OR and FEL**
 - Room must stay empty (no patients) for 30 minutes* after procedure (given 15-20 air exchanges/hr which removes 99.9% of air during that time)
 - HEPA filter is not required as these rooms have HEPA filtration built in
 - During the 30 minutes, perioperative cleaning staff may clean room using N-95, gowns, gloves and eye protection.
- **Suspected or confirmed COVID-19 patients: MCE, 4 South, and Children's**
 - Room must stay empty (no patients) for one hour after procedure
 - Place a portable HEPA filtration unit in the OR for one hour
 - During the one hour, perioperative cleaning staff may clean room using N-95, gowns, gloves and eye protection.