

# New PPE Guidelines FAQs

**Effective July 20, 2020, healthcare personnel must wear eye protection and surgical/procedural masks with direct, prolonged patient interactions.**

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## **Frequently Asked Questions**

### **Who must wear eye protection and surgical masks?**

Anyone entering a patient-occupied clinic exam or hospital room or having direct, prolonged (>5 min) contact with a patient. This guidance does not replace recommended PPE for other specific isolation precautions.

### **Can I reuse the surgical mask and eye protection between patients?**

Yes, with a few exceptions. The surgical mask and eye protection must be worn across multiple patient encounters without disposal. Surgical masks must be discarded if they become wet, torn, or soiled. Eye protection must be cleaned if it becomes contaminated or soiled. When exiting a contact or droplet precaution room, masks must be discarded and eye protection cleaned.

### **When must a cloth mask be worn?**

Anyone not providing direct, prolonged patient care and not entering patient rooms must wear a cloth mask. A cloth mask must be worn outside of patient care areas including the cafeterias, courtyards, parking garages, hallways, administrative offices, and valet areas.

### **What is considered “eye protection”?**

Eye protection includes goggles, face shields, mask with splashguard, safety glasses, or shields that clip onto the sides of personal eyeglasses. Personal eyeglasses alone are not considered adequate eye protection.

### **Do I still need to wear eye protection and a surgical mask if a patient has tested negative for SARS-CoV-2?**

Yes.

### **What led to the change in PPE recommendations?**

If persons to whom you are exposed are wearing masks, then their respiratory droplets will be contained by their mask; however, patients are not always fully compliant with wearing masks properly. Though SARS-CoV-2 spreads primarily through a respiratory route, it is possible the virus could land in the eye and lead to infection even if your mouth and nose are covered by a mask. Rates of COVID-19 community transmission are increasing in our region, and CDC has recently recommended the addition of eye protection in this setting.

### **Why do direct patient care providers need to wear eye protection but patients only wear masks?**

Healthcare personnel have more interactions with individual patients who are sometimes unable to wear a mask due to intolerance or a need to remove the mask for patient care examinations; therefore, additional PPE is used by healthcare personnel. Patients do not have the same amount of interactions and will be protected from spread by the universal use of surgical masks and eye protection by our healthcare personnel.

### **How do I clean my eye protection?**

Do not touch your eye protection during direct patient care. If your eye protection becomes contaminated or soiled, promptly remove, wipe down with hospital approved disinfectant, and allow to air dry. Perform hand hygiene. Store your eye protection in a bag, labeled with your name, and continue to use across multiple shifts while in good condition.

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## **How do I store my surgical mask?**

Do not touch your surgical mask during direct patient care. Store your mask by folding it in half (clean interior sides together), place in a paper bag, labeled with your name. Continue to use across multiple shifts while in good condition. If your mask becomes wet, torn, or soiled, remove your mask holding the straps and discard.

## **How do we obtain PPE?**

Supplies are available in outpatient clinics and inpatient areas. You can be request PPE through the area leadership teams or staffing leaders.