



Respiratory Guidance

Recommended guidance for reuse of N95 respirators and procedure masks:

- When re-using your mask/respirator:
 - Masks may be reused for your shift
 - Masks may be reused going from patient room to patient room, except upon leaving the care area of a patient in contact or enteric precautions
 - Use clean (non-sterile) gloves when donning the mask/respirator and when performing a seal check
 - Discard the gloves after the mask/respirator is on and adjusted
 - Clean your hands with soap and water or hand sanitizer before and after touching or adjusting the mask/respirator
 - Avoid touching the inside of the mask/respirator
 - If contact is made with the inside of the mask/respirator perform hand hygiene as described above
 - Place used respirator in a paper bag, and label the paper bag with your name
 - Dispose the paper bag at the end of the shift, along with the mask/respirator

- Discard your mask/respirator:
 - When it is contaminated with blood, respiratory or nasal secretions, or other bodily fluids
 - Upon leaving the care area of a patient in contact or enteric precautions
 - Following use during an aerosol generating procedure
 - If it is visibly soiled, damaged, or hard to breathe through
 - At the end of your shift

- How to clean goggles/disposable face shields:
 - May be reused going from patient room to patient room,
 - Disinfect upon leaving the care area of a patient in contact or enteric precautions
 - Upon removal wipe with a hospital approved disinfectant. Allow to air dry

3/2020 This guidance is only applicable during the COVID-19 global outbreak under the direction of the Department Clinical of Epidemiology.