Reuse of N-95 respirators and PAPRs

Purpose: Supplies of N95 respirators and PAPR hoods are in increased demand in critical settings during infectious diseases pandemics. Existing CDC guidelines recommend a combination of approaches to conserve supplies while safeguarding healthcare workers in such circumstances. In these situations, existing guidelines recommend that healthcare institutions:

- Reuse can occur under the following conditions:
 - N-95 respirators must only be used by a single healthcare worker.
 - Use a full-face shield or a surgical mask over an N-95 respirator to reduce surface contamination of the respirator during patient encounters.

After doffing N-95 respirator:

- Perform hand hygiene.
- Don clean gloves
- Inspect N-95 respirator for signs of damage or contamination, discard if present.
- N-95 respirators can be disinfected in UV disinfection devices.
 - UV disinfection devices will be placed on designated units
 - o BH15
 - o BH62
 - o BH61
 - o BHOR
 - o CAOR
 - o ED
 - Close door of UV device to begin disinfection.
 - After 10 minutes, disinfection is complete and N-95 can be removed.
- Keep used respirators in a clean breathable container (e.g. paper bag) between uses.
- Store respirators so that they do not touch each other. Staff will write their name on the bag and/or on the elastic straps so the person using the respirator is clearly identified. (Do NOT write on the mask)
- Paper bags are single use and should be disposed each time mask is removed.

When donning N-95 from paper bag:

- Always perform hand hygiene and use clean gloves when donning a used N-95 respirator and performing a user seal check.
- Discard gloves after the N-95 respirator is donned and any adjustments are made to ensure the respirator is sitting comfortably on your face with a good seal. Perform hand hygiene after removing gloves.
- Avoid touching the mask. Anytime one touches the N-95, it is necessary to perform hand hygiene as described above.

Discard N-95 respirator (do not reuse) if:

- Contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.
- The straps are stretched so they no longer provide enough tension for the respirator to seal to the face.
- If the nose piece or other fit enhancements are broken.
- The respirator is obviously damaged or becomes hard to breathe through.
- The respirator has been used more than five times or has been used continuously for >eight hours.