

Eye Protection Recommendations FAQs

1. **Our Infection Prevention team has indicated goggles are appropriate eye wear for certain team members (screeners for example). How should they be appropriately cleaned and stored?**
 - a. Goggles should be appropriately cleaned and disinfected according to manufacturer’s reprocessing instructions using a hospital-approved disinfectant and stored in a bag once disinfected and dry.

2. **Is there a chart with scenarios for when to wear a face shield and when to wear other eye protection?**
 - a. Face shields will continue to be REQUIRED for care of patients on Special Airborne Contact isolation, Droplet, or Droplet/Contact isolation. If a task may result in splash to a respirator or face mask, then a face shield is the preferred choice to protect the mask worn underneath. Personnel who are providing directions, information, or otherwise do not require eye protection because they are not providing direct patient care (or entering a room with an unmasked patient) but want eye protection for interaction with masked patients can choose other forms of eye protection.

	Direct patient caregivers (e.g., nurses, physicians, therapists, phlebotomists)	Staff working in the patient’s clinical environment (e.g., Environmental Services, Food Services, Case Management)	Staff working in non-clinical areas that interact with patients (e.g., Information Services, Screeners, Security, PRMO)	Eye Protection Types	Cleaning
Asymptomatic masked patients	Eye Protection at user’s discretion	Eye Protection at user’s discretion	Eye protection at user’s discretion	Face shield, goggles, or glasses	Continue use until finished interacting with patients, then clean using a hospital approved disinfectant.

Asymptomatic patients not masked	Eye Protection (required)	Eye Protection (required)	Eye Protection (required)	Face shield or goggles. Goggles must be approved by hospital specific protocol.	Clean after each patient interaction unless returning to patient room or going directly to next patient room.
Patients on isolation (Special Airborne Contact, Special Contact/Droplet, Special Droplet)	Face shield (required)	Face shield (required; avoid entry according to hospital protocol)	Not applicable	Face shield only	Clean after each patient interaction unless returning to patient room or going directly to next patient room.

3. The [recommendations](#) say “Individual healthcare workers may wear their own eye protection when not providing care to patients on Special Airborne Contact isolation, Droplet, or Droplet/Contact isolation.” What does their own eye protection mean? Eye glasses?

- a. If the healthcare worker is entering a patient room or patient care area with unmasked patients present, their eye protection must be goggles or a face shield. If they are NOT providing direct patient care (e.g., security, information desk, patient check-in), their own eye protection can be any eye protection of their choosing, including eye glasses, because eye protection is not required.

4. Are there specific guidelines that can be broken down for inpatient vs. outpatient care?

- a. For healthcare workers providing direct patient care whether inpatient or outpatient, face shields are the preferred eye protection as they provide full coverage of the eyes and also protect the underlying face mask from potential contamination.

5. How are floating staff to use this? Those not just going from unit to unit (ex: resp therapy), but from location to location?

- a. Floating staff should carry their eye protection with them in a bag.

6. Are face shields required while caring for infants in an isolette?

- a. No, face shields are not required while caring for infants within an isolette since the isolette provides barrier protection for the eyes. There should be eye protection available to providers if they choose to use it in addition to the protection afforded by the isolette. Eye protection is required for care of infants outside of isolettes.

7. What are the specifications that are needed for staff to purchase their own, i.e side add on to normal glasses, how far down for side protection, any top or bottom restrictions?

- a. Eye protection is required for direct patient care with unmasked patients and for staff entering the room with unmasked patients such as dietary and Environmental Services personnel. Those staff must use either a face shield that covers the front and sides of the face or goggles. Eye glasses with side shield add-ons and safety glasses are not acceptable because it is still possible for splash to reach the eyes. If team members choose to wear eye protection in other scenarios, they can use any eye protection they choose.

8. How often should face shields be removed and cleaned?

- a. Face shields should primarily be removed and disinfected after each use except:
 - i. If the staff member is returning immediately to the patient's room, the face shield is to remain untouched and in place. Hand hygiene is to be performed.
 - ii. If staff is immediately going into another patient room, the face shield is to remain untouched and in place. Hand hygiene is to be performed.
- b. PSA or other non-clinical staff choosing to wear a face shield or other eye protection at the front desk or during building screening should disinfect their face shield/eye protection after removing and prior to storing for next use.