

PPE Donning Procedures

Inpatient and Emergency Department

1. Remove all non-essential items (jewelry, cell phone, name tag, personal stethoscope) before donning PPE.
2. Put long hair up in a bun.
3. If N95 can be reused, label paper bag with date, time of first use, full name per “DUHS Guidelines for N95 Reuse.”
4. Put on shoe covers.
5. Put on gloves.
6. Put on N95* respirator / PAPR belt and PAPR with hood. If using PAPR, check battery levels.
7. Put on gown – Observer will need to assist with securing the neck and both the interior and exterior ties.
8. Put on face shield (not required if wearing PAPR).

PPE Doffing Procedures

If using N95*

**N95 users must be medically cleared and fit-tested annually*

1. While still in patient room, take off booties holding the cuff of the bootie and carefully dispose.
2. Open anteroom door, step into anteroom space; close the door.
3. Remove gown touching at the shoulder away from face, and roll inside out.
4. Remove gloves using proper technique.
5. Perform hand hygiene.
6. Don new pair of gloves.
7. Slightly lean forward, remove face shield using two hands touching elastic band behind ears .
8. Remove N95 by handling bottom strap first and then the top strap behind ears
9. If N95 can be reused per “DUHS Guidelines for N95 Reuse,” place it directly in the labeled paper bag. Otherwise, discard.
10. Remove gloves using proper technique.
11. Wash hands with soap and water.

PPE Doffing Procedures

If using PAPR

PAPRs should be disinfected and re-used for ONE employee. PAPRs should not be shared between people.

1. While still in patient room, take off booties holding the cuff of the bootie and carefully dispose.
2. Open anteroom door, step into anteroom space; close the door.
3. Remove gown touching at the shoulder away from face, and roll inside out.
4. Remove gloves using proper technique.
5. Perform hand hygiene.
6. Don new pair of gloves.
7. While PAPR is still ON, use a disinfectant wipe (Oxivir TB or Avert bleach wipes) to wipe the front, top, sides and back of the PAPR hood. Discard wipe.
8. Slightly lean forward, remove PAPR hood by grabbing from top tipping forward pulling away from face.
9. While PAPR hood is connected, disinfect hood thoroughly with another disinfectant wipe, specifically in areas hard to reach during the first wipe down (where the hose connects to the hood, for example).
10. Disconnect hood from hose and place in designated plastic bag (e.g., patient belonging bag) labeled with full name.
11. Turn off PAPR unit. Unbuckle PAPR blower unit from waist.
12. Use Oxivir or Avert bleach wipes to disinfect the outside of the blower unit and hose thoroughly.
13. Remove gloves using proper technique.
14. Wash hands with soap and water.
15. Store PAPR blower unit in designated area. Place on charger.

Reminders

1. Ensure a buddy is present for PPE donning and doffing.
2. When preparing the room remove any non-essential supplies from the room to avoid wasting.
3. Ensure PPE, hand hygiene products and disinfectant wipes stocked/available.
4. If obtaining lab specimens, be sure to take everything in room (e.g. labels, lab tubes/swabs, one biohazard bag).
5. Ensure all signage is in place; perform tissue test and document negative pressure (if applicable).
6. Ensure isolation is ordered.
7. Promote bundling of care.
8. Locate trash bin in strategic locations such as next to ante-room door instead of far side of room.
9. If patient’s status is unknown and transferred to another unit, ensure signage stays on doors/ windows while facilitating EVS/Tru-D Team.