N95 RESPIRATOR REUSE POLICY

The following policy is based on the CDC/NIOSH policy done as part of Pandemic Planning: Recommended Guidance for Extended Use and Limited Reuse of N95 Filtering Facepiece Respirators in Healthcare Settings. (<https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html>). All EMTs are advised to read the entire article on that link.

In the event of an epidemic or pandemic of an organism that can be transmitted by airborne spread, the use of N95 respirators is a standard personal protective device recommended for use in all cases of proven or suspected patient infection. In these circumstances, the supply of N95 masks has proven insufficient to meet surge demand. The CDC and NIOSH have provided guidance in the reuse of N95 respirators under these circumstances. Several small adjustments to the CDC/NIOSH recommendations are included below.

Protocol:

1. Consider wearing a standard facemask over the N95 to protect it from droplet and gross contamination.
2. Discard N95 respirators that are contaminated with blood, respiratory or nasal secretions, or other bodily fluids.
3. Discard N95 respirators following use during aerosol-generating procedures such as intubation, suctioning, or nebulizer therapy.
4. Prior to removing a respirator, doff used gloves and put on clean gloves to handle the respirator. Handle only the outside surfaces of the respirator.
5. Store the respirator in a paper bag between uses.
6. Discard the paper bag after each use.
7. Avoid touching the inside of the respirator.
8. Clean hands with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator. (CDC/NIOSH permit, but we prefer the next):
9. Use a pair of clean (non-sterile) gloves when donning a used N95 respirator and performing a user seal check. Discard the gloves after the N95 is donned and any adjustments are made to the respirator.
10. Keep a log of the number of uses for each N95 Respirator.
11. No more than 5 reuses is permitted.
12. Reuse is not permitted between providers: One Provider, One Respirator.