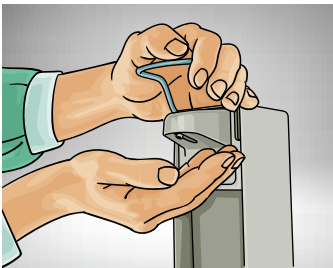


COVID-19: DO'S & DON'TS WHEN USING FACIAL FILTERING RESPIRATORS

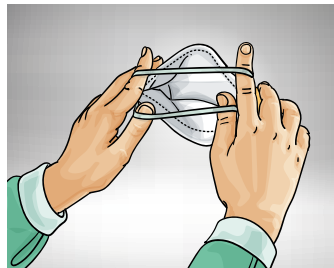
A review of the interim guidance provided by public health authorities such as World Health Organization (WHO)^{1,2} and European Centre for Disease Prevention and Control (ECDC)³ on the do's and don'ts when using Facial Filtering Respirators (FFRs) in healthcare settings during this COVID-19 pandemic indicate similar recommendations apply.

Proper use is key to ensure its effectiveness and protection from the inhalation of droplets and particulates. Please refer to the manufacturer's instructions for the fit-testing. Also, please follow your facility policy and procedures regarding respiratory protection.

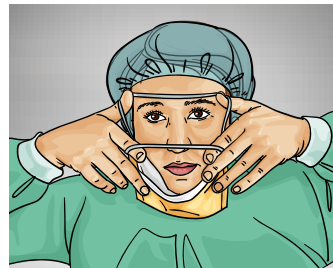
DO'S



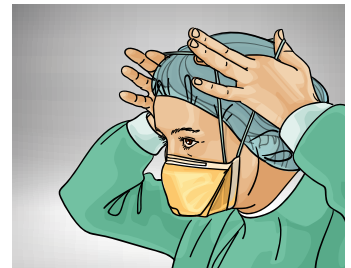
Perform **hand hygiene** before donning.



Use two hands to handle the respirator. Be sure to identify and position the straps correctly based on the type of respirator. Bend nose piece slightly at center to form a gentle curve.



Using two hands, place the respirator on your face with nose piece in proper position and bottom securely under your chin.

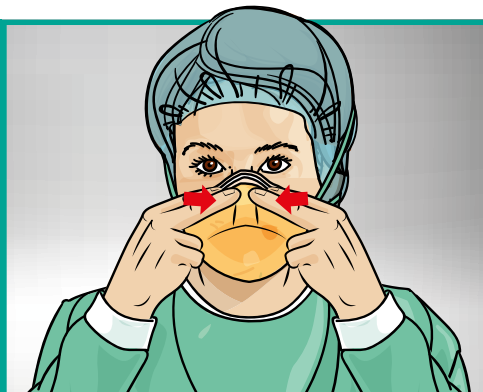


Pull the bottom strap over your head and position below your ears. Next, position the top strap comfortably high on the back of your head.

Place fingers from both hands at the top of the nose piece and mold around the nose and face.

Slide fingers down both sides pushing slightly inward for a snug fit against the nose and face.

Be sure hair, clothing or jewelry do not interfere.

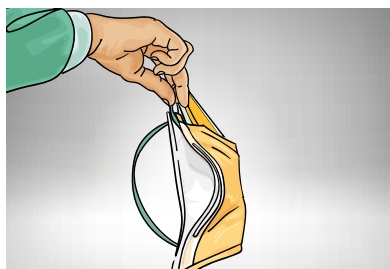


Next, perform the **FIT CHECK**:

- Place fingers from both hands at the top of the nose piece without disturbing the position and exhale sharply to detect any leakage
- If air-leaks around the nose are detected, either reposition or re-don to ensure a tightly sealed fit to prevent contaminated air from leaking in
- If air-leaks are detected around the respirator edges, straps should be repositioned to get a snug fit against the face
- If unable to achieve a secure seal, seek assistance

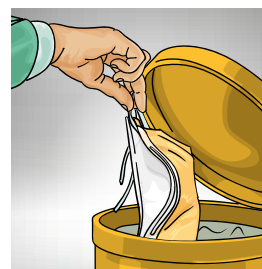


Remove respirator from behind. Pull the bottom strap up and over your head. Next, do the same for the top strap. **Pull the respirator away from your face without touching the front.**

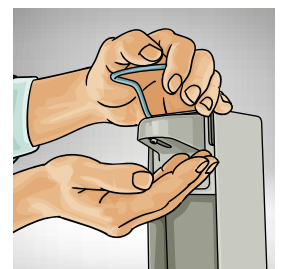


Discard and replace once the respirator becomes:

- Damaged or deformed and no longer provides an effective seal
- Contaminated with respiratory or nasal secretions, blood or other bodily fluids
- Wet or visibly dirty
- Breathing is uncomfortable



Discard the used respirator in a **sealed trash receptacle** in accordance with routine disposal procedures.



Perform **hand hygiene** **immediately** after disposal.

DO'S & DON'TS WHEN USING FACIAL FILTERING RESPIRATORS

DON'TS



Do not don without practicing hand hygiene.



Do not don using just one hand.



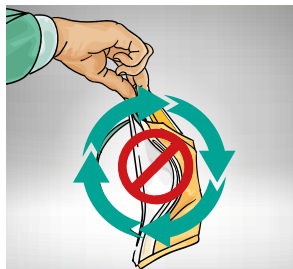
Do not enter a contaminated area if you cannot achieve an air-tight seal. Seek assistance.



Do not touch or reposition the respirator anytime during patient care. If displaced, dispose immediately and re-don.



Do not remove respirator by pulling from the front to prevent contamination.



Do not re-use disposable respirators unless your facility is practicing extended use or re-use due to extenuating circumstances and are based on strict protocols you must adhere to.

Remember

- Always ensure compliance with your local public health authorities regulations surrounding usage and selection guidance of personal protective equipment (PPE) to combat the COVID-19 pandemic.
- Follow recommended mask conservation guidelines to preserve PPE for front line healthcare workers and to ensure appropriate supply based on risk level is available.
- General advice is that a medical mask be worn in the case of a shortage of respirators.
- If there is a shortage of respirators it is recommended that they are prioritized for aerosol-generating procedures.¹

Healthcare authorities specific guidance for healthcare workers on use of facial filtering respirators



World Health
Organization

Use a particulate respirator, at least as protective as a US National Institute for Occupational Safety (NIOSH) health-certified N95, European Union standard FFP2, or equivalent, when performing or working in settings where aerosol-generating procedures, such as tracheal intubation, non-invasive ventilation, tracheotomy, cardiopulmonary resuscitation, manual ventilation before intubation, and bronchoscopy are performed.²



ECDC suggests the use of class 2 or 3 filtering face-piece (FFP) respirators (FFP2 or FFP3) when assessing a suspected case or managing a confirmed case. A FFP3 respirator should be always used when performing aerosol-generating procedures. Face masks (surgical masks) mainly protect from exhaled droplets; their use is recommended in case of shortage of respirators and on a case-by-case assessment. Surgical masks do not require fit testing.³

References: 1. WHO infection prevention and control and preparedness for COVID-19 in healthcare settings Second update, March 2020. 2. WHO Advice on the use of masks in the context of COVID-19: interim guidance, Apr. 2020. 3. ECDC Technical Report: Guidance for wearing and removing personal protective equipment in healthcare settings for the care of patients with suspected or confirmed COVID-19, Feb. 2020.

Disclaimer: Given the novelty of this coronavirus, recommendations from the source references are interim and advisory in nature and is based on current knowledge of the situation.