

TO: Vermont Health Care Providers, EMS Providers, and Long-Term Care Facilities
FROM: Mark Levine, MD, Commissioner of Health

Guidelines on Requesting and Using Personal Protective Equipment (PPE)

BACKGROUND

This guidance regarding requesting and utilizing personal protective equipment (PPE) applies to all Vermont health care providers and facilities, including EMS providers and long-term care facilities.

REQUESTED ACTIONS:

Make note of and use the new form to request PPE.

The Vermont Department of Health has recently migrated its COVID-19 PPE Resource Request Form to a [new location](#).

Providers who will have close contact (less than 6 feet) with anyone with a suspected or confirmed case of COVID-19 should use the following PPE:

- **Facemask**
 - N95 respirators that offer a higher level of protection should be used instead of a facemask when in the presence of a person with a confirmed case of COVID-19 or when performing or present for an aerosol-generating procedure.
- **Eye protection** (e.g., goggles or disposable face shield that fully covers the front and sides of the face) Personal eyeglasses and contact lenses are **not** considered adequate eye protection.
- **A single pair of disposable patient examination gloves.** Change gloves if they become torn or heavily contaminated.
- **Isolation gown**
 - Gowns should be prioritized during care activities where splashes and sprays are anticipated, which typically includes aerosol generating procedures, and during the following high-contact patient care activities that provide opportunities for transfer of pathogens to the hands and clothing of healthcare providers:
 - dressing
 - bathing/showering
 - transferring or lifting a patient
 - changing linens
 - changing briefs or assisting with toileting
 - device care or use
 - wound care or splinting

Follow [CDC recommendations](#) regarding N-95 respirator use, storage and decontamination.

- **Respirator Use**
 - The Centers for Disease Control and Prevention (CDC) recommend re-use of a respirator up to five times unless the manufacturer has more specific reuse recommendations.
 - N95 respirators used during aerosol generating procedures or respirators that have been contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients should be immediately discarded and not reused.
 - If a respirator is removed between uses, it should be hung in a designated storage area or kept in a clean, breathable container such as a paper bag between uses.
- **Respirator Storage and Decontamination**
 - To minimize potential cross-contamination, store respirators so that they do not touch each other and the person using the respirator is clearly identified.
 - Storage containers should be disposed of or cleaned regularly.
 - The outside surfaces of a used N-95 respirator should be considered contaminated. Consider the following steps in the donning process to prevent cross-contamination:
 - Always use clean gloves when inspecting, handling, donning, and performing a user seal check on a reused respirator.
 - Avoid touching the inside of the respirator.
 - Prior to reusing, inspect the integrity of the respirator, checking for obvious signs of damage.
 - Discard gloves after the N95 respirator is donned and any adjustments are made to ensure the respirator is sitting comfortably on your face with a good seal.
 - Clean hands with soap and water or an alcohol-based hand sanitizer after touching or adjusting the respirator.
 - The CDC recommends using a cleanable face shield (preferred) or a surgical mask over an N95 respirator and/or other steps (e.g., masking patients, use of engineering controls), when feasible to reduce surface contamination of the re-used respirator.

Read more about CDC recommendations for [optimizing supplies of N95 respirators](https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirators-strategy/index.html).
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Follow [CDC guidance](#) for the reuse of gowns.

- **Disposable gowns** are not typically amenable to being doffed and re-used because the ties and fasteners typically break during doffing.
- **Cloth isolation gowns** could potentially be untied and retied and could be considered for re-use without laundering in between.

- In a situation where the gown is being used as part of standard precautions to protect a health care provider (HCP) from a splash (e.g., when a patient who screens negative begins vomiting) the risk of re-using a non-visibly soiled cloth isolation gown may be lower.
- For care of patients with suspected or confirmed COVID-19, HCP risk from re-use of cloth isolation gowns without laundering among single HCP caring for multiple patients using one gown or among multiple HCP sharing one gown is unclear. The goal of this strategy is to minimize exposures to HCP and not necessarily prevent transmission between patients.
- Any gown that becomes visibly soiled during patient care should be disposed of and cleaned.

Resources:

- Personal Protective Equipment (PPE) Strategies for Scarce Resource Situations: <https://www.healthvermont.gov/sites/default/files/documents/pdf/PersonalProtectiveEquipment.pdf>
- Summary for Healthcare Facilities: Strategies for Optimizing the Supply of N95 Respirators during the COVID-19 Response: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/checklist-n95-strategy.html>
- For Health Care Professionals: https://www.cdc.gov/coronavirus/2019-ncov/hcp/index.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fhcp%2Fcaring-for-patients.html
- Strategies for Optimizing PPE: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/index.html>

If you have any questions, please contact the HAN Coordinator at 802-859-5900 or vthan@vermont.gov.

HAN Message Type Definitions

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

Info Service Message: Provides general correspondence from VDH, which is not necessarily considered to be of an emergent nature.