DEFINITIONS:

- **Extended** use refers to the practice of wearing the same N95 respirator for repeated healthcare activities with several patients, without removing the respirator between patient healthcare activities.
- Extended use could be implemented when multiple patients are infected with the same respiratory pathogen and patients are placed together in dedicated waiting rooms or hospital wards.
- **Reuse** refers to the practice of using the same N95 respirator for multiple encounters with patients but removing it (‘doffing’) after each encounter. The respirator is stored in between encounters to be put on again (‘donned’) prior to the next encounter with a patient.

IMPLEMENTATION:

The decision to permit extended use or limited reuse of N95 respirators is only under the authority of MOH Command and Control Center (CCC)

RESPIRATOR EXTENDED USE RECOMMENDATIONS:

- Wear the same **N95** respirator for repeated healthcare activities with several patients, without removing the respirator between patient encounters and between the multiple patients in one care area with the same respiratory pathogen.
- Extended use is favored over reuse because it is expected to involve less touching of the respirator and therefore less risk of contact transmission.
- Discard N95 respirators following use during aerosol generating procedures.
- Discard N95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.
- Discard N95 respirators following close contact with, or exit from, the care area of any patient co-infected with an infectious disease requiring contact precautions.
Consider use a disposable face shield over an N95 respirator and/or other steps (e.g., masking patients, use of engineering controls) to reduce surface contamination.

Perform hand hygiene with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator (if necessary, for comfort or to maintain fit).

RESPIRATOR REUSE RECOMMENDATIONS:

- If reuse of N95 respirators is decided, infection control should ensure adherence to administrative and engineering controls to limit potential N95 respirator surface contamination (e.g., use of barriers to prevent droplet spray contamination) and consider additional training and/or reminders (e.g., posters) for staff to reinforce the need to minimize unnecessary contact with the respirator surface, strict adherence to hand hygiene practices, and proper PPE donning and doffing technique, including physical inspection and performing a user seal check.

- Discard N95 respirators following use during aerosol generating procedures.

- Discard N95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.

- Discard N95 respirators following close contact with any patient co-infected with an infectious disease requiring contact precautions.

- Discard any respirator that is obviously damaged or becomes hard to breathe through.

- Use a disposable face shield 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 respirator.

- N95 respirators must only be used by a single wearer, prevent inadvertent sharing of respirators.
▪ Pack or store respirators between uses so that they do not become damaged or deformed.
▪ Label containers used for storing respirators or label the respirator itself between uses with the user's name to reduce accidental usage of another person's respirator.
▪ Hang used respirators in a designated storage area or keep them in a clean, breathable container such as a paper bag between uses.
▪ Storage containers should be disposed of or cleaned regularly.
▪ To minimize potential cross-contamination, store respirators so that they do not touch each other.
▪ Clean hands with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator.
▪ Avoid touching the inside of the respirator. If inadvertent contact is made with the inside of the respirator, perform hand hygiene as described above.
▪ Use a pair of clean (non-sterile) gloves when donning a used N95 respirator and performing a user seal check.
▪ Follow the employer’s maximum number of donning (or up to five if the manufacturer does not provide a recommendation) and recommended inspection procedures.

REFERENCES:
Pandemic Planning, Recommended Guidance for Extended Use and Limited Reuse of N95 Filtering Face piece Respirators in Healthcare Settings, CDC, NIOSH Work Place Safety and Health Topics, https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html