Preserving Respirators & Extending Use

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CDC guidelines for extending respirator supplies for the emerging novel coronavirus include excluding or limiting patient visitors and considering cohorting patients or staff.

“Another strategy is to limit face-to-face encounters with the patient. For example, healthcare personnel may consider bundling care activities to minimize room entry,” said Marie De Perio, MD, an epidemiologist at the CDC’s National Institute of Occupational Safety and Health.

Speaking at a CDC webinar on extending supplies of respiratory equipment, De Perio said use a standard face mask — not an N95 respirator — as source control on a suspected COVID-19 patient. Regarding cohorting, when single patient rooms are not available, patients with confirmed COVID-19 may be placed in the same room, she said.

“Cohorting healthcare personnel means assigning designated teams to provide care for all patients with confirmed or suspected novel coronavirus,” she said. “This is another strategy that may limit the number of healthcare personnel exposed and who need to use N95s, and it also limits the number of personnel who need to be fit-tested.”
CDC GUIDELINES RECOMMEND THAT HEALTHCARE FACILITIES

Use preferential engineering and administrative controls to limit the number of employees who need respiratory protection.

Use alternatives to N95 respirators when possible.

Take measures allowing for extended use or limited reuse of N95 respirators.

Prioritize N95 respirators for employees at the highest risk of acquiring infection or experiencing complications of infection.

“In times of increased demand and decreased supply, consideration can be made to use N95 respirators past their intended shelf life,” the CDC noted.

The equipment may degrade under such conditions. An inspection and seal check should be performed by the user before donning the equipment. The CDC also allows extended use of N95 respirators on cohorted patients.

“Extended use refers to the practice of wearing the same N95 respirator for repeated close contact encounters with several different patients, without removing the respirator between patient encounters,” the CDC stated. “Extended use may be implemented when multiple patients are infected with the same respiratory pathogen and patients are placed together in dedicated waiting rooms or hospital wards.”