

PPE During COVID-19 Pandemic

Applies to:	All Island Health staff and providers
Purpose:	To supplement staff and providers' standard Point of Care Risk Assessment (PCRA) , to inform the appropriate selection of Personal Protective Equipment (PPE) for their care setting and patient/resident/client scenario

The PPE recommendation in this guide is the combined guidance from the BC Centre for Disease Control (BCCDC)/BC Ministry of Health (see: [Personal Protective Equipment](#) and [COVID-19: Emergency Prioritization in a Pandemic Personal Protective Equipment \(PPE\) Allocation Framework](#)), and Island Health's Infection Prevention and Control principles of best practice, developed in collaboration with Professional Practice, Clinical Operations, Occupational Health and Safety, and Medical Affairs.

Appropriate use of PPE by a healthcare provider will mitigate COVID-19 transmission for both healthcare providers and patients, but clinical judgement during the [PCRA](#) may also determine that additional protection is required (for symptoms not related to COVID-19). Step-by-step posters and videos for donning and doffing of PPE are available on the [COVID-19](#) intranet page.

In line with current Ministry [direction](#), all staff must wear a medical-grade mask when in a care facility and anywhere healthcare is provided. This includes the hallways used to move between areas where healthcare is provided, as well as any other shared spaces. The term medical-grade mask is used to define any surgical or procedure mask used in healthcare; it does not include cloth or N95 masks.

In order to ensure sustainable supply, it is always important to preserve our PPE stocks. A mask can be worn between patients, but must not be touched. It should be replaced when visibly dirty, damp or damaged. If you touch your mask to reposition it, clean your hands.

Appropriate eye protection is a visor, face shield or goggles. The medical-grade mask with attached visor is also appropriate for most situations **except when performing an aerosol generating medical procedure**. Eye protection cleaning protocol for reusable eye protection: [Coronavirus COVID-19: Cleaning and Disinfection Instructions for Eye/Facial Protection](#); or [Cleaning and Disinfection Instructions for Eye/Facial Protection in the Absence of Water](#).

Prior to using an N95 mask, please ensure you have undergone [fit testing](#) and do not require renewal.

Note: Recommendations in this resource are updated as new information becomes available. If you choose to print and post the page applicable to your care setting, please check the published version ([PPE Required During COVID-19 Pandemic](#)) frequently for updates.

View the PPE Guidance for the care settings most applicable for your role:

- [All Inpatient Care Areas \(including Mental Health, Pediatric, Adult, Porters and Lab Techs\)](#)
- [Perinatal Services](#)
- [Medical Imaging](#)
- [Primary Care](#)
- [Community Health Services and Assisted Living](#)
- [Long-Term Care](#)
- [Emergency Department](#)
- [Out Patient/Ambulatory Care](#)
- [Mass Vaccination](#)
- [Outreach Settings](#)

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All Inpatient Care Areas (including Mental Health, Pediatric, Adult, Porters* and Lab Techs)								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19	✓	✗	✗	✓ Must be worn	! Based on PCRA	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect reusable eye protection for reuse, each time it is removed.
Confirmed or highly suspected (i.e. awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE , reusable face shield/visor/goggles requires cleaning and disinfecting for reuse . Mask is disposed.
COVID-19 Cohort Unit	✓	✓	✓	✓	✓	✗	✗	May use same mask and eye protection between patients, but must change gown and gloves and perform hand hygiene between patients. When mask requires changing or when leaving care area or unit (e.g., going for break, end of shift), doff and dispose mask. Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
Aerosol Generating Medical Procedures (AGMPs) for confirmed or suspected COVID-19 patients not itemized on next row	✓	✓	✓	✗	✓	✓	✗	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
Performance of specific AGMP for confirmed or suspected COVID-19 patients: intubation and extubation, bronchoscopy, TEE, gastroscopy	✓	✓	✓	✗	✓	✓	✓	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .

Note: PPE above is required by HCP when entering exam room. PPE must be changed if accompanying/transporting symptomatic patient elsewhere in the building.

*refer to [Personal Protective Equipment for Patient Transport](#)

The medical-grade mask with attached visor is also appropriate for most situations **except when performing an aerosol generating medical procedure.**

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Long-Term Care, Assisted Living								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19	✓	✗	✗	✓ Must be worn by unvaccinated staff*	! Based on PCRA	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect reusable eye protection for reuse, each time it is removed.
Admission to LTC from acute care or community (for 14 days from admission)	✓	✗	✓	✓ Must be worn	✓	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect eye protection each time it is removed.
Resident reports/develops respiratory symptoms or fever	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
Confirmed or highly suspected (i.e. awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE , reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
AGMPs* for confirmed or suspected COVID-19 patients not itemized on next row	✓	✓	✓	✗	✓	✓	✗	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
Performance of specific AGMP* for confirmed or suspected COVID-19 patients: intubation and extubation, bronchoscopy, TEE, gastroscopy	✓	✓	✓	✗	✓	✓	✓	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .

* Vaccinated is defined as having had 2 doses of COVID-19 Vaccine plus a duration of 14 days following second dose.

**AGMPs should only be performed if medically necessary. All persons in the room are wearing a fit tested, seal-checked N95 mask and additional PPE as described. If no negative pressure room available, resident must be in a single room with the door closed for the duration of the procedure and associated time to clear the air.

The medical-grade mask with attached visor is also appropriate for most situations **except when performing an aerosol generating medical procedure.**

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Perinatal Services								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19 – antepartum, early labor or postpartum (see below for delivery and C/S)	✓	✗	! Based on PCRA	✓ Must be worn	! Based on PCRA	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect reusable eye protection for reuse, each time it is removed.
No symptoms suggestive of COVID-19 – during delivery	✓	✓	✓ Contact with body fluids*	✓ Must be worn	✓ Must be worn within 2 meters of a patient	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect reusable eye protection for reuse, each time it is removed.
All perinatal patients (ante-, intra- or postpartum patient and/or baby): <ul style="list-style-type: none"> • Reports/develops respiratory symptoms or fever • COVID-19 cohort unit • Confirmed or highly suspected (i.e. awaiting testing) COVID-19 patient 	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE except reusable eye protection, which requires cleaning and disinfecting .

*Reminder - PCRA is performed when there is a likelihood of exposure to infectious agents, in this case through large volumes of body fluids during delivery – those directly involved in the delivery should wear this additional PPE

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Perinatal Services								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
Caesarean Section (C/S) in low or no risk – a patient with no risk factors for COVID-19 and/or no symptoms or signs of COVID-19 and/or a negative COVID-19 test where relevant	✓	✗	! Based on PCRA	✓	! Based on PCRA	✗ #	✗ #	Doff and dispose of all elements of PPE except reusable eye protection, which requires cleaning and disinfecting . # Not required regardless of neuraxial or general anesthesia Follow standard OR practices
C/S is unknown risk – a patient where the risk factors history and symptomology are unknown, and a COVID-19 test result is pending or unknown	✓	✓	✓	✓ **	✓	✓ **	✓	Doff and dispose of all elements of PPE except reusable eye protection, which requires cleaning and disinfecting . **Pediatric Team and other personnel in droplet and contact PPE in room at start of procedure if they are able to leave the room to don an N95 mask (or alternative) if the C/S moves from neuraxial to general anesthesia
C/S is moderate to high risk – a patient where the risk factors, history and symptomology are unknown or suggestive of COVID-19, and/or a COVID-19 test result is pending, unknown or confirmed COVID-19	✓	✓	✓	✓ **	✓	✓ **	✓	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting . **Pediatric Team and other personnel in droplet and contact PPE in room at start of procedure if they are able to leave the room to don an N95 mask (or alternative) if the C/S moves from neuraxial to general anesthesia

[Infection Prevention and Control \(IPAC\) Protocol for Obstetrical Procedures during COVID-19](#)

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Perinatal Services								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
NICU – all infants born from non-COVID mothers	✓	✗	✗	✓ Must be worn	! Based on PCRA	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect reusable eye protection each time it is removed.
NICU –infants born from COVID-19 confirmed or suspected mothers (infant in incubator) No AGMP	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggle requires cleaning and disinfecting for reuse .
NICU – infant from COVID-19 confirmed or suspected mother requiring any AGMP other than intubation/extubation (infant in incubator)	✓	✓	✓	✗	✓	✓	✓	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
NICU – infant from COVID-19 confirmed or suspected mother requiring intubation/extubation (infant in incubator)	✓	✓	✓	✗	✓	✓	✓	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .

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Emergency Department Staff and Physicians								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19	✓	✗	✗	✓ Must be worn	✓ Must be worn until PCRA is complete and eye protection is not indicated	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect reusable eye protection for reuse, each time it is removed.
Patient reports/develops respiratory symptoms or fever, or is confirmed or highly suspected (i.e. awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	✗	✗	Full doffing of all elements, reusable face shield/visor/goggles requires cleaning and disinfecting for reuse . Mask is disposed.
Known or highly suspected (i.e. awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE , reusable face shield/visor/goggles requires cleaning and disinfecting for reuse . Mask is disposed.
COVID-19 Cohort Unit	✓	✓	✓	✓	✓	✗	✗	May use same mask and eye protection between patients, but must change gown and gloves and perform hand hygiene between patients. When mask requires changing or when leaving care area or unit (e.g., going for break, end of shift), doff and dispose mask. Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
AGMPs for confirmed or suspected COVID-19 patients not itemized on next row	✓	✓	✓	✗	✓	✓	✗	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
Performance of specific AGMP for confirmed or suspected COVID-19 patients: intubation and extubation, bronchoscopy, TEE, gastroscopy	✓	✓	✓	✗	✓	✓	✓	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .

Intubation should be performed in a negative pressure room where possible. Use of CARRT teams in hospitals where those teams exist is preferred. The medical-grade mask with attached visor is also appropriate for most situations **except when performing an aerosol generating medical procedure.**

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Medical Imaging Department Staff and Physicians								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19	✓	✗	✗	✓ Must be worn	✓ Must be worn until PCRA is complete and eye protection is not indicated	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect reusable eye protection for reuse, each time it is removed.
Patient reports/develops respiratory symptoms or fever, or is confirmed or highly suspected (i.e. awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE , face shield/visor/goggles requires cleaning and disinfecting for reuse . Mask is disposed.
Known or highly suspected (i.e. awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE , face shield/visor/goggles requires cleaning and disinfecting for reuse . Mask is disposed.
COVID-19 Cohort Unit	✓	✓	✓	✓	✓	✗	✗	May use same mask and eye protection between patients, but must change gown and gloves and perform hand hygiene between patients. When mask requires changing or when leaving care area or unit (e.g. going for break, end of shift), doff and dispose mask. Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
AGMPs for confirmed or suspected COVID-19 patients not itemized on next row	✓	✓	✓	✗	✓	✓	✗	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
Performance of specific AGMP for confirmed or suspected COVID-19 patients: intubation and extubation, bronchoscopy, TEE, gastroscopy	✓	✓	✓	✗	✓	✓	✓	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .

Intubation should be performed in a negative pressure room where possible. Use of CARRT teams in hospitals where those teams exist is preferred.

Please refer to the Society of Interventional Radiology's guidance <https://www.sirweb.org/practice-resources/covid-19-resources/covid-19-clinical-notification-3-26-20/>

The medical-grade mask with attached visor is also appropriate for most situations **except when performing an aerosol generating medical procedure.**

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Out Patient / Ambulatory Care Settings								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19	✓	✗	✗	✓ Must be worn	✓ Must be worn until PCRA is complete and eye protection is not indicated	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect reusable eye protection for reuse, each time it is removed.
Patient reports/develops respiratory symptoms or fever, or is confirmed or highly suspected (i.e., awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE , reusable face shield/visor/goggles requires cleaning and disinfecting for reuse . Mask is disposed.
AGMPs for confirmed or suspected COVID-19 patients not itemized on next row*	✓	✓	✓	✗	✓	✓	✗	Doff dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .
Performance of specific AGMP for confirmed or suspected COVID-19 patients: intubation and extubation, bronchoscopy, TEE, gastroscopy*	✓	✓	✓	✗	✓	✓	✓	Doff and dispose of all elements of PPE . Reusable face shield/visor/goggles requires cleaning and disinfecting for reuse .

* Should be performed in a negative pressure room **where available**, or single room with door closed.

The medical-grade mask with attached visor is also appropriate for most situations **except when performing an aerosol generating medical procedure**.

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Primary Care Settings – including Communicable Disease Clinics and Public Health Youth and Wellness Centres									
Patient Description	Excellent Hand Hygiene (HH)	Patient Performs HH and dons Medical-Grade Mask	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19 Reported by patient or detected by assessment*	✓	✓	✗	✗	✓ Must be worn	✓ Must be worn until PCRA is complete and eye protection is not indicated	✗	✗	If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. Hand hygiene is required when touching or removing mask. Clean and disinfect eye protection for reuse, each time it is removed.
Confirmed or highly suspected (i.e. awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE , face shield/visor/goggles requires cleaning and disinfecting for reuse . Mask is disposed.
AGMPs** (nebulized medications, emergency intubation) for confirmed or suspected COVID-19	✓	Not Applicable	✓	✓	✗	✓	✓	✗	Doff and dispose of all elements of PPE , face shield/visor/goggles requires cleaning and disinfecting for reuse .

* HCP to perform risk assessment prior to initiating care by telephone or from a distance of at least 2 meters. Determine if patient has symptoms compatible with COVID-19: <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/lab-testing>. All patients should be instructed to perform hand hygiene. If patient meets screening criteria for COVID-19, they should be instructed to don a procedural mask, and immediately be directed into an exam room. If no exam room available, maintain spatial separation of at least 2 metres from others.

** AGMPs should only be performed if medically necessary. All persons in the room are wearing a fit-tested, seal-checked N95 respirator, gloves, gown and face or eye protection. If no negative pressure room available, patient must be in a single room with the door closed for duration of procedure and associated time to clear air.

The medical-grade mask with attached visor is also appropriate for most situations **except when performing an aerosol generating medical procedure.**

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Mass Vaccination Clinics in Community Settings

Patient Description	Excellent Hand Hygiene (HH) by staff and clients	Patient Performs HH and wears non-medical-grade mask*	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19 reported by patient or detected by screening/observation	✓	✓	✗	✗	✓ Must be worn	✓ Must be worn until PCRA is complete and eye protection is not indicated	✗	✗	Keep mask and eye protection on in between client interactions, unless PPE is damaged or visibly soiled. If gloves or gown are worn, they should be changed between each client and discarded after use. Clean and disinfect eye protection each time it is removed.
Confirmed or highly suspected (i.e. awaiting testing) COVID-19 client or client who is self isolating**	✓	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE , face shield/visor/goggles requires cleaning and disinfecting for reuse . Mask is disposed.

* Have a separate area for processing people who are unable to wear a mask because of a physical, behavioural or cognitive impairment or health condition

**Direct individuals with symptoms to visit their nearest testing centre or call 8-1-1.

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Community Health Services (including those visiting AL), Public Health Services Home Visits								
Patient Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Face Shield, Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19 reported by client or family member or detected by assessment	✓	✗ PPE should be determined by a PCRA –an apron or gown and gloves would be used for any risk of exposure to blood and/or bodily fluids Note: when wearing an apron it is important to be 'bare below the elbows'		✓ Must be worn	✓ Must be worn until PCRA is complete and eye protection is not indicated	✗	✗	Replace mask when visibly dirty, damp or damaged. Clean and disinfect reusable eye protection for reuse, each time it is removed. Reusable eye protection is dedicated to the Community Health Provider.
Client or household member: • Is self-isolating for a 14 day period following arrival in Canada or known exposure • Develops symptoms suggestive of COVID-19 • Confirmed COVID-19	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE . Reusable eye protection requires cleaning and disinfecting for reuse .
AGMPs (e.g. CPAP, open airway suctioning, nebulization) for any client with confirmed or highly suspect COVID-19	✓	✓	✓	✗	✓	✓	✗	Follow donning and doffing procedure for AGMP. Clean, disinfect and store reusable eye protection each time it is removed. Reusable eye protection is dedicated to the Community Health Provider.
AGMPs for asymptomatic clients not suspected for COVID-19	✓	✗	! PCRA	✓	✓	✗	✗	Doff and dispose of all elements of PPE . Reusable eye protection require cleaning and disinfecting for reuse .

*AGMPs for those clients positive or suspected of COVID-19 should only be performed when medically necessary. All persons in the room are wearing a fit-tested, seal-checked N95 respirator, gloves, gown and face or eye protection.

Note for CHS: Advise families of extra cleaning. Ensure the room is well ventilated, allowing time for droplet settling after therapy is complete.

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Outreach Settings *								
Client Description	Excellent Hand Hygiene	Isolation Gown	Gloves	Medical-Grade Mask	Goggles, Face Shield or Visor	N95 Mask	Head and Neck Cover	Doffing
No symptoms suggestive of COVID-19 reported by client or family member/friend/partner or detected by assessment	✓	✗ PPE should be determined by a PCRA – gown and gloves would be used for any risk of exposure to blood and/or bodily fluids		✓ Must be worn	✓ Must be worn until PCRA is complete and eye protection is not indicated	✗	✗	Replace mask when visibly dirty, damp or damaged. Clean and disinfect reusable eye protection for reuse, each time it is removed. Reusable eye protection is dedicated to the Healthcare Provider.
Client or person(s) they live with: • Is self-isolating for a 14 day period following arrival in Canada or known exposure • Develops symptoms suggestive of COVID-19 • Confirmed COVID-19	✓	✓	✓	✓	✓	✗	✗	Doff and dispose of all elements of PPE . Reusable eye protection requires cleaning and disinfecting for reuse .
AGMPs* (e.g. CPR-airway management, bag-valve mask ventilation, epistaxis-large bleed) for any client with confirmed or highly suspect COVID-19	✓	✓	✓	✗	✓	✓	✗	Follow donning and doffing procedure for AGMP. Clean, disinfect and store reusable eye protection each time it is removed. Reusable eye protection is dedicated to the Healthcare Provider.
AGMPs for asymptomatic clients not suspected for COVID-19	✓	✗	! PCRA	✓	✓	✗	✗	Doff and dispose of all elements of PPE . Reusable eye protection require cleaning and disinfecting for reuse .

*outreach settings include those served by Public Health and Mental Health and Substance Use/Underserved