

PREPARATION FOR PPE DONNING

_____ **1. Engage PPE Observer** – observer guides and supervises donning PPE and confirms visually that all PPE is serviceable and has been donned successfully. No exposed skin or hair of the healthcare worker should be visible at the end of the donning process.

_____ **2. Remove Personal Clothing and Items –**

- a. Don provided scrub suit.
- b. Put on dedicated washable (plastic or rubber) footwear.
- c. Put hair in a ponytail, pigtail, or braid as needed to keep hair out of face.
- d. Use the restroom facilities.
- e. Remove all jewelry, nametags, beepers, cellphones, watches, pens.

_____ **3. Review pre-doffing health check.** If issue identified, do not don PPE, refer to OHC and Supervisor.

_____ **4. Inspect PPE Prior to Donning -** Visually inspect the PPE ensemble to be worn to ensure that it is in serviceable condition, that all required PPE and supplies are available, and that the sizes selected are correct for the healthcare worker. The trained observer reviews the donning sequence with the healthcare worker before the healthcare worker begins the donning process and reads it to the healthcare worker in a step-by-step fashion.

_____ **5. Inspect and assemble PAPR**

- a. PAPR components include:
 1. Power pack with charged battery and Hepa filter
 2. Belt
 3. Air hose
 4. Tyvek hood
- b. Connect the air hose to the power pack.
- c. Check the air flow of the respirator
 1. Hold the free end of the air hose up by grasping the slotted connector and covering the slots of the connector with thumb and forefinger.
 2. Drop the black bullet-shaped airflow indicator, pointed end first, into the slotted connector.
 3. Switch the PAPR unit on. Hold the tube so that it is vertical and eye level. The indicator should “float” on the air coming out and the lower band on the indicator should be above the connector’s rim.
 4. If the lower band on the indicator rises above the slotted connector edge, the airflow is sufficient. If the indicator fails to rise to this level, airflow is insufficient. If the air flow is insufficient, **DO NOT** use the unit. Place it aside for evaluation.
- d. Connect the air hose to the hood.

SEQUENCE FOR DONNING (PUTTING ON) PERSONAL PROTECTIVE EQUIPMENT (PPE) using **PAPR** for extended patient treatment phase

- _____ **1. Perform Hand Hygiene** - Perform hand hygiene with Alcohol-Based Hand Rub (ABHR). When using ABHR, allow hands to dry before moving to next step
- _____ **2. Put on Inner Gloves** - Put on first pair of gloves, extending gloves above wrist
- _____ **3. Put on Boot/Shoe Covers** - Pull on boots and cover leg up to mid-calf or higher
- _____ **4. Put on Gown** - Put on gown. Ensure gown is large enough to allow unrestricted freedom of movement. Ensure cuffs of inner gloves are tucked under the sleeve of the gown. Fasten the gown at the neck and waist. Tape the back opening at the bottom to prevent gown from accidentally opening. Place a sticker/tape name tag on the front and back upper right section of the gown (Jane Doe, MD)
- _____ **5. Put on Outer Gloves** - Put on second pair of gloves (with extended cuffs). Ensure the gloves are pulled over the cuffs of the gown. Tape in place, making sure to tab the end of the tape to ease removal.
- _____ **6. Put on PAPR & hood** -
 - _____ a. Verify that PAPR is running/on.
 - _____ b. Put on PAPR (external belt mounted blower unit with attached reusable headpiece is used)
 - _____ c. Put on disposable hood extending past the shoulders, fully covering the neck, hair and ears
- _____ **7. Put on Outer Apron** - Put on full-body apron to provide additional protection to the front of the body against exposure to body fluids or excrement from the patient. The lower portions of the PAPR shroud and disposable hood are placed inside the apron. The power pack of the PAPR is on the lower back of the user, outside the apron.
- _____ **8. Verify** – After completing the donning process, the integrity of the ensemble is verified by the trained observer. The healthcare worker should be comfortable and able to extend the arms, bend at the waist, and go through a range of motions to ensure there is sufficient range of movement while all areas of the body remain covered. A mirror in the room can be useful for the healthcare worker while donning PPE.
- _____ **9. Disinfect Outer Gloves** - Disinfect outer-gloved hands with ABHR. Allow to dry prior to patient contact.
 - Remember to keep your hands away from your face.
 - No skin should be exposed
 - Limit surfaces touched
 - Be slow and very deliberate.
 - Frequently disinfect hands with ABHR
 - Disinfect any contaminated PPE with disinfectant wipe
 - Carefully follow directions.

SEQUENCE FOR DOFFING (REMOVING) PERSONAL PROTECTIVE EQUIPMENT (PPE) using PAPR for extended patient treatment phase

Prepare for Doffing - The purpose of this step is to prepare for the removal of PPE. Before entering the PPE removal area, inspect and disinfect (using an *EPA-registered disinfectant wipe) any visible contamination on the PPE. As a final step, disinfect outer-gloved hands with either an *EPA-registered disinfectant wipe or ABHR, and allow to dry. Verify that the trained observer is available in the PPE removal area before entering and beginning the PPE removal process.

LEAVE PATIENT ROOM and ENTER DOFFING AREA.
Discard All Disposable PPE into a Bio-Hazardous Waste Receptacle.

_____ **1. Engage Trained Observer** - The doffing process is conducted under the supervision of a trained observer, who reads aloud each step of the procedure and confirms visually that the PPE is removed properly. The PPE observer is garbed in full protective gear with the exception of a surgical mask in place of a PAPR. Prior to doffing PPE, the PPE observer must remind the healthcare worker to avoid reflexive actions that may put them at risk, such as touching their face. Post this instruction and repeat it verbally during doffing. Although the PPE observer should minimize touching the healthcare worker or the healthcare worker's PPE during the doffing process, the PPE observer may assist with removal of specific components of PPE, as outlined below. The PPE observer will disinfect the outer-gloved hands immediately after handling any healthcare worker PPE.

_____ **2. Inspect the PPE for visible contamination** - Inspect the PPE to assess for visible contamination, cuts, or tears before starting to remove. If any PPE is potentially contaminated, then disinfect using an *EPA-registered disinfectant wipe.

_____ **3. Disinfect Outer Gloves** - Disinfect outer-gloved hands with either an *EPA-registered disinfectant wipe or ABHR, and allow to dry.

_____ **4. Remove Apron** - PPE observer will assist in untying waist ties and will stretch and break the neck strap. Remove and discard apron taking care to avoid contaminating gloves by turning apron inside out and rolling it into a bundle..

_____ **5. Inspect** - Following apron removal, inspect the PPE ensemble to assess for visible contamination or cuts or tears. If visibly contaminated, then disinfect affected PPE using an *EPA-registered disinfectant wipe.

_____ **6. Disinfect Outer Gloves** - Disinfect outer-gloved hands with either an *EPA-registered disinfectant wipe or ABHR

_____ **7. Remove Boot/Shoe Covers** – Sit down. Do not cross your legs. Remove and discard boot/shoe covers. The PPE observer may need to assist in boot removal after which the PPE observer will disinfect their outer-gloved hands immediately after handling the boot/shoe covers.

_____ **8. Disinfect and Remove Outer Gloves** - Disinfect outer-gloved hands with either an *EPA-registered disinfectant wipe or ABHR. Remove tape. Grasp outside of glove with opposite gloved hand; peel half off. Use partially removed gloved to then carefully remove opposite glove over first glove. Discard outer gloves, taking care not to contaminate inner gloves during removal process.

_____ **9. Inspect and Disinfect Inner Gloves** - Inspect the inner gloves' outer surfaces for visible contamination, cuts, or tears. If an inner glove is visibly soiled, cut, or torn, then disinfect the glove with either an *EPA-registered disinfectant wipe or ABHR. Then remove the inner gloves, perform hand hygiene with ABHR on bare hands, and don a clean pair of gloves. If no visible contamination, cuts, or tears are identified on the inner gloves, then disinfect the inner-gloved hands with either an *EPA-registered disinfectant wipe or ABHR.

SEQUENCE FOR DOFFING (REMOVING) PERSONAL PROTECTIVE EQUIPMENT (PPE) using PAPR for extended patient treatment phase

10. Remove PAPR

- a. Remove and discard disposable hood
- b. Wipe face shield of PAPR hood with EPA registered disinfectant wipe
- c. Disinfect inner gloves with ABHR or an *EPA-registered disinfectant wipe
- d. Remove headpiece, tubing, and the belt and battery unit. This step will require assistance from the trained PPE observer.
- e. Disinfect inner gloves with either an *EPA-registered disinfectant wipe or ABHR.
- f. Place all reusable PAPR components in an area or container designated for the collection of PAPR components for disinfection.

11. **Remove Gown** – The PPE observer will remove any tape from back of gown and assist with untying fasteners. Pull away from neck and shoulders, touching shoulders of gown only. Turn gown inside out, continuing to roll it into a bundle. Avoid contact of scrubs with outer surface of gown during removal. Discard in biohazardous waste receptacle.

12. **Disinfect Inner Gloves** - Disinfect inner gloves with either an *EPA-registered disinfectant wipe or ABHR

13. **Disinfect Washable Shoes** - Sitting on a new clean surface (e.g., second clean chair, clean side of a bench) use an *EPA-registered disinfectant wipe to wipe down every external surface of the washable shoes.

14. **Disinfect and Remove Inner Gloves** - Disinfect inner-gloved hands with either an *EPA-registered disinfectant wipe or ABHR. Remove and discard gloves taking care not to contaminate bare hands during removal process.

15. **Perform Hand Hygiene** - Perform hand hygiene with ABHR

16. **Inspect** - Perform a final inspection of healthcare worker for any indication of contamination of the surgical scrubs or disposable garments. If contamination is identified, follow the breach exposure protocol.

17. **Protocol Evaluation/Medical Assessment** - The PPE Observer should review post-doffing exposure/fatigue checklist. Any potential exposure is referred to OHC; any trigger level of fatigue is reported to Supervisor

18. **Leave doffing area wearing scrubs and washable shoes** - Healthcare worker can leave PPE removal area wearing dedicated washable footwear and scrubs

19. **Shower** - Showers are recommended at each shift's end for healthcare workers performing high-risk patient care (e.g., exposed to large quantities of blood, body fluids, or excreta). Showers are also suggested for healthcare workers spending extended periods of time in the Ebola patient room.