

COVID-19: Personal Protective Equipment (PPE) Recommendations at a Glance Last Reviewed August 2023

What setting?	Who for?	What activity?	What PPE?	Comments
All NSH Facilities -Universal Masking				
All Patient & Resident Care Areas	All NSH staff & physicians	All activities during your shift	PPE is outlined in Nova Scotia Health Respiratory Virus Safety Plan	<ul style="list-style-type: none"> ✓ Masks are required during patient interactions occurring in acute care inpatient units, emergency departments and designated ambulatory clinics that provide care to immunocompromised/ high-risk patient populations.. ✓ Masks should be replaced when visibly soiled, damp, damaged or hard to breathe through; it does not need to be changed between patients/residents. ✓ Make sure the mask covers your nose & mouth; never let it dangle below your face or sit on your forehead (or anywhere else); do not touch the front of your mask; but if you do, remember to do hand hygiene immediately afterwards. ✓ Refer to NSH posters for Putting On and Removing PPE for Droplet & Contact Precautions
Acute Care- Inpatient, Dialysis & Emergency Department (Routine practices for all patients at all times and in every health care setting as the baseline)				
COVID-19 Testing Centres, EDs & any inpatient unit where there are patients suspected or confirmed of having COVID-19 infection	Direct patient care providers	Face-to-face care to suspected or confirmed COVID-19 patient	Droplet & Contact Precautions: <ul style="list-style-type: none"> • Surgical/procedure mask • Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) • Gloves • Face/Eye protection 	If your eye protection is a face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the patient care activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one. For COVID-19 testing centres , extended use of the same gown, mask, face shield/goggles is recommended and shall be used with multiple patients during a single shift. Change gown/mask/face protection if they become wet, damaged or soiled. Gloves are changed between patients. A CSA Level 1 gown is suitable where minimal amounts of spray or droplet are anticipated. A CSA level 2 gown is used for situations where low amounts of fluids or low risks of sprays are anticipated. A plastic apron should be used if the point of care risk assessment (PCRA) suggests there will be exposure to high volume body fluids.
		Aerosol-generating medical procedure performed on suspected or confirmed COVID-19 patient	Airborne, Droplet, & Contact Precautions: <ul style="list-style-type: none"> • N95 respirator (fit-tested, seal-checked) • Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) • Gloves • Face/Eye protection 	See above comments for Droplet & Contact Precautions
	Trauma/Airway Team	Face-to-face care to suspected or confirmed COVID-19 patient when exposure to high volume of body fluids/sprays is expected or need for aerosol-generating medical procedure anticipated.	Airborne, Droplet, & Contact Precautions: <ul style="list-style-type: none"> • N95 respirator (fit-tested, seal-checked) • *Long- sleeved gown (fluid resistant, CSA Level 2 or 3 or equivalent or fluid impermeable, CSA Level 4 or equivalent) • *Gloves (double gloving) • Face/Eye protection • *Hood/Cap • *Booties 	*CSA Level 3 (fluid resistant) or CSA Level 4 (fluid impermeable) gown, hood/ cap, and booties are used for situations where large volumes/ sprays of blood/ body fluid are anticipated based on the PCRA, as per Routine Practices. If lower volumes of sprays and fluid are anticipated, CSA Level 2 gown would be sufficient, and hood/cap and booties not likely required. Double gloving may be used if glove damage is anticipated in the course of patient care.

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	Environmental Services Workers	Entering the room of suspected or confirmed COVID-19 patient for cleaning or maintenance activities.	Droplet & Contact Precautions: <ul style="list-style-type: none"> Surgical/procedure mask Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) Gloves Face/Eye protection 	If your eye protection is a face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one. Face/eye protection is not required if the room is vacant, unless splash or spray of cleaning fluids or chemicals is anticipated.
Screening or triage	Direct care providers	Screening or triage activities with suspected or confirmed COVID-19 patients	If able to maintain a spatial distance of at least 2m or separation by physical barrier. <ul style="list-style-type: none"> Procedure/surgical mask as per universal masking Otherwise, Droplet & Contact Precautions: <ul style="list-style-type: none"> Surgical/procedure mask Long- sleeved gown (fluid resistant, CSA Level 1 or equivalent) Gloves Face/Eye protection 	If your eye protection is a face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the patient care activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one.
	Suspected or confirmed patients with COVID-19	On transport, in waiting areas, during triage	Surgical/procedure mask if tolerated	Ask the patient to perform hand and respiratory hygiene
Administrative areas	All staff & physicians	Activities that do not involve face-to-face contact with patients	PPE is outlined in Nova Scotia Health Respiratory Virus Safety Plan	Hand hygiene upon entry to facility and before/after contact with other staff & physicians, and the physical environment
Ambulatory and Outpatient Facilities (Routine practices for all patients at all times and in every health care setting as the baseline)				
Consultation/Clinic room or area	Direct care providers	Face-to-face care/physical examination of patients with suspected or confirmed COVID-19	Droplet & Contact Precautions: <ul style="list-style-type: none"> Surgical/procedure mask Long- sleeved gown (fluid resistant, CSA Level 1 or equivalent) Gloves Face/Eye protection 	If your eye protection is a face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the patient care activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one.
	Suspected or confirmed COVID-19 patient	All activities	Surgical/procedure mask if tolerated	Ask the patient to perform hand and respiratory hygiene
	Environmental services workers	Entering the room of suspected or confirmed COVID-19 patient for cleaning or maintenance activities.	Droplet & Contact Precautions: <ul style="list-style-type: none"> Surgical/procedure mask Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) Gloves Face/Eye protection 	If your eye protection is a face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one. Face/eye protection is not required if the room is vacant, unless splash or spray of cleaning fluids or chemicals is anticipated.
Waiting room	Suspected or confirmed COVID-19 patient	All activities	Surgical/procedure mask if tolerated	Immediately move the patient to a single room or separate area away from others if possible If not feasible, ensure spatial distance of at least 2 m from other patients
Administrative areas	All staff & physicians	Activities that do not involve face-to-face contact with patients	PPE is outlined in Nova Scotia Health Respiratory Virus Safety Plan	Hand hygiene upon entry to facility and before/after contact with other staff & patients, and the physical environment

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Triage/Reception	Direct care providers	Screening or triage activities with suspected or confirmed COVID-19 patients	<p>If able to maintain a spatial distance of at least 2m or separation by physical barrier:</p> <ul style="list-style-type: none"> PPE is outlined in Nova Scotia Health Respiratory Virus Safety Plan <p>Otherwise, Droplet & Contact Precautions:</p> <ul style="list-style-type: none"> Surgical/procedure mask Long- sleeved gown (fluid resistant, CSA Level 1 or equivalent) Gloves Face/Eye protection 	If your eye protection is a face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the patient care activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one.
	Suspected or confirmed COVID-19 patient	All activities	<p>Maintain spatial distance of at least 2m or separation by physical barrier</p> <p>Surgical/procedure mask if tolerated</p>	Ask the patient to perform hand and respiratory hygiene
Home Care & Long Term Care Setting (Routine practices for all patients at all times and in every health care setting as the baseline)				
Home care	Direct care provider	Face-to-face care to suspected or confirmed COVID-19 patient	<p>Droplet & Contact Precautions:</p> <ul style="list-style-type: none"> Surgical/procedure mask Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) Gloves Face/Eye protection 	<p>If your eye protection is a face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one.</p> <p>A CSA Level 1 gown is suitable where minimal amounts of spray or droplet are anticipated. A CSA level 2 gown is used for situations where low amounts of fluids or low risks of sprays are anticipated. A plastic apron should be used if the point of care risk assessment (PCRA) suggests there will be exposure to high volume body fluids.</p>
		Providing an aerosol generating medical procedure to a suspected or confirmed COVID-19 patient	<p>Airborne, Droplet, & Contact Precautions:</p> <ul style="list-style-type: none"> N95 respirator (fit-tested, seal-checked) Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) Gloves Face/Eye protection 	See above comments for Droplet & Contact Precautions
Long-term Care Facility	Direct care provider	Face-to-face care to suspected or confirmed COVID-19 resident	<p>Droplet & Contact Precautions:</p> <ul style="list-style-type: none"> Surgical/procedure mask Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) Gloves Face/Eye protection 	<p>If your eye protection is a full-face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one.</p> <p>A CSA Level 1 gown is suitable where minimal amounts of spray or droplet are anticipated. A CSA level 2 gown is used for situations where low amounts of fluids or low risks of sprays are anticipated. A plastic apron should be used if the point of care risk assessment (PCRA) suggests there will be exposure to high volume body fluids.</p>
		Providing an aerosol generating medical procedure to a suspected or confirmed COVID-19 resident	<p>Airborne, Droplet, & Contact Precautions:</p> <ul style="list-style-type: none"> N95 respirator (fit-tested, seal-checked) Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) Gloves Face/Eye protection 	See above comments for Droplet & Contact Precautions

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	Environmental services workers	Entering the room of suspected or confirmed COVID-19 residents for cleaning or maintenance activities.	Droplet & Contact Precautions: <ul style="list-style-type: none"> • Surgical/procedure mask • Long- sleeved gown (fluid resistant, usually CSA Level 1 or equivalent) • Gloves • Face/Eye protection 	If your eye protection is a face shield, you can continue to wear the mask provided for your shift as long as it is not contaminated, soiled, or damaged during the activity. The shield should protect it. If the mask does get contaminated, soiled, or damaged, get a new one. Face/eye protection is not required if the room is vacant, unless splash or spray of cleaning fluids or chemicals is anticipated
	Administrative personnel	Activities that do not involve face-to-face contact with residents	PPE is outlined in Nova Scotia Health Respiratory Virus Safety Plan	Hand hygiene upon entry to facility and before/after contact with residents and the physical environment
	Designated Caregivers & Visitors	Entering the room of a suspect or confirmed COVID-19 resident	Droplet & Contact Precautions: <ul style="list-style-type: none"> • Surgical/procedure mask • Long- sleeved gown (fluid resistant, CSA Level 1 or equivalent) • Gloves • Face/Eye protection 	Maintain physical distancing at all times when moving to and from the resident's room Perform hand hygiene upon entering to and exiting from the facility, and before putting on and after removing PPE Instruct visitor on proper use of PPE
		All resident care areas outside of residents' rooms	PPE is outlined in Nova Scotia Health Respiratory Virus Safety Plan	Hand hygiene upon entry to facility and before/after contact with residents and the physical environment.