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| Coronavirus (COVID-19) – A guide to the conventional use of PPE |
| Updated 27 August 2020 |

#### In the changing coronavirus (COVID-19) environment, content is often being updated. To ensure you are aware of the most recent changes, all content updates and the date the document was last updated will be highlighted in yellow.

# Conventional use of PPE

The following guide outlines the appropriate use of personal protective equipment (PPE) for the Victorian health sector during the Coronavirus 2019 (COVID-19) pandemic response. Standardising the use of PPE will ensure that health care workers are protected from infection whilst ensuring PPE is not inappropriately used during a time where worldwide demand for PPE is impacting supply chains. Whilst this advice is for the health care sector, it can be used to inform any local policy.

Table 1 outlines the recommended PPE for health care workers who are in direct contact with a person who is: assessed as low or no risk for coronavirus (COVID-19); or is confirmed or suspected of having coronavirus (COVID-19) or is in quarantine.

Table 2 provides further guidance to assist in clarifying the required PPE for common circumstances.

Please note that other infectious diseases requiring PPE as part of transmission-based precautions are not addressed in this document.

This guidance will be regularly reviewed and updated as required.

## Associated documents

This document should be read in conjunction with the following documents:

* [Coronavirus 2019 (COVID-19) – PPE and levels of protection](https://www.dhhs.vic.gov.au/coronavirus-covid-19-ppe-and-levels-protection)
* [COVID-19 Infection Prevention and Control Guideline](https://www.dhhs.vic.gov.au/covid19-infection-control-guidelines)

Table 1: Conventional use

*Due to the current high prevalence of COVID-19 in Victoria and advice regarding the universal use of masks in the community, Tier 0 is currently not applicable*

| TIER | For use in | Graphic of hands being washed | Graphic of a pair of gloves | **Graphic of apron**Graphic of a long-sleeved gown | Graphic of a long-sleeved gown | Graphic of a surgical mask | Graphic of a P2/N95 respirator | Graphic of a pair of goggles Graphic of face shield |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Hand hygiene | Disposable gloves | Level 1 gown and plastic apron | Disposable gown  | Surgical mask | P2 / N95 respirator[[1]](#footnote-2)  | Eye protection |
| **Tier 0\* –Standard precautions[[2]](#footnote-3)** | For people assessed as low risk or no risk for COVID-19, that is, they do not meet the clinical criteria for COVID-19. | Tick - yes | As per standard precautions | As per standard precautions | As per standard precautions | As per standard precautions | Cross - no | As per standard precautions |
| **Tier 1 –Area of higher clinical risk** | In areas where the person is NOT suspected[[3]](#footnote-4) or confirmed to have COVID-19 | Tick - yes | As per standard precautions | As per standard precautions | As per standard precautions | Tick - yesMinimum Level 1 | Cross - no | Tick - yesFace shield where practical |
| **Tier 2 –Droplet and contact precautions** | Limited contact, for short episodes of care, in a controlled environment with a person who is suspected3 or confirmed to have COVID-19. | Tick - yes | Tick - yes | Tick - yes | Tick - yesorLevel 2, 3 or 4 | Tick - yesLevel 2 or 3 | Cross - no | Tick - yesFace shield where practical |
| **Tier 3 –Airborne and contact precautions and Aerosol Generating Procedures** | 1. Undertaking an AGP[[4]](#footnote-5) on a person with suspected3 or confirmed COVID-19
2. Settings where suspected3 or confirmed COVID-19 patients are cohorted, where frequent, prolonged episodes of care are provided
3. In uncontrolled settings where suspected3 or confirmed COVID-19 patients are cohorted, to avoid the need for frequent changes of N95/P2 respirators
4. Settings where suspected3 or confirmed COVID-19 patients are cohorted and there is risk of unplanned AGPs and/or aerosol generating behaviours[[5]](#footnote-6).
 | Tick - yes | Tick - yes | Cross - no | Tick - yesorLevel 2, 3 or 4 | Cross - no | Tick - yes | Tick - yesFace shield where practical |

Table 2: Conventional use – contextual guide

*Due to the current high prevalence of COVID-19 in Victoria and advice regarding the universal use of masks in the community, Tier 0 is currently not applicable*

| TIER | For use in | Further context – examples |
| --- | --- | --- |
| **Tier 0\* –Standard precautions** | For patients assessed as low or no risk for COVID-19, that is, they do not meet the clinical criteria for COVID-19.  | * HCWs may require gloves, surgical face mask, gown/apron or eye protection where there is a risk of exposure to or splashes from blood or body fluids.
* HCWs performing an AGP on a person identified as low or no risk of COVID-19 may choose to wear a surgical face mask, gown/apron and eye protection as part of standard precautions.
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| **Tier 1 –Area of higher clinical risk** | In areas where the person is NOT suspected3 or confirmed to have COVID-19 | * HCWs not involved in the direct care of COVID-19 patients
* Undertaking surgery or AGPs on patients confirmed as COVID-19 negative or who are screened as low risk
* Patients with aerosol generating behaviours who are not confirmed or suspected of COVID-19
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| **Tier 2 –Droplet and contact precautions** | Limited contact, for short episodes of care, in a controlled environment with a person who is suspected3 or confirmed to have COVID-19. | * Patient transfer within a facility of a confirmed or suspected COVID-19 cases
* Cleaning and disinfection of room where there has been no AGP performed or if 30 mins has elapsed since the AGP
* HCWs at ambulance arrival and handover areas where the patient is confirmed or suspected of having COVID-19
* Handling deceased persons with confirmed/ suspected COVID-19
* Family members and visitors to a person with COVID-19 at a hospital
* HCWs transporting suspected COVID-19 patients in ambulance
* Working at a COVID-19 testing site and/or undertaking testing for COVID-19
* Undertaking procedures (e.g. sample collection) at hotel quarantine sites
* Disability and community workers attending care in a patient home environment
* Staff working in high-risk settings such as prisons
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| **Tier 3 –Airborne and contact precautions and Aerosol Generating Procedures** | 1. Undertaking an AGP[[6]](#footnote-7) on a person with suspected3 or confirmed COVID-19
2. Settings where suspected3 or confirmed COVID-19 patients are cohorted, where frequent, prolonged episodes of care are provided
3. In uncontrolled settings where suspected3 or confirmed COVID-19 patients are cohorted, to avoid the need for frequent changes of N95/P2 respirators
4. Settings where suspected3 or confirmed COVID-19 patients are cohorted and there is risk of unplanned AGPs and/or aerosol generating behaviours[[7]](#footnote-8).
 | * HCWs in dedicated COVID-19 wards (even if treating suspected covid-19 patients)
* HCWs in areas within Emergency Departments or Urgent Care Centres where suspected or confirmed COVID-19 patients are being treated
* HCWs within an open intensive care unit (if suspected or confirmed COVID-19 patients are present)
* HCWs within an intensive care unit pod/room (if suspected or confirmed COVID-19 patients are present)
* HCWs working in designated zones/rooms within Aged Care services (if there is a suspected and or confirmed COVID-19 resident within the zone/room).
* HCWs providing prolonged disability support (if there is a suspected and or confirmed COVID-19 patient within the service
* Cleaning and disinfection of a room where there has been an AGP performed within the previous 30 mins
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## References

* Coronavirus disease 2019 (COVID-19), Case and contact management guidelines for health services and general practitioners (DHHS), https://www.dhhs.vic.gov.au/coronavirus-case-and-contact-management-guidelines-health-services-and-general-practitioners
* Coronavirus disease 2019 (COVID-19) Healthcare worker PPE guidance (DHHS), <https://www.dhhs.vic.gov.au/personal-protective-equipment-ppe-covid-19>

**To find out more information about coronavirus and how to stay safe visit**[DHHS.vic – coronavirus disease (COVID-19)](http://www.dhhs.vic.gov.au/coronavirus)  **<https://www.dhhs.vic.gov.au/coronavirus>**

**If you need an interpreter, call TIS National on 131 450**

**For information in other languages, scan the QR code or visit**[DHHS.vic –Translated resources - coronavirus (COVID-19)](https://www.dhhs.vic.gov.au/translated-resources-coronavirus-disease-covid-19) **<https://www.dhhs.vic.gov.au/translated-resources-coronavirus-disease-covid-19>**

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**For any questions
Coronavirus hotline 1800 675 398 (24 hours)
Please keep Triple Zero (000) for emergencies only**

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Available at: [DHHS.vic – coronavirus disease (COVID-19)](https://www.dhhs.vic.gov.au/coronavirus) <https://www.dhhs.vic.gov.au/coronavirus>

1. Fit-check P2/N95 respirators with each use. Respirators with exhalation valves are not recommended for use. For information on P2/N95 respirators go to https://www.dhhs.vic.gov.au/coronavirus-covid-19-infection-control-guidelines-version-2-21-june-2020 [↑](#footnote-ref-2)
2. For information on standard precautions and hand hygiene, see <https://www2.health.vic.gov.au/public-health/infectious-diseases/infection-control-guidelines/standard-additional-precautions> [↑](#footnote-ref-3)
3. Suspected includes person in quarantine or where a history cannot be obtained. [↑](#footnote-ref-4)
4. AGPs = aerosol-generating procedures. Examples include: bronchoscopy, tracheal intubation, non-invasive ventilation (e.g. BiPAP, CPAP), high flow nasal oxygen therapy, manual ventilation before intubation, intubation, cardiopulmonary resuscitation, suctioning, sputum induction, nebuliser use (nebulisers should be discouraged and alternatives considered such as a spacer). See the  [COVID-19 Infection prevention and control guideline](https://www.dhhs.vic.gov.au/healthcare-worker-personal-protective-equipment-ppe-guidance-performing-clinical-procedures) at <https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19> [↑](#footnote-ref-5)
5. Aerosol generating behaviour = screaming, shouting, crying out, vomiting [↑](#footnote-ref-6)
6. AGPs = aerosol-generating procedures. Examples include: bronchoscopy, tracheal intubation, non-invasive ventilation (e.g. BiPAP, CPAP), high flow nasal oxygen therapy, manual ventilation before intubation, intubation, cardiopulmonary resuscitation, suctioning, sputum induction, nebuliser use (nebulisers should be discouraged and alternatives considered such as a spacer). See the  [COVID-19 Infection prevention and control guideline](https://www.dhhs.vic.gov.au/healthcare-worker-personal-protective-equipment-ppe-guidance-performing-clinical-procedures) at <https://www.dhhs.vic.gov.au/health-services-and-general-practitioners-coronavirus-disease-covid-19> [↑](#footnote-ref-7)
7. Aerosol generating behaviour = screaming, shouting, crying out, vomiting [↑](#footnote-ref-8)