American Hospital Association_® Ebola Advisory

October 21, 2014

CDC ISSUES UPDATED PPE GUIDANCE

The Centers for Disease Control and Prevention (CDC) late Oct. 20 issued updated guidance (<u>http://www.cdc.gov/vhf/ebola/hcp/procedures-for-ppe.html</u>) for the use of personal protective equipment (PPE) in the care of patients with Ebola. The detailed guidelines are centered around three key principles:

- 1. Prior to working with an Ebola patient, staff should undergo rigorous training and practice, and demonstrate competence in safely putting on and removing PPE;
- 2. No skin should be left exposed when PPE is worn; and
- 3. The overall care of an Ebola patient must be overseen by an onsite manager at all times, and a trained observer should watch every time personnel put on and remove PPE to ensure compliance with PPE protocols.

CDC notes that the guidance reflects lessons learned from the recent experiences of U.S. hospitals caring for Ebola patients.

Our Take:

Every hospital and health care system, in consultation with the leaders of their infection prevention and control and occupational health departments, should immediately review and implement the recommendations included in the updated guidance.

In a statement (<u>http://blog.aha.org/post/aha-welcomes-new-cdc-guidance</u>) today, AHA noted that the specific information provided in the guidelines will help hospitals in the battle against Ebola. At a minimum, every hospital should be able to detect, isolate and manage the initial care of a patient with suspected or confirmed Ebola while protecting both patients and staff, and then transfer the patient as necessary.

The major areas addressed in the guidance include:

- Recommended administrative and environmental controls for health care facilities: CDC recommends, among other controls, designating individuals as site managers responsible for overseeing the implementation of precautions for health care personnel and patient safety.
- **Principles of PPE:** CDC outlines the principles all health care personnel must understand and follow in order to ensure safe and effective use of PPE, including the guideline that no skin may be exposed while working in PPE.
- Training on the correct use of PPE: CDC makes recommendations to ensure that health care personnel are knowledgeable and proficient in the donning and doffing of PPE prior to caring for an Ebola patient.
- Use of a trained observer: CDC recommends hospitals deploy a dedicated and knowledgeable individual whose sole responsibility is ensuring health care personnel adherence to the entire donning and doffing process.
- Selection of PPE for health care personnel during management of Ebola patients: CDC outlines several recommended PPE combinations and how they should be

correctly worn. CDC states that the key to all PPE is consistent implementation through repeated trainings and practice. The agency adds that hospitals should select and standardize the PPE to be used by all essential health care personnel directly interacting with Ebola patients, and provide a written protocol outlining procedures for donning and doffing of this PPE, which should be reviewed and monitored by the trained observer.

- **Recommended PPE:** CDC describes in detail the type of respiratory and other PPE recommended for health care personnel. These include a powered air purifying respirator (PAPR) or N95 respirator; a single-use (disposable) fluid-resistant or impermeable gown that extends to at least mid-calf or coverall without integrated hood; single-use (disposable) nitrile examination gloves with extended cuffs; single-use (disposable) fluid resistant or impermeable boot covers that extend to at least mid-calf or single-use (disposable) shoe covers; and a single-use (disposable) fluid-resistant or impermeable apron that covers the torso to the level of the mid-calf (if Ebola patients have vomiting or diarrhea).
- **Recommended PPE for trained observer during observation of PPE doffing:** CDC recommends specific PPE for the trained observer because he or she will be in the PPE removal area to observe and assist with the removal of potentially contaminated PPE.
- **Designated areas for PPE donning and doffing:** CDC lists instructions for ensuring that space and layout allow for a clear separation between clean and potentially contaminated areas, including physical barriers, posted signage and the availability of recommended supplies.
- **Donning PPE, PAPR and N95 options:** CDC outlines two detailed step-by-step protocols for donning PPE one protocol for hospitals that elect to use PAPRs and one for hospitals using N95 respirators. Each requires an established protocol that facilitates training and compliance, as well as the use of a trained observer to verify successful compliance with the protocol.
- **Preparing for and conducting doffing of PPE:** CDC describes what should occur before entering the PPE removal area, then two detailed step-by-step protocols for doffing PPE in the designated PPE removal area based on the type of respiratory PPE being used.
- Links to external (non-CDC) resources on PPE: CDC links to resources on PPE and infection prevention and control from Emory Healthcare, University of Nebraska Medical Center, Doctors Without Borders and the World Health Organization.

Next Steps:

- Convene leaders from your infection prevention and control and occupational health departments to carefully review the new guidance and implement the changes your facility will need to make.
- Train nurses and staff on the new guidance and drill repeatedly on the entire course of care, from diagnosis to final waste disposal, using the same equipment on which you will rely in order to safeguard your staff, patients and communities. This training should include proper procedures for putting on and taking off PPE under the watchful eye of a trained observer.
- ✓ CDC officials are available to assist 24/7 by calling the CDC Emergency Operations Center at (770) 488-7100 or via email at <u>eocreport@cdc.gov</u>.

Further Questions:

Please contact Roslyne Schulman, director of policy development, at (202) 626-2273 or <u>rschulman@aha.org</u>.