

COVID-19 Personal Protective Equipment Guidance

The Occupational Safety and Health Administration recommends using the hierarchy of controls as a framework for developing an approach to controlling exposure to COVID-19 in the work environment. This hierarchy often results in a blended approach which combines engineering, administrative and personal protective equipment into a tailored solution for the work environment.

Differences in the work/services provided as well as the environment the work is performed in can also impact the level of controls necessary to protect employees. OSHA’s “Guidance On Preparing Workplaces for COVID-19” recommends evaluating your work activities to determine work activities with low, medium, high, or very high COVID-19 exposures. The Occupational Risk Pyramid provided by OSHA shows the four levels and the likely distribution of worker exposure.

Occupational Risk Pyramid for COVID-19	
	<p>Very high and high exposure risk jobs are those with high potential for exposure to known or suspected sources of COVID-19 during specific medical, postmortem, or laboratory procedures.</p> <p>Workers in these categories likely need to wear gloves, a gown, a face shield or goggles, and either a face mask or a respirator, depending on their job tasks and exposure risks.</p>
	<p>Medium exposure risk jobs include those that require frequent and/or close contact with (i.e., within 6 feet of) people who may be infected with SARS-CoV-2, but who are not known or suspected COVID-19 patients.</p> <p>Workers with medium exposure risk may need to wear some combination of gloves, a gown, a face mask, and/or a face shield or goggles.</p>
	<p>Low exposure risk jobs are those that have little contact with the public and other coworkers. Their jobs do not require them to be in contact with people suspected of or known to be infected with COVID-19.</p> <p>Additional PPE is not recommended for workers in the lower exposure risk group.</p>

Personal protective equipment (PPE) has played a significant role in the fight against COVID-19. OSHA has provided the following interim guidance for specific worker groups and their employers regarding the use of PPE:

- PPE should be selected based on the results of an employer’s hazard assessment and workers specific job duties.
- Employees must be trained on the proper use, application, and limitations of the selected PPE.
- When disposable gloves are used, workers should typically use a single pair of nitrile exam gloves. Change gloves if they become torn or visibly contaminated with blood or body fluids.
- When eye protection is needed, use goggles or face shields. Personal eyeglasses are not considered adequate eye protection.

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- If workers need respirators, they must be used in the context of a comprehensive respiratory protection program that meets the requirements of OSHA's Respiratory Protection standard (29 CFR 1910.134) and includes medical exams, fit testing, and training.
- Surgical masks are not respirators and do not provide the same level of protection to workers as properly-fitted respirators.
 - If there are shortages of PPE items, such as respirators or gowns, they should be prioritized for high-hazard activities.
 - Workers need respiratory protection when performing or while present for aerosol-generating procedures, including cardiopulmonary resuscitation (CPR) and intubation.
- Workers must be protected against exposure to human blood, body fluids, other potentially infectious materials, and hazardous chemicals, and contaminated environmental surfaces.
- CDC provides strategies for optimizing the supply of PPE, including guidance on extended use and limited reuse of N95 filtering facepiece respirators (FFRs) and methods for decontaminating and reusing disposable filtering facepiece respirators during crises.
 - These guidelines are intended for use in healthcare but may help employers in other sectors optimize their PPE supplies, as well.
 - In the event of a shortage of masks, a reusable face shield that can be decontaminated may be an acceptable method of protecting against droplet transmission
- After removing PPE, always wash hands with soap and water for at least 20 seconds, if available. Ensure that hand hygiene facilities (e.g., sink or alcohol-based hand rub) are readily available at the point of use (e.g., at or adjacent to the PPE removal area).
- Employers should establish, and ensure workers follow, standard operating procedures for cleaning (including laundering) PPE and items such as uniforms or laboratory coats intended to function as PPE, as well as for maintaining, storing, and disposing of PPE.
- When PPE is contaminated with human blood, body fluids, or other potentially infectious materials, employers must follow applicable requirements of the Bloodborne Pathogens standard (29 CFR 1910.1030) with respect to laundering. OSHA's Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens (CPL 02-02-069) provide additional information.

Any of the risk categories could trigger the need for personal protective equipment. Employers should monitor the impact of the COVID-19 virus in their surrounding communities as well as state and federal guidelines to adjust control measures accordingly.

Source: OSHA, *OSHA 3990-03 2020 Guidance on Preparing Workplaces for COVID-19*

<https://www.osha.gov/Publications/OSHA3990.pdf>