

Emergency Department Staff and Physicians									
Patient Description	Excellent Hand Hygiene	Isolation Gown (Level 2 reusable or disposable)	Gloves	Surgical Mask	Face Shield/ Visor or Goggles	N95 Mask	Head and Neck Cover	Doffing	Provincial Guideline Adherence?
All ED patients until status known. (No respiratory symptoms or fever reported by patient or detected by assessment.)	✓	Not required	Not required	✓ Wear same surgical mask, as long as the mask does not become wet/contaminated (e.g., patient sneezes in your face) for direct patient care.	Not required, however eye protection is available if you choose to wear it	Not required	Not required	Doff mask and dispose of it when leaving care area (i.e., on break or end of shift). If the mask is subsequently used to care for patient on droplet precautions area, doff mask as part of leaving that area. <a href="#">Clean</a> and disinfect eye protection each time it is removed.	Meets/ Exceeds guidelines
Patient reports/develops respiratory symptoms or fever or is confirmed or highly suspected (i.e., awaiting testing) COVID-19 patient	✓	✓	✓	✓	✓	Not required	Not required	<a href="#">Full doffing of all elements</a> , eye protection requires <a href="#">cleaning</a> and disinfecting each time it is removed.	Meets guidelines
Known or highly suspected COVID (i.e., awaiting testing) patient.	✓	✓	✓	✓	✓	Not required	Not required	<a href="#">Full doffing of all elements</a> , eye protection requires <a href="#">cleaning</a> and disinfecting each time it is removed.	Meets guidelines
COVID cohorted unit.	✓	✓	✓	✓	✓	Not required	Not required	May use same mask and eye cover between patients, but change gown and gloves between patients. When leaving care area (i.e., going for break, end of shift), doff mask and <a href="#">clean</a> and disinfect eye protection each time it is removed. See <a href="#">doffing poster</a> for more information.	Meets guidelines
AGMPs for confirmed or highly suspected (i.e., awaiting testing) COVID-19 patient not itemized in next row (see footnote* as well).	✓	✓	✓	See N95	✓	✓	Not required	<a href="#">Doff all elements</a> . N95 put into receptacle for reprocessing. Face shield/eye protection requires <a href="#">cleaning</a> and disinfecting each time it is removed.	Exceeds guidelines
Performance of specific AGMPs for confirmed or highly suspected (i.e., awaiting testing) COVID-19 patient: intubation and extubation, bronchoscopy, TEE, gastroscopy.	✓	✓	✓	See N95	✓ (Face Shield)	✓	✓	<a href="#">Doff all elements</a> . N95 put into receptacle for reprocessing. Face shield/eye protection requires <a href="#">cleaning</a> and disinfecting each time it is removed.	Exceeds guidelines

For aerosol generating procedures, Intubation should be performed in a negative pressure room where possible. Use of CARRT teams in hospitals where those teams exist is preferred.

\* AGMP not requiring head and neck cover includes: CPAP, BiPAP, Nebulized medication administration, suctioning, high flow oxygen administration, tracheostomy care and needle lung biopsy.

<b>Applies to:</b>	All Island Health staff and providers who provide care or services within 2 meters of a patient.
<b>Purpose:</b>	To supplement staff and providers' standard <a href="#">Point of Care Risk Assessment (PCRA)</a> , to inform the appropriate selection of Personal Protective Equipment (PPE) for their care setting and patient/resident/ client scenario.

The PPE recommendations in this guide is the combined guidance from the BC Centre of Disease Control (BCCDC)/BC Ministry of Health [Personal Protective Equipment, COVID-19: Emergency Prioritization in a Pandemic Personal Proactive Equipment \(PPE\) Allocation Framework](#), and Island Health's Infection Prevention and Control principles of best practice, developed in collaboration with Professional Practice, Clinical Operations, Occupational Health and Safety, and Medical Affairs.

Appropriate use of PPE will mitigate COVID-19 transmission for both healthcare providers and patient safety, but clinical judgement during the Point of Care Risk Assessment may also determine that additional protection is required (for symptoms not related to COVID-19). Step-by-step posters and videos for donning and doffing of PPE are available on the [COVID-19](#) intranet page.

Due to the risk of contamination of the mask, it must not be stored in a pocket or bag after wearing if it is to be worn again within the same day. The use of a Tupperware/Ziploc style box could be used for this purpose.

Appropriate eye protection is visor, face shield or goggles. Eye protection cleaning protocol: [Coronavirus COVID-19: Cleaning and Disinfection Instructions for Eye/Facial Protection](#); or [Cleaning and Disinfecting Instructions for Eye/Facial Protection in the Absence of Water](#)

Prior to using an N95 mask, please ensure you have undergone [fit testing](#) and do not require renewal.

**Note:** Recommendations in this resource are updated as new information becomes available. If you choose to print and post the page applicable to your care setting, please check the published version ([PPE Required During COVID-19 Pandemic](#)) frequently for updates.

View the PPE guidance for the care settings most applicable to your role:

- [All Inpatient Care Areas \(including Mental Health, Pediatric, Adult, Porters and Lab Techs\)](#)
- [Primary Care Settings](#)
- [Long-Term Care](#)
- [Community Health Services and Assisted Living](#)
- [Perinatal Services](#)
- [Emergency Department Staff and Physicians](#)
- [Medical Imaging Department Staff and Physicians](#)
- [IPC Protocol for Surgical Procedures](#)