

DO's & DON'Ts For Reusing Masks/N95s/Eye Protection

PPE referenced in this document refers to surgical mask, N95, eye protection. Gowns and gloves should never be reused.



- DO** wear PPE when caring for patients on droplet/contact/eye protection and strict isolation.
- DO** remove PPE when leaving the clinical space (i.e. inpatient unit).
- DO** bundle your care of respiratory isolation patients to allow more continuous use of PPE.
- DO** store PPE in a clean emesis basin or paper bag (breathable) for reuse later. Label with your name.
- DO** check to make sure the PPE has no defects, such as a tear or torn strap or ear loop.
- DO** perform hand hygiene immediately after putting on or touching used PPE.
- DO** wear clean gloves when putting on used PPE.
- DO** disinfect eye protection with the appropriate disinfectant wipe and then perform hand hygiene.
- DO** remove eye protection inside room at doorway.
- DO** remove mask/N95 outside patient room.



- DON'T** wear PPE when caring for patients not on isolation.
- DON'T** wear PPE for more than one shift.
- DON'T** touch outside of used PPE.
- DON'T** leave mask/N95 hanging off one ear, arm, or around neck; on or off the face only.
- DON'T** place PPE in pocket.
- DON'T** wear PPE as a Greeter.
- DON'T** share masks or eye protection with other people.
- DON'T** reuse PPE if visibly soiled, wet, or damaged.
- DON'T** wear personal glasses as eye protection.
- DON'T** reuse N95 after aerosol generating procedures: single use.



NORTH SHORE
MEDICAL CENTER