



PPE Considerations for Schools

Currently the wearing of cloth facial coverings is recommended by students and staff particularly when six feet of physical distancing cannot be maintained both indoors and outdoors. See DPI's *Interim COVID-19 Infection Control And Mitigation Guidance*. See Wisconsin Department of Health Services [website https://www.dhs.wisconsin.gov/covid-19/protect.htm](https://www.dhs.wisconsin.gov/covid-19/protect.htm). Currently the CDC does not recommend the use of face shields for normal everyday activities or as a substitute for cloth face coverings. Exceptions may occur based on individual staff or student situation(s).\* ( See [CDC Considerations for Wearing Cloth Face Coverings](#) for additional and up to date information.

PPE Types	Situation	Situation	Situation	<b>Notes:</b>
	<p>Consider for staff use when school staff must interact with students and physical distancing cannot be maintained for prolonged periods of time in which student is not suspected of having COVID-19. Example 1:1 testing or therapy situations.</p>	<p>Consider staff use for close contact with students who cannot manage bodily fluids (cough/sneeze/oral secretions) and/or are unable to wear their own facial covering.</p>	<p>Consider health staff (nurse) use when caring for ill students, including students with respiratory symptoms.</p> <p>Consider use during all tasks that include the physical assessment of any individual suspected of having COVID-19.</p> <p>Consider use during all tasks that include aerosol generating procedures (such as, but not limited to: open suctioning of airways, sputum induction, non-invasive ventilation (e.g., BiPAP, CPAP), manual ventilation).</p>	<p>PPE should be used as a “last resort” when administrative or engineering controls are not able to eliminate the hazard. PPE is only effective if worn properly.</p> <p>Training on the types of PPE, how to properly put on/take off, the limitations and care instructions must be provided to employees who wear PPE.</p> <p>The Pandemic has caused supply issues including shortages and counterfeit products that has resulted in the Federal Food and Drug Administration (FDA) issuing emergency use authorizations for alternative equipment and the National Institute of Occupational Safety and Health issuing user notices.</p> <p>Use established blood borne pathogen PPE during care/first aid procedures along with body, face/eye/nose/mouth protection for respiratory and oral secretions exposure.</p> <p>Recommendations change as knowledge is gained, check <a href="#">DHS COVID-19 Personal Protective Equipment</a> and <a href="#">CDC Special Topics: COVID-19 Information for Workers</a> resources frequently.</p> <p><a href="#">FDA COVID-19 Frequently Asked Questions</a></p>



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Cloth facial covering or Face mask	Source control	Source control	Source control	Provides source control, i.e. control that contains an individual's respiratory secretions to help prevent transmission.  <a href="#">FDA Other Medical Device EUAs</a> <a href="#">FDA - FAQs on the Emergency Use Authorization for Face Masks (Non-Surgical)</a> In situations where the viewing of an individual's mouth or facial expressions is important (i.e. lip reading) the use of clear face masks are recommended unless a higher level of protection is required due to the task involved.
Fluid Resistant Surgical Mask	Yes, particularly if student not wearing facial covering	Yes	Yes. May be worn during assisting with nebulizer treatments.	Provides source control and protection from fluid entry into the nose and mouth.
Protective glasses or goggles	Yes, particularly if student not wearing facial covering	Yes (in conjunction with a fluid resistant surgical mask)	Yes (in conjunction with fluid resistant surgical mask)	Provides protection from entry into eyes along with mouth and nose if worn with fluid resistant surgical mask.
Face Shield	*Can be used as a partial source control measure if viewing therapist's or staff member's face is crucial to activity. See note. Suggest use of clear fluid resistant mask in conjunction with face shield as PPE.	Yes (consider concurrent use of a fluid resistant surgical mask for staff protection)	Yes (consider concurrent use of a fluid resistant surgical mask for staff protection)	Protects entry into eyes, mouth, and nose from direct cough and sneeze. *Does not cover facial expressions which may be important to some students and in some situations. Face shields are not meant to function as primary respiratory protection and should be used concurrently with a fluid resistant surgical mask (for droplet precautions) or a respirator (for airborne precautions) if aerosol-generating procedure is performed. <a href="#">FDA Personal Protective Equipment EUA's</a>
Gown (disposable)	Not required	Yes	Situation dependent	Depending on product, may be resistant or impermeable to fluids. Needs to be changed between students to prevent cross contamination. <a href="#">FDA - Manufacturers of Gowns and Other Apparel</a>



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<p>Lab coat or cloth washable covering (scrub jacket)</p>	<p>Not required</p>	<p>Use if disposable is not an option</p>	<p>Situation dependent</p>	<p>Cloth is not impermeable to fluids but provides a removable layer. Soiled clothing should be placed into a dissolvable laundry bag. If onsite laundry service is not available, consider contracting with an industrial laundry service. Worn or contaminated clothing is required to be laundered daily.</p>
<p>N95 or higher respirator/half or full-face respirator/face mask</p> <p>Power Air Purifying Respirator (PAPR)</p> <p><b>N95 or higher respirators/half or full-face elastomeric respirators or PAPRs require training/ medical clearance/ and a written program and fit testing.</b></p> <p>Not everyone can use a respirator due to their own health issues.</p>	<p>Not required</p>	<p>Recommended if staff performing procedures that aerosolize respiratory secretions such as, but not limited to: open suctioning of airways, sputum induction, non-invasive ventilation (e.g., BiPAP, CPAP), manual ventilation.</p> <p>Fluid resistant surgical mask can be worn in lieu of respirator or PAPR when assisting with nebulizer treatments. See notes below.</p>	<p>Recommended if staff performing procedures that aerosolize respiratory secretions such as, but not limited to: open suctioning of airways, sputum induction, non-invasive ventilation (e.g., BiPAP, CPAP), manual ventilation.</p> <p>Fluid resistant surgical mask can be worn in lieu of respirator or PAPR when assisting with nebulizer treatments. See notes below.</p>	<p>Best practices prior to the COVID-19 pandemic was for healthcare workers to use N95 or greater protection respirators when in contact with patients who may spread infectious diseases via airborne secretions.</p> <p><a href="#">NIOSH-Approved Particulate Filtering Facepiece Respirators</a></p> <p><a href="#">NPPTL Respirator Assessments to Support the COVID-19 Response</a></p> <p><a href="#">FDA Personal Protective Equipment EUAs</a></p>



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Gloves	Situation dependent Recommended for diaper changes, during feeding and anytime to prevent contact with body fluids.	Recommended for diaper changes, during feeding and anytime to prevent contact with body fluids.	Use whenever Universal Precautions would dictate use.	Wearing gloves or using hand sanitizer is not a substitute for hand washing. Washing hands between patients/students will prevent cross contamination.
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Additional notes:

Source control refers to use of cloth face coverings or facemasks to cover a person's mouth and nose to prevent spread of respiratory secretions when they are talking, sneezing, or coughing.

When available, fluid resistant surgical masks are preferred over cloth face coverings for school nurses and school health assistants, as fluid resistant surgical masks offer both source control and protection for the wearer against exposure to splashes and sprays of infectious material from others.

Cloth face coverings should NOT be worn instead of a respirator or facemask if more than source control is needed. If shortages exist, N95 or equivalent or higher-level respirators should be prioritized for procedures involving higher risk techniques (e.g., that generate potentially infectious aerosols) or that involve anatomic regions where viral loads might be higher (e.g., nose and throat, oropharynx, respiratory tract).

School nurse and school staff providing procedural care to students not suspected of having SARS-CoV-2 infection should use a tiered approach based on the level of community transmission to inform the need for universal eye protection and respirator use.

Asthma treatments provided via metered dose inhaler (MDI) with a spacer with or without a face mask, (according to each student's individualized treatment plan) are preferred over nebulizer treatments whenever possible. Based on limited data, use of asthma inhalers (with or without spacers or face masks) is not considered an aerosol-generating procedure.

Due to limited availability of data, it is uncertain whether aerosols generated by nebulizer treatments are potentially infectious. During this COVID-19 pandemic, nebulizer treatments at school should be reserved for children who cannot use or do not have access to an inhaler (with or without spacer or face mask).

Use of peak flow meters, including in the school setting, includes forceful exhalation. Based on limited available data, forceful exhalation is not considered an aerosol-generating procedure associated with increased risk of transmitting the virus that causes COVID-19. However, for some people with asthma, using a peak flow meter can trigger cough.



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Nebulizer treatments should be performed in a space that limits exposure to others and with minimal staff present. PPE for use when administering nebulizer treatments or peak flow meters to students with asthma consists of gloves, medical or surgical facemask and eye protection. Use of a gown is optional. Rooms should be well-ventilated or treatments should be performed outside. The room should undergo routine cleaning and disinfection after the use of a nebulizer.

### Additional Resources:

Considerations for Wearing Cloth Face Coverings

[https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html?deliveryName=USCDC\\_2067-DM31977](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html?deliveryName=USCDC_2067-DM31977)

OSHA Eye and Face Protection eTool: <https://www.osha.gov/SLTC/etools/eyeandface/glossary.html>

Guidance for Healthcare Personnel on the Use of Personal Protective Equipment (PPE) in Schools During COVID-19

<https://higherlogicdownload.s3.amazonaws.com/NASN/3870c72d-fff9-4ed7-833f-215de278d256/UploadedImages/PDFs/Guidance-for-Healthcare-Personnel-on-PPE-Use-in-Schools.pdf>

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