

## PPE Considerations for Schools (May 2024)

This document is primarily concerned with protection of school employees.

**Potential Contact with Bodily Fluids** – Consider staff use for close contact with students who cannot manage bodily fluids (cough/sneeze/oral secretions/feces/urine/blood) or any time there is the potential for contact with body fluids (Standard Universal Precautions).

- PPE should be used when administrative or engineering controls are not able to eliminate the hazard. PPE is only effective if worn properly.
- 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.
- 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.

The Centers for Disease Control and Prevention (CDC) provides [Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings](#). The CDC guidance is appropriate for school staff for example, school nurses or school-based health center personnel.

Potential Contact with Bodily Fluids	
Cloth Facial Covering or Face Mask	Yes, recommended as source control for protection of staff
Fluid Resistant Surgical Mask	Yes, required for protection for staff
N95 or Higher Respirator or PAPR	Yes, 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.  Fluid resistant surgical mask can be worn in lieu of respirator or PAPR when assisting with nebulizer treatments. See notes below.
Protective Glasses or Goggles or Face Shield	Yes, for staff protection in conjunction with a fluid resistant surgical mask
Gloves	Yes, required for diaper changes, during feeding and anytime to prevent contact with body fluids.
Gown (Disposable)	Yes, required for protection for staff
Lab Coat or Cloth Washable Covering (Scrub Jacket)	Yes, required if disposable is not an option

### **Cloth Facial Covering or Face Mask Notes:**

- Cloth masks provide **source control** by protecting those around the wearer in addition to protecting the wearer. 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. The wearing of face masks also protects the wearer from the respiratory secretions of others.
- 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 when more than source control is needed. **N95 or Higher Respirator or PAPR Notes:**
- N95 or higher respirators/half or full-face elastomeric respirators or PAPRs require training/ medical clearance/ and a written program and fit testing. **Not everyone can use a respirator due to their own health issues.**
- Fluid resistant surgical mask can be worn in lieu of respirator or PAPR when assisting with nebulizer treatments.

### **Protective Glasses/Googles or Face Shields Notes:**

- Googles or glasses provide protection from entry into eyes along with mouth and nose if worn with fluid resistant surgical mask.
- Face shields protect entry into eyes, mouth, and nose from direct cough and sneeze. 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.

### **Disposable or Cloth Gown Notes:**

- Depending on product, may be resistant or impermeable to fluids. Needs to be changed between students to prevent cross contamination.
- [FDA - Manufacturers of Gowns and Other Apparel](#)
- 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.

### **Asthma Treatment Notes:**

- No asthma treatments are considered aerosol generating procedures (AGP) by the [OSHA Emergency Temporary Standard](#) (ETS) and do not require the use of an N95 respirator or greater protection while performing these treatments.
- AGPs are defined as medical procedures that generate aerosols that can be infectious and are of respirable size. Under the ETS, only the following procedures possible done in schools are considered AGPs:
- Open suctioning of airways;
- Sputum induction;
- Cardiopulmonary resuscitation;
- Endotracheal intubation and extubation;

- Non-invasive ventilation (e.g., BiPAP, CPAP);
- Manual ventilation;
- Aerosols generated by nebulizers are derived from medication in the nebulizer. It is uncertain whether potential associations between performing this common procedure and increased risk of infection might be due to aerosols generated by the procedure, or due to increased contact between those administering the nebulized medication and infected patients.
- PPE for use when administering nebulizer treatments to students with asthma consists of gloves, surgical mask, 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.
- Use of peak flow meters, including in the school setting, includes forceful exhalation. PPE for use when administering peak flow meters in close contact to students with asthma consists of gloves, medical or surgical facemask and eye protection. Use of a gown is optional.

*This document was originally developed in cooperation with the Wisconsin Department of Health Services, the Wisconsin Department of Safety and Professional Services, and WisCon COVID Consultation Wisconsin State Laboratory of Hygiene. It has been revised by DPI post COVID-19 pandemic.*