

	<p>POLICIES & PROCEDURES</p> <p>Number: 20-40</p> <p>Title: Mask, Eye Protection and Face Shields</p>
<p>Authorization: <input checked="" type="checkbox"/> SHR Infection Prevention & Control Committee <input type="checkbox"/> Facility Board of Directors</p>	<p>Source: Infection Prevention & Control Date Initiated: June 5, 2001 Date Reaffirmed: June, 2003 Date Revised: October, 2006 Scope: SHR Agencies & Affiliates</p>

Introduction

The need for masks and eye protection during routine patient care depends on the task performed, i.e. whether it involves activities that are likely to generate splashes or sprays of blood, body fluids, secretions or excretions.

Policy

1. Health care workers will use Standard Precautions which require the use of appropriate personal protective equipment when direct contact with blood, body fluids, secretions, excretions, mucous membranes, non-intact skin and contaminated items is anticipated.
2. Selection of masks, eye protection and face shields shall be based on the type of procedure being done, likelihood of exposure to body fluid and length of use.
 - Regular masks are worn to protect the health care worker from acquiring infections transmitted by large particle aerosols (droplets) that are transmitted by close contact and generally travel short distances.
 - Eye protection such as wrap-around glasses and goggles are worn to prevent blood and body fluid splashes to the conjunctiva.
 - Face shields are worn to prevent mucous membrane contamination of the eyes, nose and mouth with blood and body fluid.
 - Laser masks are worn to protect the HCW from plumes emitted during CO₂ laser procedures. (See SHR Region-Wide Policy regarding Laser Safety).

Purpose

1. To reduce the risk of transmission of disease-producing microorganisms from one individual to another.

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2. To reduce the risk of exposure to blood, body fluids, mucous membranes, non-intact skin and contaminated environmental equipment.
3. To protect the wearer from harmful chemicals and disinfectants.

Procedure

1. Masks

- 1.1 Masks should cover the nose and the mouth.
- 1.2 Wear a mask and eye protection or a face shield for protection from facial splashes of blood and body fluids.

Examples:
 - For performing specific invasive procedures i.e. insertion of central lines, hemodialysis needle access.
 - For suctioning, intubation, bronchoscopy, endoscopy, and during the cleaning of instruments used for these procedures.
 - Within 1 meter of a coughing patient.
 - For dressing fresh burn wounds.
 - For dressing fresh major open wounds or wound irrigation.
- 1.3 Masks are used once and discarded.
- 1.4 Change mask when wet.
- 1.5 Discard used masks into the waste basket immediately after removing them.
- 1.6 For proper removal of masks, eye protection and face shields, refer to Infection Prevention & Control Policy, Personal Protective Equipment (PPE) – Donning and Removal.
- 1.7 Perform hand hygiene after removing masks.

2. Face and eye protection

- 2.1 Face shields and eye goggles/safety spectacles are provided by the institution. (See SHR/SPH OH&S Program Manual).
- 2.2 Clean and disinfect with hospital disinfectant non-disposable face and eye protection when visibly soiled and daily.

Reference:

1. Health Canada. *Infection control guidelines. Routine practices and additional precautions for preventing the transmission of infection in health care.* CCDR 1999; 25S4: 27,35,54,65,71.