

Useful FAQ on Use of PPE in General Practice Setting

Types of PPE

<p>Gloves</p> 	<p>Plastic Apron</p> 	<p>Gowns</p> 
<p>Eye Protection</p> 	<p>Fluid Repellent Surgical Mask</p> 	<p>3-Ply Surgical Mask</p>  <p>*These masks are not fluid repellent so should not be used for PPE however can be used as patient facemasks.</p>
<p>FFP2/3 Respirator</p> 	<p>Half-mask Respirator</p> 	<p>Full-mask Respirator</p> 

FAQs

What PPE should I wear for patients attending for routine care, i.e. immunisations, high-risk smears, injections, dressings?

- Disposable Gloves (change with each patient)
- Disposable Plastic Apron (change with each patient)
- Fluid repellent surgical mask*
- Eye protection*

*Masks to be used on a sessional basis, changed if contaminated or become moist. Eye Protection can be wiped down and cleaned with alcohol wipes or soap and water.

What PPE should I wear for patients attending that are unwell with NO symptoms of COVID19, e.g. rash, cancer symptoms, abdominal pains?

- Disposable Gloves (change with each patient) – Hand hygiene is an alternative should Glove supply be low
- Disposable Plastic Apron (change with each patient)
- Fluid repellent surgical mask*
- Eye protection*

*Masks to be used on a sessional basis, changed if contaminated or become moist. Eye Protection can be wiped down and cleaned with alcohol wipes or soap and water.

What PPE should I wear for patients attending that are unwell WITH symptoms of COVID19, e.g. fever, cough, body aches?

Higher Standard if available:

- Disposable Gloves*
- Surgical Gown**
- Plastic Apron*
- Eye protection*
- FFP3 Respirator (FFP2 if P3 not available)*

*Gloves, plastic apron to be changed with each patient. Eye protection to be wiped and re-used

**Gown to be replaced if contaminated otherwise sessional use

Minimum standard:

- Disposable Gloves*
- Disposable Plastic Apron*
- Fluid repellent surgical mask*
- Eye protection*

*Should be changed with each patient except for eye protection which can be wiped clean with alcohol wipes

What PPE should I wear for patients that need a nebuliser?

- Disposable Gloves*
- Surgical Gown*
- Plastic Apron*
- Eye protection*
- FFP3 Respirator (FFP2 if P3 not available)*

*Gloves, Plastic Apron and Gown to be changed with each patient. Eye protection to be wiped and re-used

What PPE should I wear if I need to perform CPR?

We strongly encourage clinicians to remember the adage: There is no emergency in a pandemic². Assessing risk and safety to approach are core aspects of any resuscitation, we would encourage clinicians to consider the following before attempting CPR:

1. Is the patient likely to survive by providing CPR?
2. Is the cardiac arrest likely to be related to COVID19? – CPR is unlikely to be successful in any age group in the community setting
3. Consider expected transfer time to hospital
4. Consider the availability of PPE and factor in the delay for donning PPE

Should clinicians feel it is appropriate to proceed then the following PPE will be needed:

- Disposable Gloves*
- Surgical Gown*
- Plastic Apron*
- Eye protection*
- FFP3 Respirator (FFP2 if P3 not available)*

*All to be changed/cleaned

Can I wear FFP2/FFP3 disposable respirators if I have them?

Yes, we would encourage clinicians seeing COVID19 symptom patients to wear the highest inhalational protection available to them. For clinician safety these must be fit tested. They should be changed based on manufacturer instructions but should be fine for sessional use.

Can I wear a re-usable FFP2/3 half or full mask respirator if I have them?

Yes, we would encourage clinicians seeing COVID19 symptom patients to wear the highest inhalational protection available to them. It is important that manufacturer recommended cleaning procedures are followed. For clinician safety these must be fit tested.

Should we get suspected COVID19 patients to wear masks?

Yes. We now have sustained transmission in the community and therefore the latest PHE advice on this should be implemented⁴.

Should we get all patients to wear masks, even if they are asymptomatic?

There is strong evidence for the asymptomatic transmission of COVID19. Current UK guidance advises social distancing is a superior method than population based endorsement of face masks. Given that social distancing is not achievable in a 1-1 care setting, we would support any surgeries who chose to move forward with patients attending their premises wearing masks. There is evidence to suggest this significantly reduces droplet spread and also offers a level of protection against asymptomatic carriers. Many will note the recent change in American CDC guidance to endorse this.

This will have an impact on mask supply but we are working hard to source more. Clinicians should ensure they have sufficient capacity of PPE for themselves first, before escalating to patient facemask use.

Useful resources:

1. <https://www.gov.uk/government/publications/wuhan-novel-coronavirus-infection-prevention-and-control/covid-19-personal-protective-equipment-ppe>
2. <https://acanticleforlazarus.com/2020/03/23/there-is-no-emergency-in-a-pandemic/>
3. <https://www.supplychain.nhs.uk/>
4. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/877728/T1_Recommended_PPE_for_healthcare_workers_by_secondary_care_clinical_context_poster.pdf