

COVID-19 RESOURCE: EYE PROTECTION

Overview

NOTE: The use of eye protection <u>does not</u> replace the need for universal masking and social distancing. While social distancing may not always be possible, we should make efforts to achieve it whenever we can.

When to wear eye protection: <u>During patient interactions/encounters</u>

- Notes:
 - Use of Plexiglass replaces the need for eye protection in patient facing staff, when the barrier is placed between the healthcare worker and the patient
 - Mental Health & Addiction Services units require eye protection in all patient-accessible areas
 of the unit

When can eye protection be removed?

- Eye protection is not required for staff who are not patient-facing or do not provide direct-patient care
- When outside of the patient room and/or no longer interacting with a patient
 - Mental Health & Addiction Services: in staff-only areas that have a physical barrier to the milieu such as workrooms and med rooms

Acceptable Eye Protection for Direct Patient Care and Patient Facing Staff during COVID-19

IMPORTANT: A Full Face Shield is the first choice for daily use because it protects eyes/face and protects the universal mask/N95

	BEST: Full Face Shield	BETTER: Goggles	GOOD: Healthcare Eyewear ²	GOOD: Mask with Integrated Eye Protection
Direct Patient Care	Yes	No ¹	No	No
Patient Facing	Yes	Yes		
	Yes	Yes	Yes	Yes
	Patient Care Patient	Direct Patient Care Patient Facing Patient Facing	Full Face Shield Direct Patient Care Patient Facing Provided Facing F	Full Face Shield Goggles Healthcare Eyewear² Direct Patient Care Patient Facing Yes Yes Yes Yes Yes

¹Goggles are safe in this circumstance but do not protect the universal mask/N95, so a full-face shield must be worn in order to conserve mask/N95. If goggles are used, N95 needs to be protected with a single use face mask that is discarded after encounter.



²Colored frame glasses from TIDI or Halyard

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Full-Face Shield and Goggle Options

Always use supply chain for purchasing PPE. The below are system standards for newly purchased goggles or full-face shields. **There will still be use of the previously approved versions until those have been depleted**. To obtain approved eye protection, contact your site inventory specialist.

Full-Face Shields	Goggles
Brand: Slipos	Brand: 3M
Brand: Key Surgical	Brand: Progear
Brand: Per Supply Chain Sourcing	
Brand: Ford	

³Aerosol-generating procedure (AGP) list



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Extended Use and Reuse of Face Shields and Goggles

	EXTENDED USE (a.k.a. uninterrupted use): Wearing the same eye protection for an extended period and for repeated close contact without removing it between patients.	CAREFUL REUSE STEPS: Removing the eye protection as needed, placing in a plastic bag or identified clean area, performing hand hygiene and donning to reuse.
Full Face Shield	 Donning: Follow normal donning procedure for face shield and any additional PPE Doffing: Doff all PPE (per protocol) EXCEPT face shield and face mask/N95 Clean outside of face shield if visibly soiled Continue to next patient encounter 	Doffing: When ready to doff face shield, wear clean gloves to doff and disinfect face shield. Disinfection process 1. Wipe inside, then front of face shield 2. If necessary, rinse with water or alcohol wipe to remove disinfectant residue 3. Wipe elastic or foam band if applicable 4. Remove gloves and perform hand hygiene 5. Place in designated plastic bag or identified clean area 6. Reuse until damaged or vision is obstructed
Goggles	 Donning: Follow normal donning procedure for goggles and any additional PPE Doffing: Doff all PPE (per protocol) EXCEPT face shield or goggles and face mask/N95 Clean outside of goggles if visibly soiled Continue to next patient encounter 	 Doffing: When ready to doff goggles, wear clean gloves to doff and then clean and disinfect the goggles. Disinfection process: Wipe inside, then both ear and nose pieces, and front side last If necessary, rinse with water or alcohol wipe to remove disinfectant residue Remove gloves and perform hand hygiene Place in designated plastic bag or identified clean area Reuse until damaged or vision is obstructed



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Frequently Asked Questions

When do I disinfect eye protection?	 When visibly soiled After a contamination event When difficult to see through Discard when damaged 	
What are the M Health Fairview Criteria for full face shields and goggles that supply chain provides?	Face Shield (forehead down) criteria: Fully covers front and sides of face (not just straight horizontal across and needs to curve for some side protection), reaches at least chin length, if not sealed on top reaches up to top of or above forehead, if reusable must be able to be wiped with disinfectant, comfortable, cost effective, ideally anti-fog Goggle criteria: full seal around the eyes, indirectly vented, if reusable must be able to be wiped with disinfectant, comfortable, ability to fit over glasses, cost effective, ideally anti-fog	
Can both reusable and disposable eye protection be used for extended use?	Yes	
Do I need eye protection if the patient is masked?	Yes	
When do I perform hand hygiene?	As with handling any PPE item, hands must be cleaned prior to donning and after touching your eye protection or doffing it.	
Are personal prescription eye glasses considered eye protection?	No, personal prescription eye glasses are <u>not</u> a substitution for eye protection.	
What if I am on a unit and caring for 1 patient on special precautions and 1 patient not on isolation precautions? Do I have to change eye protection type?	No, you could use the full-face shield for all of your patient care encounters. The only time you would need to change eye protection is if you have not been caring for a patient on droplet precautions or special precautions and you get a new assignment with one of those isolations. You would need to change your protection from goggles to a full-face shield in order to protect your mask/N95.	
When can I use a ½ or ¾ face shield?	Half and three-quarter face shields are acceptable for asymptomatic patients. These will not be a standard moving forward so once supply is depleted, we ask you move to other eye protection options.	
Are goggles and safety glasses the same thing?	No. Safety glasses do not provide the same amount of protection that goggles do. They do not seal around the eyes like goggles and do not extend to the top of the forehead and sides of the head like a full-face	



	shield.
Do we need to replace existing M Health Fairview provided eye protections with these new standards?	No, continue to use the eye protection your department has been provided by supply chain. Moving forward, when you need to replace eye protection, supply chain will first use up the current approved supply and then turn to using these new system standard products.
I am having issues with proper fit or vision clarity (ex. surgical loops, lead safety glasses) with the provided eye protection, what should I do?	Please contact the <u>EOHS Occupational Health Nurse for your site or area</u> for assistance.
Who should I contact if I need to explore accommodations related to eye protection due to my own medical condition?	Please contact your <u>Accommodations Case Manager</u> .
Can I bring my own eye protection from home?	No, per EOHS employees must use the hospital provided eye protection options.
When I'm wearing a full face shield over my N95, do I also need to protect my N95 with a universal mask?	No, a full face shield provides protection to your eyes, face, and N95 from any splashes or sprays that may contaminate it during patient care encounters. Wearing a universal mask over an N95 does not enhance respiratory protection from COVID-19. Thus, we discourage wearing a universal mask over an N95.
In order to see well enough to do a high acuity task (ex. central line insertion) I need to wear goggles instead of a full face shield for a COVID positive, PUI, droplet or unknown AGP, what do I need to know about protecting my N95?	While wearing a full face shield is best and should be prioritized for COVID positive, PUI, droplet and unknown AGP patients, there may be occasional times where goggles may need to be worn to see well enough to perform a precision task. In this situation, wear a universal mask over the N95 and discard that universal mask after the patient encounter.
How can I prevent fogging of my eye protection?	Here are some tips that may help: Dish soap and water: Wash eye protection using a few drops of dish soap and water. Shake off excess water and allow the item to air dry or gently wipe it off with a soft cloth before wearing again. The soap leaves behind a thin film that acts as a fog barrier. Shaving cream: Shaving cream has the same effect, acting as a fog barrier. Gently apply and rub the product on the lens or shield and then simply wipe it off.
	Adjust the fit: Pull your mask up over your nose and rest your eyewear on top of it.
	Use medical tape: Another option is to use medical tape (paper tape) to seal the top of the mask to the bridge of your nose and your cheeks. This will block your breath from escaping upward and prevent fogging. Make sure your mask still fits properly over your face and completely covers your nose and mouth. Do not cut or otherwise alter your mask or eye protection.

