1. **Gloves do not replace the need for hand hygiene.** When possible, **performing hand hygiene** frequently is recommended instead of wearing gloves.

2. Gloves cannot be cleaned and become contaminated very quickly. Gloves should be used when handling disinfectants or before contact with body fluids.

3. **In the event of Cardiopulmonary Resuscitation (CPR) where bag valve mask ventilation is used, an N95 respirator is required** (if intubated, then N95 respirator not required).

4. If N95 respirator is donned, keep on for duration of the case or change if moist or visibly soiled/ contaminated.

5. Follow PPE sparing strategies when indicated based on local epidemiology and supply. Discuss with local IPC team.

### IPC PPE Table for Surgical Suites during COVID-19

<table>
<thead>
<tr>
<th>Location</th>
<th>Staff Type Examples</th>
<th>In Surgical Suite</th>
<th>PPE Required</th>
<th>When to Change</th>
<th>Notes</th>
</tr>
</thead>
</table>
| Non-theatre | • All healthcare workers (HCWs)  
• No direct patient contact | | Continuous Masking  
Eye protection based on point-of-care risk assessment (PCRA) and vaccination status. Perform hand hygiene frequently. | Surgical mask  
Eye Protection (where indicated) | Facial PPE changed:  
- when one or both are moist or visibly soiled/ contaminated  
- before breaks  
- at shift change |  Maintain PPE for other additional precautions (e.g., Contact precautions for MRSA) |
| Non-theatre including:  
• Pre-op holding  
• PACU | • Service Aides/Porters  
• Pre-Operative Nurses  
• PACU  
• Other HCWs not in theatre with patient contact | Continuous Masking  
Eye protection based on point-of-care risk assessment (PCRA) and vaccination status. | Surgical mask  
Eye protection (where indicated) | Facial PPE changed:  
- between patients  
- when one or both are moist or visibly soiled/ contaminated  
- before breaks  
- at shift change | Maintain PPE for other additional precautions (e.g., Contact precautions for MRSA) |
| In theatre  
• No AGMP | • Anesthesiologists  
• Nurses  
• Surgeons/Residents  
• Service aides/Porters  
• Students Vendor Representatives  
• Other HCWs | | Surgical mask or N95 respirator  
Eye protection  
Gown  
- If scrubbed, wear surgical gown/if not wear isolation gown  
- Gloves | Facial PPE changed:  
- between patients  
- when one or both are moist or visibly soiled/ contaminated  
- before breaks  
- at shift change |  If wearing isolation gown, doff as per Contact and Droplet precautions |
| In theatre  
• During an AGMP (intubation, extubation, laryngeal mask airway)  
• CPR – see #3 above | • Anesthesiologists  
• Respiratory Therapists  
• Induction nurse  
• Other HCWs if present | | | | |

For more information contact  
ipcsurvstdadmin@ahs.ca  
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<table>
<thead>
<tr>
<th>Location</th>
<th>Staff Type Examples AHS staff/Contracted staff/Volunteers</th>
<th>In Surgical Suite</th>
<th>PPE Required</th>
<th>When to Change</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgical suite including: OR theatre PACU</td>
<td>Pink Stream Patient (COVID-19 confirmed, suspected or unable to assess e.g., trauma)</td>
<td>Continuous Masking Eye protection</td>
<td>N95 respirator for AGMP Surgical mask if AGMP not anticipated Eye protection Gown o If scrubbed in, wear surgical gown; if not wear isolation gown Gloves</td>
<td>Doff all PPE between patients. If PPE sparing strategy required (see #5 above), please discuss with local IPC team.</td>
<td>Maintain PPE for other additional precautions (e.g., Contact precautions for MRSA) Doffing of PPE o If scrubbed in, doff using usual process for surgical scrub attire o If wearing isolation gown, doff as per Contact and Droplet precautions</td>
</tr>
</tbody>
</table>

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