

# Surgery Procedural Mask Reuse Policy

**This policy is intended for OR/surgical staff during surgery or procedures where the purpose for the mask is to protect the surgical site from the staff performing the procedure, not inpatient care units.**

- **Risk assessment:** In times where the demand for PPE equipment is high and/or the supply of PPE equipment is potentially low (a PPE Conservation Event) the risk of infectious disease transmission is low with the re-use of surgical and procedural masks. The risk to patients and staff is higher should the mask supply run out than is the risk of patient-to-patient or patient-to-provider transmission potentially associated with re-use.
- Acceptable re-use parameters during PPE conservation events only:
  - All patients being cared for during the period of mask re-use should have a low risk of transmissible infectious disease
  - Re-use is not permitted for patients who are not masked at any point in their care and in droplet, airborne or contact precautions
  - Mask must be in good condition and not soiled
  - Masks being re-used should be limited to 4-6 hours in duration (write starting time on mask strap); masks do not need to be changed during the middle of a case
  - Extra care should be taken to avoid contact of mask and straps directly with patient, and mask should be discarded if contact occurs
  - New masks are required at the beginning of a shift, after meals or use of bathroom facilities
  - Masks in re-use should not be left unattended or in a place where they could contaminate other areas (offices/breakrooms/pacu etc...)
  - Masks should be removed and discarded when leaving surgical/procedural areas and at the end of a shift

**This policy is in effect only during PPE conservation events and will be reconsidered on a bi-weekly basis.**

**UPDATED: 3/10/2020**

