

## Hazardous Medication PPE Use/Re-Use

Due to the current COVID-19 surge related to the Omicron variant, we will continue efforts to conserve PPE for hazardous medication handling. While the need is evident, we strive to maintain your safety during administration and disposal of hazardous medications and body fluids. These guidelines review how to continue the re-use/conservation of **masks/face shields** and **blue gowns** for ALL areas that handle hazardous medications. For patients on **isolation precautions** receiving hazardous medications please read additional [PPE update](#) sent out in early January.

### Guidance on hazardous medication PPE conservation:

- Review appropriate PPE for clinical scenario and only use PPE per procedure (See Appendix B: PPE for Hazardous Meds).
- Review eMAR guidance regarding the hazardous potential of a drug. **Do not use PPE if the medication is not labeled as a hazardous medication.**
- Use appropriate PPE for hazardous medications, limited exposure and reproductive toxins.
- For NG/NJ administration, follow the guidelines for Oral: Risk of spitting, splash, splatter or spray.
- Regular masks and N-95s will be reused *when combined with a face shield*. If contamination is suspected, the mask and/or shield should be discarded.
- RNs should use **1 regular mask, 1 face shield, and potentially 1 N-95 per day**, unless contaminated.
- Blue hazardous medication gowns should be re-used as described below:
  - Label a gown with your name and date for the patient(s) in your assignment.
    - In the **inpatient setting**, staff should use 1 gown/patient/shift.
    - In the **outpatient setting**, staff should use 1 gown/shift
  - Use gown only for preparation, administration, and disposal of hazardous medications/body fluids. Avoid other patient contact while wearing the gown.
  - Store gown in a clean, dry manner, hanging inside out and away from sources where it could be contaminated.
  - Clean your hands each time prior to and after touching the gown.
  - Avoid touching the inside of the gown unless hands are clean.
  - Discard your gown, prior to the end of your shift if wet, soiled, damaged or likely contaminated by spill/splash of hazardous medications or body fluids.

### In the inpatient setting:

- When a patient is receiving a hazardous medication that requires a regular mask for administration, the RN will continue to don and reuse their regular mask that was provided for their shift, in addition to a face shield.
- When a patient is on hazardous medication precautions, and needs assistance with body fluid disposal, the RN/PCA will don and reuse an N-95 respirator mask and face shield. Avoid multiple team members emptying urinals, indwelling urinary catheters, and flushing toilets within a shift. If the patient is actively having hazardous medication(s) administered, the RN should dispose of contaminated body fluids.
- Always use a chux over the top of the toilet when disposing of contaminated body fluids to limit aerosolization and potential for mask/shield/gown contamination.
- Encourage the patient/family member to measure and/or dump urine/excreta, or only flush the toilet 1-2 times/shift to limit PPE use and potential for contamination.

For more information regarding hazardous medication safe handling practices and duration of precautions, please see the [Hazardous Medication Safe Handling Medical Center Policy](#).

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