




# COVID-19 PPE Use

Resident Status	Type of Precautions	Hand Hygiene 	Gloves 	Goggles/ Face Shield 	Mask 	Gown 	N95 Respirator 	Monitor Resident For:
No COVID-19 Symptoms/ Exposure OR COVID- Recovered*	Universal	X	X	Use for activity that may generate splashes of respiratory secretions or other potentially infectious material.				<b>If recovering from COVID:</b> Poor eating or drinking Clots (PE, DVT, Stroke)  <b>If never had COVID-19:</b> Temperature > 99.0 COVID-19 symptoms
COVID-19 Negative Potentially exposed within last 14 days	Contact AND Droplet	X	X	X	Either	X		Temperature > 99.0 COVID-19 Symptoms
COVID-19 Positive OR COVID Symptoms (test pending)	Contact AND Droplet	X	X	X	Either	X	For testing or aerosolizing procedures	Low oxygen saturation High heart rate Shortness of breath Delirium Vomiting/diarrhea Poor eating or drinking