TYPES OF MASKS & RESPIRATORS

✓ MASKS ARE NOT RESPIRATORS

Filter larger particles. (See comparison table on opposite side.)

✓ AIR PURIFYING RESPIRATORS (APRS) Filter contaminants

✓ SUPPLIED AIR RESPIRATORS (SARS) Supply clean air from a separate source

✓ POSITIVE AIR PRESSURE RESPIRATORS (PAPRS)

Both APR and SARs - Positive pressure respirators provide high levels of protection by pumping air into the mask at all times. Connected to separate air source with positive pressure at all times. Used when facility protocol requires its use or the nurse has a condition such as claustrophobia. cardiac or respiratory problems, or facial malformations or facial hair prevent good fit of other masks or respirators.

✓ NEGATIVE PRESSURE RESPIRATORS Rely on the wearer's lung power to draw air in.

EXAMPLES

Surgical mask



N95 respirator



Positive air purifying respirator (PAPR)



RESOURCES & TIPS

Search for these key terms:

Flu, masks, respirators, personal protective equipment, respiratory protection

RESOURCES ONLINE

cdc.gov

cdc.gov/niosh

fda.gov

osha.gov

wsna.org

lni.wa.gov

TIPS

Even if you have been immunized, there is no "zone of protection" for all situations. Use appropriate isolation precautions as they apply, even if you wear a mask or respirator.

Respirators must be "user seal" tested each time the wearer uses it.

Become familiar with and select appropriate personal protective equipment.



COMPARISON OF MASKS AND RESPIRATORS

Regulated by The Washington Industrial Safety and Health Act (WISHA), under general industry standard for respiratory protection Chapter 296-842 WAC. This standard requires that Washington employers implement a program to protect employees from inhalation of respiratory hazards. Check with your institution to determine if they are required to implement a Respiratory Protection Program.

Masks (not considered a respirator)	Respirators (considered PPE)
Creates a physical barrier between the mouth and nose of the wearer and the environment. Come with or without a face shield. Does NOT filter or block small particles in the air, including gases or vapors.	Covers at least the nose and mouth, used to reduce wearer's risk of inhaling hazardous airborne particles (including dust particles and infectious agents), gases, or vapors. Filters out or blocks small particles (see manufacturer's specifications).
Does NOT require a "user seal" check.	A "user seal" check should be performed each time it is worn.
Help block large-particle droplets (>5 um in size), splashes, sprays or splatter that may contain viruses and bacteria.	Blocks small particle droplets including those found with aerosol treatment administration. N95 or N100 indicates 95% or 100% efficiency rating. N means it cannot be used with oil.
Worn by HCP in close contact (i.e., within 3 feet) with a patient who has symptoms of a respiratory infection, particularly if fever is present, as recommended for standard and droplet precautions. If not sure of contact, put on mask and other PPE on entry into room.	Worn by HCP in close contact with a patient who has an undiagnosed respiratory infection or if giving aerosol treatments that result in small particle sizes.
Most protective of others.	Protective of both the wearer and others.
Does NOT provide additional oxygen.	Some may be connected to oxygen sources.
Disposable. One time use – then throw away or dispose of per hospital policy. Dispose of when leaving the patient bedside/room or if wet/contaminated.	N95 and N100 lightweight and disposable. PAPR not disposable. If used by more than one employee, cleaning and disinfecting, storage, inspection, and repair of respirators must be performed.

MEDICAL CLEARANCE, FIT TESTING AND CONTRAINDICATION

Medical clearance – You must fill out a respiratory medical evaluation questionnaire to ensure you are physically fit to wear a respirator. A Licensed Health Care Provider (LHCP) will review the confidential questionnaire and will ensure HIPAA compliance. Questionnaires are kept 30 years past employment.

Fit testing – The wearer must pass an appropriate fit test using the procedures detailed in WISHA's Respirator Standard. This ensures they are fit to wear a respirator and that they are wearing an appropriate size of respirator that fits properly.

Contraindications – There may be contraindications to wearing a respirator. These include such things as claustrophobia, cardiac or respiratory conditions, facial malformations that prevent fit of N95 or N100 masks, or facial hair that prevents good fit of other respirators.

PRESSURE CHECKS

User seal checking – Using manufacturer's instructions, the user tests to ensure he/ she has correctly put on the respirator and adjusted it to fit properly. Performed each time the respirator is worn.

RESPIRATORY PROTECTION TRAINING

If your facility is required to have a Respiratory Protection Program, training is required and will include:

- How the proper respirators for the particular hazards are selected and issued (includes a list of respirators used,
- When and how respirators will be used in routine work activities, infrequent activities, and foreseeable emergencies such as spill responses, rescue or escape situations.
- How medical evaluations of respirator wearers is provided,
- How respirator fit-testing is done,
- How respirators in use are cleaned, stored, inspected and repaired or discarded,
- How sufficient high purity air is provided for air-supplied respirators (if you use them),
- How employees are trained about respiratory hazards at your workplace,
- How employees are trained on the proper use of the respirators used at your workplace,
- How you evaluate the effectiveness of your respiratory program.