

N95/P2 respirators – updated advice



Please note the updated advice around the use of N95/P2 respirators. This advice replaces the previous intubation advice provided in the CEO bulletin 14 August 2020, and is in addition to the advice published on the website -

<https://www.dhhs.vic.gov.au/personal-protective-equipment-ppe-covid-19>

The current guidance recommends the use of Tier 3 PPE for aerosol generating procedures in patients with suspected or known COVID-19 infection. In patients who are tested negative for Covid 19 and/or have no risk factors and thus screen negative, Tier 2 PPE can be utilised when performing AGPs.

In relation to intubation and extubation:

- Health services should undertake their own risk assessment to determine whether the use of N95/P2 respirators is required for HCWs directly involved in the intubation/extubation of patients who are COVID negative/not exhibiting COVID risk factors.

N95/P2 respirators – updated advice, continued..



- Should the decision be made that a case will be treated as suspected COVID-19 then the following should occur:
 - Staff undertaking the intubation/extubation should use Tier 3 precautions (that is, an N95/P2 respirator, eye protection, gown and gloves)
 - Staff not directly involved in the intubation/extubation of a patient should remove themselves from the area while the intubation/extubation is occurring.
 - Following the completion of the intubation/extubation, the required air exchanges to remove residual aerosols must occur before other HCWs can re-enter the area. Where the number of air exchanges is not known staff should not enter until a minimum of 30 minutes has lapsed.
 - Staff re-entering the area (post the required air exchanges occurring) need only to wear Tier 2 PPE precautions (that is, a surgical mask, eye protection, gown and gloves).
 - If any HCWs need to enter the area while an intubation/extubation is occurring, Tier 3 PPE precautions should be worn.
 - Gloves and gowns should be changed post completion of intubation/extubation, for staff directly involved.