

COVID-19 Personal Protective Equipment

NOTICE

The COVID-19 community-based testing program is a federally supported, state-directed program in collaboration with Verily's Project Baseline.

The testing guide below has been developed to align with guidelines provided by federal and state public health authorities. Parties adopting this guide should work with their clinical operations, environmental health and safety teams, and their state and local authorities to ensure compliance with relevant laws.

DISCLAIMER

- This guide is provided in an effort to assist agencies in establishing "drive-through" COVID-19 sample collection and testing operations. However, each agency's needs or circumstances may differ from the assumptions behind the practices described in this guide, so we cannot and do not make any warranties or representations about them or anything else in this guide.
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1. Background

The safety of all members of our healthcare team is a top priority for Verily as we navigate the rapidly evolving clinical situation around COVID-19. Based on available evidence and expert opinion, the COVID-19 virus, similar to other coronaviruses and influenza, is primarily transmitted through close contact and large droplets.

Staff who interact directly with high-risk potential COVID individuals should maintain airborne/droplet/contact precautions with eye protection. This includes staff that have exposure to respiratory secretions such as swabbers or swab assistants.

Staff that do not directly interact with the participants are recommended to comply with PPE as directed below based on their role.

Why are we following these guidelines?

- Standard/droplet/contact precautions are clinically appropriate for non-critically ill participant care and are consistent with guidelines from WHO and other countries.
- Nasopharyngeal swabs often generate a strong cough reflex which increases risk of exposure to secretions which warrants Standard/Contact/Droplet precautions

2. Scope

This process instruction applies to the protection of workers during collection of swabs for COVID-19 mobile testing stations.

3. Terminology

Term/Acronym	Definition
PPE	Personal Protective Equipment - all equipment used to protect an individual from potential contamination. This includes, but is not limited to, masks, gloves, gowns, and biohazard suits.
MA	Medical Assistant
RN	Registered Nurse
Hot Zone	Area of site where participants in vehicles lower window and potentially expose workers to contamination. For our purposes 'Hot Zone' refers to the area surrounding and including Station 3 (Sample Collection Station).
"Don"	The process of putting on PPE.
"Doff"	The process of taking off PPE. Requires a specific order to ensure no personal contamination occurs via transfer from contaminated PPE.

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Surgical Mask	Loose-fitting mask that is fluid resistant and provides the wearer protection against large droplets, and splashes or sprays of bodily fluids. Protects the patient from the wearers respiratory emissions. Leakage occurs around the edge. Small particles can get through so the mask is not considered respiratory protection.
N95	Tight-fitting respirator that reduces the wearer's exposure to particles including small particle aerosols and large droplets. (Only non-oil aerosols). A seal check is required each time donning the respirator. It filters out at least 95% of airborne particles. NIOSH approved.
Surgical N95	Surgical respirators are both certified by NIOSH as an N95 respirator and also cleared by the FDA as a surgical mask.

4. Materials

4.1. Equipment

- Biohazard Waste Bins

4.2. Consumables

- N95 Respirators
 - [CDC recommendation guidelines about reuse](#) in Healthcare settings
- Surgical Masks
- Face shields
- Goggles/Protective eyewear
- Gowns
- Nitrile gloves
- Bouffant/Surgical cap
- Handwash station / alcohol hand sanitizer
- Biohazard Waste Bags
- Shoe Covers

5. Environmental Health and Safety.

We recommend discussing this document with your own Environmental Health and Safety personnel and site-specific Clinical Lead to ensure guidelines are suitable to your own environment, and modifying as appropriate.

5.1. General

- 5.1.1. Read through the entire document to assure overall understanding of the contents.
- 5.1.2. Verify that training to this document, if applicable, is completed before carrying out the process.

5.2. Safety

- 5.2.1. Assume all samples are infectious and follow PPE and process instructions carefully. Contact your supervisor if you have any questions about specific samples and their handling.
- 5.2.2. Take appropriate precautions when using cleaning agents. Read the Safety Data Sheets and follow the handling instructions carefully.

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5.3. Waste

5.3.1. Assume all waste generated by this process is infectious and dispose of it in a red biohazard bin/bag.

5.4. Information

5.4.1. Please note that you may be exposed to sensitive personally identifiable information (SPII). Take appropriate precautions and do not discuss or disclose.

6. General PPE Regulations for the sites

6.1. PPE Donning:

6.1.1. PPE should be donned before entering any Hot Zone.

6.1.2. Order for Donning PPE:

6.1.2.1. Gown or Tyvek Coverall

6.1.2.2. Mask or Respirator

6.1.2.3. Goggles/Glasses/Face Shield

6.1.2.4. Gloves (1 or 2 pairs, based on need)

6.1.3. Proper Use of N95 Respirators

6.1.3.1. Proper donning and seal check of the N95 respirator, after performing hand sanitization and donning gown:

- Lift chin and place N95 respirator over nose and mouth
- Stretch the bottom strap over head and place on the back of neck; Insure that strap is on bare skin only; no loose hairs
- Place the top strap on the crown of head; insure that straps are not overlapping or crossed
- Check if mask is properly formed to face; insure no fold by running fingers along the edges of the mask
- Mold the metal nose strip to conform to the shape of your nose; do this by placing both middle fingers at bridge of nose and use index fingers to press along the edge of mask along from sides of nose into the cheeks creating a good seal; repeat pressing index fingers with pressure, especially alongside the nose
- Perform a seal check by placing your hands at the side of your face at eyebrow level without touching the mask. Exhale quickly once to check if air escapes the mask and hits the palms of the hands. If you feel leakage, readjust the fit of your mask and perform another seal check.
- Personnel assigned for N95 mandatory use: The use of N95 respirators is reserved for those personnel at the highest risk of exposure during the sampling process. For mobile units, personnel designated to wear N95 masks: Checkpoint 2 Admission/ Identifier confirming participant information with the car window down, Sample Station Swabber and Swabbing Assistant.

6.2. PPE Doffing:

6.2.1. PPE should be doffed every time the Hot Zone is exited or after a potentially hazardous exposure occurs.

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6.2.2. Order for Doffing PPE:

6.2.2.1. Remove and dispose of shoe covers at station. Walk to hotzone exit

6.2.2.2. Remove gloves:

- Grasp the outside of one glove at the wrist (do not touch bare skin).
- Peel the glove away from your body, pulling it inside out.
- Hold the glove you just removed in your gloved hand.
- Peel off the second glove by putting your fingers inside the glove at the top of your wrist.
- Turn the second glove inside out while pulling it away from your body, leaving the first glove inside the second.
- Dispose of gloves into the biohazard bag.
- **NOTE:** if 2 pairs of gloves are worn, take off only outer pair. Leave inner pair until all other PPE is removed.

6.2.2.3. Remove gown

- Assume front and sleeves are contaminated.
- Unfasten ties.
- Pull away from neck and shoulders, touching inside of gown only.
- Turn gown inside out.
- Fold or roll into a bundle and discard into biohazard bag.

6.2.2.4. Perform hand hygiene immediately after removing the gown

6.2.2.5. Remove goggles and/or face shield

- Assume the outside of goggles/face shield are contaminated.
- Remove by head band or ear pieces.
- Place in designated receptacle for cleaning or into biohazard bag.

6.2.2.6. Removing mask/respirator

- DO NOT TOUCH the front of the mask/respirator as it may be contaminated.
- Remove by pulling the bottom strap over the back of head followed by the top strap without touching the respirator.
- Discard mask/respirator and gloves in biohazard container

6.2.2.7. Remove inner gloves if 2 pairs of gloves were worn.

- Use same technique as described above.

6.2.2.8. Perform hand hygiene immediately after removing all PPE. Wash hands thoroughly with soap and water or use hand sanitizer.

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6.3. Precautions while operating in Hot Zones

- 6.3.1. Use of personal objects—including cellular phones, tablets, and laptops—is not permitted in the Hot Zone. Notes, papers, books, and other items taken into the Hot Zone should not be transferred out.
- 6.3.2. Food or drink is not permitted.
- 6.3.3. Hair should be tied back when feasible.
- 6.3.4. Do not stick head into the participant's vehicle.
- 6.3.5. Wipe down all surfaces (tables, pens etc) mid-shift and end of shift.
- 6.3.6. All PPE needs to be doffed and discarded in biohazard bin after use or at end of shift.

7. Recommended Personal Protective Equipment Guidelines

Roles may vary per site, but PPE should align with worker conditions and anticipated level of contact. 'Proposed PPE' should be followed to ensure safety of workers, according to updated CDC and WHO recommendations.

Nasopharyngeal swabs often generate a strong cough reflex which increases risk of exposure to secretions which warrants Standard/Contact/Droplet precautions. Respirators (along with hand hygiene, eye protection, gown and gloves) are useful for healthcare workers during discrete episodes of direct participant care that may result in close contact. Surgical masks are more appropriate for workers outside of direct participant care.

In Checkpoint 2 and Sample Station, Admission lead, Swabber and Swabber assistant MUST change gloves after each participant encounter.

Review **COVID-19 Staff Capacity Planning and Onsite Allocations** for recommendation per station.

Checkpoint	Role	Proposed PPE (Check CDC guidelines)
Checkpoint 1	Security (Law Enforcement Officer)	No PPE required
	Check-in Staff (MA or volunteer)	Surgical mask Glasses/Goggles Gloves

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Checkpoint	Role	Proposed PPE (Check CDC guidelines)
Checkpoint 2	Admission/Identifier (MA or higher)	N95 mask Glasses/Goggles Gown Gloves
	Admission Assistant/Requisition Finder (MA or trained volunteer) Proposed PPE if less than 6 feet from car	Surgical Mask Gown Gloves Glasses/Goggles
Sample Station	Swabber (RN or higher)	N95 mask Face Shield Gown Shoe covers Bouffant/surgical cap Gloves ¹ Sleeves ²
	Swabbing Assistant (MA or higher)	N95 mask Face Shield Gown Shoe covers Bouffant/surgical cap Gloves ¹ Sleeves ²
	Runner (Volunteer)	[Inside Hot Zone] Surgical mask Gloves
	Traffic Control (Volunteer)	[Inside Hot Zone] Surgical mask Gloves
	Waste Management ³	Surgical mask Gown Gloves Shoe Covers
Outside Hot Zone	Anyone	No PPE required

¹ For these roles 1 pair of gloves is the minimum necessary, however, gloves should be doffed after each participant/participant vehicle interaction and hands should be washed or sanitized. Another option is to don 2 pairs of gloves and doff outer pair of gloves after each participant/participant vehicle contact and replace with a fresh pair of gloves. No other PPE change is necessary unless exposure has occurred.

²Recommended if PPE on site exposes the skin.

³Waste Management can be performed by Healthcare Personnel, or other personnel who are trained in science or medical waste management and have been trained in **COVID-19 Medical Biohazard Waste Instruction**.

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8. Special Circumstances:

8.1. This document makes recommendations for PPE for drive-through sites. Staff may need more PPE depending on exposure to the Hot Zone. Please consult with your site Clinical Lead to ensure guidelines are suitable to your own environment, and modifying as appropriate.

8.2. Participant rolls down window before instructed:

If anyone inside the participant vehicle rolls down the window before instructed, any workers in the vicinity should step back 6 feet and instruct the participant to roll the window back up. At no point should there be any contact with the participant or anyone from the vehicle. If any accidental exposure has occurred, they should doff any affected PPE and don fresh PPE.

8.3. Participant exits car:

If anyone inside the participant vehicle exits the car, any workers in the vicinity should step back and maintain a 6 foot distance and instruct the participant to get back inside the vehicle. At no point should there be any contact with the participant or anyone from the vehicle. If any accidental exposure has occurred, they should doff any affected PPE and don fresh PPE.