



Correct use of N95 respirators/masks

Types of N95 respirators/masks

V-Flex



Cone-shaped



Duckbill



Indications to wear a N95 respirator/mask

Health-care worker whenever entering a room or caring of a patient with an airborne disease (aerosols smaller than 5 μ), e.g.

- Pulmonary tuberculosis (including MDR/XDR TB)
- Measles
- Varicella-zoster (Chicken Pox)
- Influenza & SARS-CoV-2 (cause of COVID-19) **ONLY required when performing aerosol producing procedures** (use surgical mask at other times) –
Oropharyngeal swabbing, tracheal intubation, non-invasive ventilation, tracheotomy, cardiopulmonary resuscitation, manual ventilation before intubation, bronchoscopy, open suctioning

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Seal checks:

A seal check conducted by the health worker wearing the respirator to determine if it fits properly around the face and nose. Seal check must be performed every time the respirator is worn. The seal check can either be a positive pressure or negative pressure check

Negative seal check:

- Coned shape respirator: Cup hands over respirator without excessive pressure. Breathe in sharply. A light collapse of the respirator should be felt with no air leaking in around the face-to-face piece seal.
- Duck-bill / V-flex type respirator: Breathe in sharply. The respirator should collapse inwards

Positive seal check:

- Coned shape respirator: Cup hands over respirator. Blow out. A build-up of air should be felt with no air leaking out around the face-to-face piece seal edges of the device.
- Duck-bill type respirator: Breathe out forcefully; the respirator should expand on the exhale.



Care and Storage of a N95 respirator/mask

- **For influenza and SARS-CoV-2 prevention** when the N95 respirator is being used for **aerosol risk exposures**, the respirator is not to be re-used, but is to be discarded in appropriate biohazard waste
- **For tuberculosis prevention** the N95 respirator can be reused. Reuse refers to using the same N95 respirator for multiple encounters with patients but removing it ('doffing') after each encounter., the respirator is stored between encounters to be put on again ('donned') prior to the next encounter with a patient. For tuberculosis prevention, CDC recommends that a respirator classified as disposable can be reused by the same worker as long as it remains **functional** and is used in accordance with local infection control procedures.
- If the respirator is to be reused it should be type-fitted to the face of one healthcare worker who uses it over a period of **up to one week** or until damp and/or mis- formed.
- The N95 respirator should be removed carefully using a paper towel to hold the N95 over the front, remove the elastic straps and placed in a paper (not plastic) bag, labelled with the health care worker's name, to avoid damage.
- Deterioration of respirator efficiency occurs with humidity, dirt and crushing.