







Personal Protective Equipment (PPE) to protect you from COVID-19

What to wear and when

Practise good hand hygiene at all times!

	COVID-19 POSITIVE OR SUSPECTED			
NON-CLINICAL AREAS	No specific PPE.	No specific PPE.		
 CONTACT PRECAUTIONS In clinical areas, more than two metres from the patient, eg ward rounds, outpatients. 	 Consider gloves. Consider waterproof apron. Consider fluid-resistant surgical mask. Yellow box 	No specific PPE.		
DROPLET PRECAUTIONS				
 Neuraxial anaesthesia. Peripheral nerve blocks. Field blocks. Local anaesthesia. All lines (iv, central, arterial). In theatre for non-aerosol generating procedures (AGP). During recovery more than 20 minutes after AGP. Ward rounds, outpatients when 	 Gloves.* Waterproof apron. Fluid-resistant surgical mask. Consider eye protection. Surgical gown if sterile procedure.	 Gloves.* Consider fluid-resistant surgical mask. Consider eye protection. Consider waterproof apron. 		
less than two metres from patient.	Amber box			
 AIRBORNE PRECAUTIONS Throughout confirmed COVID-19 cohort areas of ICU. In theatre and for 20 minutes after AGP** Respiratory AGPs are: Intubation, extubation Mask ventilation Supraglottic airway insertion, removal High flow nasal oxygen, non-invasive ventilation Awake flexible optical intubation, bronchoscopy Others.*** 	 Gloves.* Fluid-resistant, long-sleeve gown. Fit-tested, fit-checked FFP3 mask. Eye protection. Consider second pair of gloves. 	Surgical gown if sterile procedure.		
 Surgical AGP is surgery with high-speed devices, eg bone drills, pulsed lavage, airway ENT. 	 Surgical gown if sterile procedure. Red box 	Green box		

Note: The levels of protection are incremental: droplet precautions are also designed to prevent contact transmission; airborne precautions also to prevent droplet and contact transmission.

Other infection control policies may apply to non-COVID-19 infections: consult your infection control team.

^{*}Use sterile gloves only if the procedure requires it.

^{**}Assuming 2–5 air exchanges in this time: air is 86% clear after 2 and 99% after 5 air changes – typical values are 10–25 air exchanges per hour in ICU and theatre – check local results.

^{***}Including: tracheostomy, front-of-neck access, tracheal suction, dental drilling.









COMMON SCENARIOS		COVID-19 POSITIVE OR SUSPECTED				COVID-19 UNKNOWN			
		Induction or insertion	During Case (>20 min)	Airway removal	Recovery	Induction or insertion	During Case (>20 min)	Airway removal	Recovery
Lower segment Caesarean section	Category 4 under neuraxial block	Amber	Amber	N/A	Amber	Green	Green	N/A	Green
	Category 1 under neuraxial block	Amber	Amber	N/A	Amber	Green	Green	N/A	Green
	Under neuraxial block but very high risk of conversion to general anaesthesia (GA)	Amber	Red	N/A	Amber	Green	Green	N/A	Green
	If GA given	Red	Amber	Red	Amber	Green	Green	Green	Green
Fractured neck of femur	Spinal with or without sedation	Amber	Red	N/A	Amber	Green	Green	N/A	Green
Bag-mask-valve	At start, during or at end of GA	Red	Red	Red	Amber	Green	Green	Green	Green
GA + supraglottic airway		Red	Amber	Red	Amber	Green	Green	Green	Green
GA + tracheal tube		Red	Amber	Red	Amber	Green	Green	Green	Green
Accidental circuit disconnect	Disconnection on machine side of viral filter		Amber				Green		
	Disconnection on patient side of filter		Red				Green		
Nasogastric tube insertion		Red				Green			
Central venous pressure insertion		Amber				Green			
If surgery is aerosol- generating		Red	Red	Red	Amber	Green	Green	Green	Green