

## **Guidance for Schools K-12: Protection for school nurses, educators and staff members**

- Nurses or other staff attending to ill individuals who may have COVID should wear an N-95 mask, face shield, gown and gloves. Schools will have to provide this personal protective equipment.
- N-95 masks may be reused unless visibly soiled and should be placed in a paper bag between uses.
- Face shields may be cleaned with an approved disinfecting wipe. If caring for multiple sick individuals at the same time, the nurse or designated individual may keep his or her mask and face shield in place and change gowns (if there is sufficient supply) and gloves between patients.
- Minimize aerosol-generating procedures in schools. The most common aerosol generating procedure is use of nebulized medications for asthma. Nebulizers should only be used as a last resort. Families should obtain MDIs/spacers for children with asthma in place of nebulizers. Most school-aged children should be able to use a spacer. The only other aerosol-generating procedure that is likely to occur in school is airway suctioning (e.g. tracheostomy care).
- For these procedures, nurses or other designated individuals should put on N-95 masks, face shields, gloves and gown. Aerosol-generating procedures should preferably be done outdoors where possible in a private place to maintain confidentiality of the student.
- If not able to be done outdoors, these aerosol-generating procedures may be done in the sick room; however, this room must left unoccupied after the procedure with the door closed for three hours (assuming only two air exchanges per hour). If a portable HEPA air filtering unit can be placed in the room then the duration of time before it can be used again may be reduced to one hour.