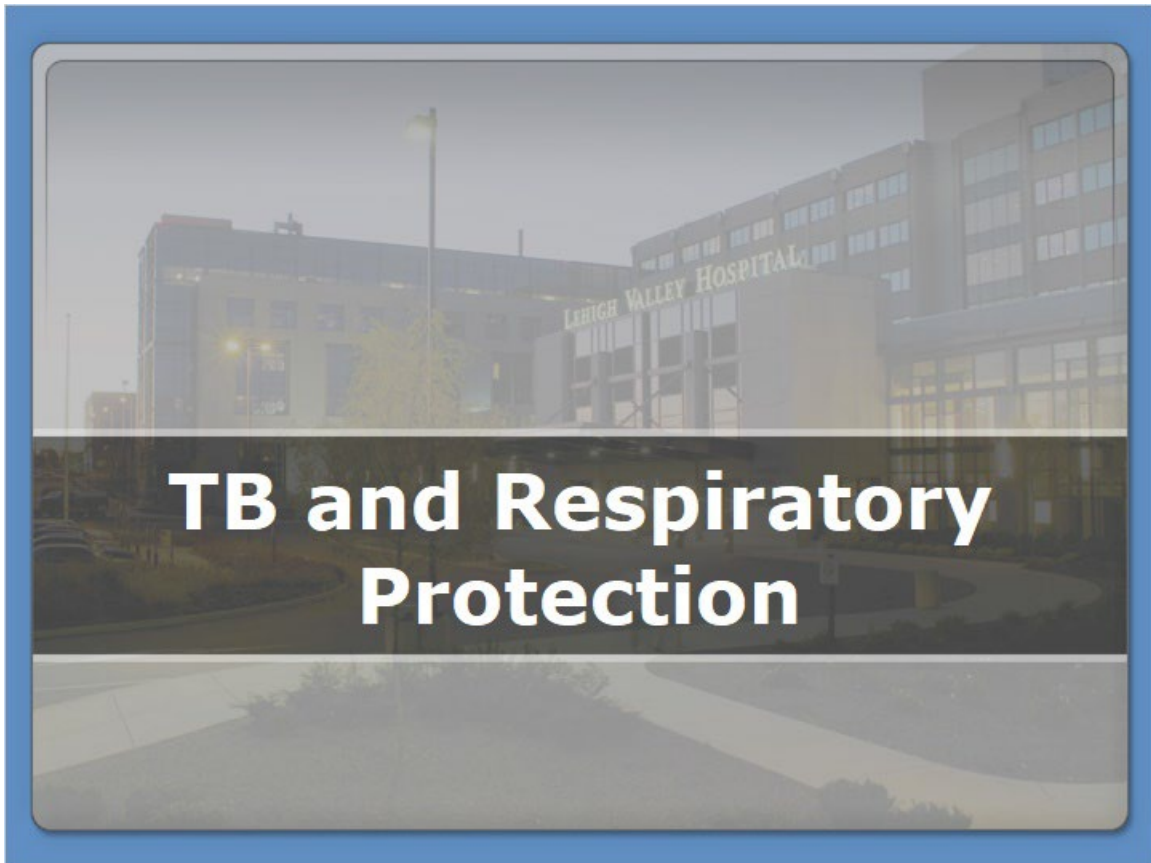


TB Respiratory

1. TB and Respiratory Protection

1.1 TB and Respiratory Protection



Notes:

Tuberculosis (TB) is a disease present throughout the United States. Lehigh Valley Health Network is concerned about your health and needs your help to prevent the spread of TB in the workplace.

Although the risk is low, your chances of getting infected with TB can be reduced by understanding the ideas presented in this training module.

1.2 Course Information

Course Information	
Course Title:	TB and Respiratory Protection
Regulations/Standards:	TB and Respiratory Protection
Approximate Time to Complete:	15 minutes
Intended Audience:	All LVHN Employed Staff
Technical Specifications:	Internet Explorer 11, Course Contains No Audio PLEASE REVIEW NOTES TAB FOR MORE COURSE INFORMATION
Date Revised:	May 2022
Subject Matter Experts:	Refer to the Resources tab for your site-specific Subject Matter Experts
Please call the I/S Support Center at 610-402-8303 with any technical issues.	

Notes:

This course fulfills the training requirements for Tuberculosis and Respiratory Protection. The course will take approximately 15 minutes to complete.

If you have any questions, please contact the appropriate number listed here. Remember, all technical issues related to the course or the eLearning System should be directed to the Technology Support Center at 610-402-8303.

1.3 Objectives

Upon completion of this training, you will be able to:

Demonstrate Knowledge

- Discuss the characteristics of TB
- Describe the treatment for TB
- Apply early identification methods
- Identify the five basic control methods

Notes:

Upon completion of this training, you should be able to:


- Discuss the characteristics of Pulmonary Tuberculosis, including how the disease is spread and the risk factors and symptoms associated with TB.
- Describe the treatment for patients with TB.
- Apply the early identification methods used to protect yourself and others from TB.
- Identify the five basic control methods used to prevent the spread of TB to others.

If you feel you have already mastered the content described in the course objectives and would like to demonstrate your knowledge, you may click the “Demonstrate Knowledge” button and move directly to the course test. You must earn a score of at least 80% on the test to successfully pass this course.

However, it is suggested that you review the content as it has been updated. To continue onto the course content, please select the next button located at the bottom of the screen.

1.4 Untitled Slide

Although there has been a steady decline in the number of persons with TB since the early 1990s, TB continues to be a problem in the United States. Click the Next button to find out more.



TB is still a problem in the United States!

- A total of 9,557 TB cases were reported in 2015 (a rate of 3.0 cases per 100,000 persons)

Notes:

Although your chances of contracting TB are low, you may be surprised at how prevalent cases of TB are. Click the Next button to find out how prevalent TB is.

1.5 Select all the valid reasons why exposure to TB still remains a concern to healthcare professionals in the United States.

(Multiple Response, 10 points, 1 attempt permitted)

Select all the valid reasons why exposure to TB still remains a concern to healthcare professionals in the United States.

There are multi-drug resistant types of TB (MDR TB)

There are extensively drug resistant types of TB (XDR TB)

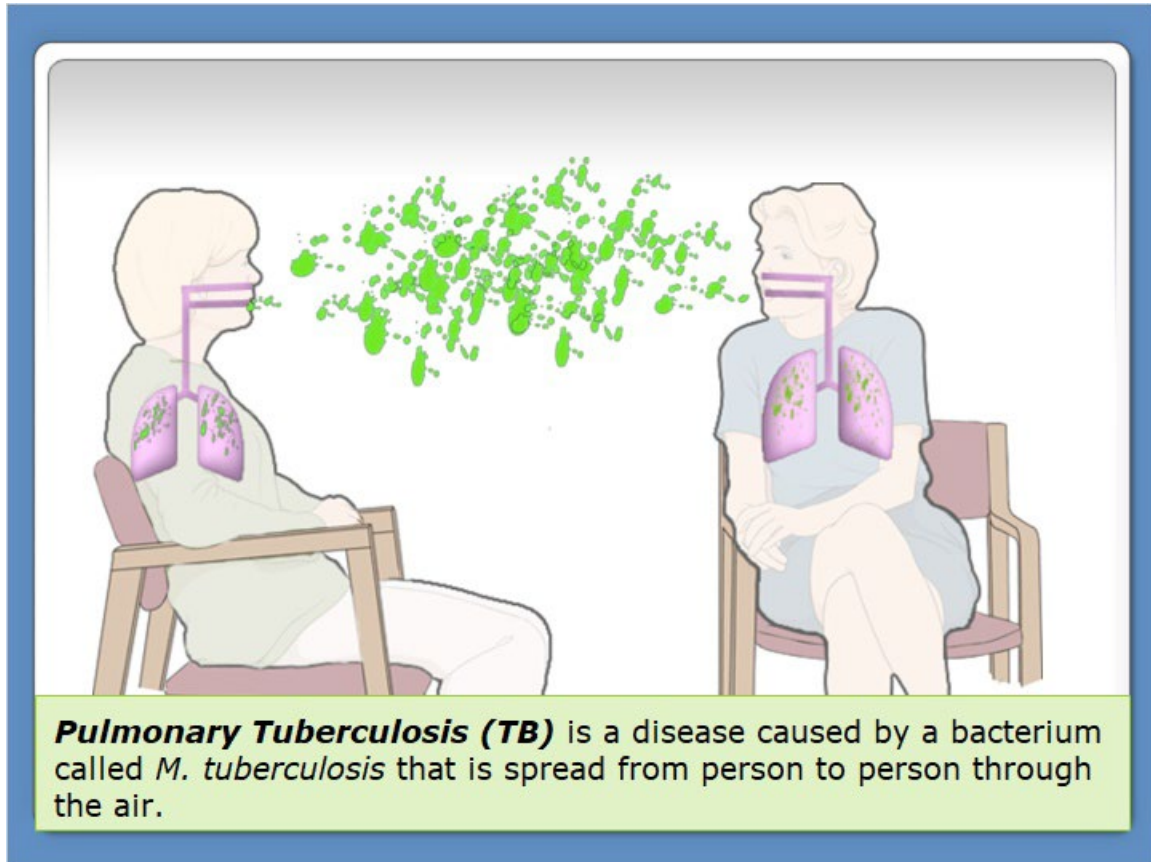
Racial and ethnic minority populations or foreign born individuals continue to account for large numbers of TB cases in the U.S.

Management of patients with comorbidities, such as HIV, diabetes, and other immunocompromising conditions, is difficult



That's right! These are all valid reasons why exposure to TB still remains a legitimate concern in healthcare settings.

1.6 What is TB?



Notes:

Pulmonary Tuberculosis (TB) is a disease caused by a bacterium called *M. tuberculosis* that is spread from person to person through the air.

When an individual is infected with active TB disease, tiny particles called droplet nuclei can be spread through coughing or sneezing. You may become infected by breathing in the air surrounding the person with active TB.

After the TB bacteria move through the air, they travel into the lungs. TB infection begins when enough bacteria reach the lungs and multiply.

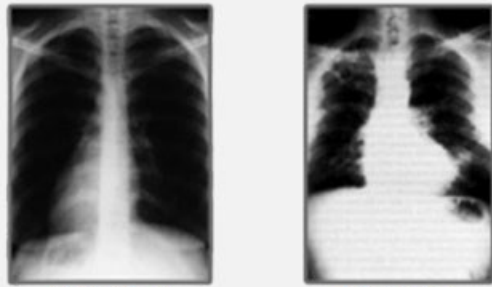
1.7 Inactive vs. Active TB

Inactive vs. Active TB

Inactive (Latent) TB Infection

Active TB Disease

What is the difference between Inactive and Active TB?



Inactive TB Infection *Active TB Disease*

There is a difference between Inactive (Latent) TB infection and Active TB Disease. Click on each tab to read the definitions of Inactive (Latent) TB Infection and Active TB Disease.

Notes:

It is important to understand that there is a difference between Inactive (Latent) TB Infection and Active TB Disease.

Everyday, we breathe in disease-producing bacteria. But, our immune systems work to prevent most diseases from ever developing. Click the buttons to read the definitions of Inactive (Latent) TB Infection and Active TB Disease.

Inactive (Latent) TB Infection - A person is considered to have an Inactive (Latent) TB Infection when they have a positive skin or blood test, but are not contagious. These individuals have no screening symptoms, but remain at risk for developing Active TB Disease.

Active TB Disease - Active TB Disease only develops when a person who has been exposed to TB is unable to fight off the disease. People with Active Pulmonary or Laryngeal TB Disease are contagious to others until they have received enough anti-tuberculosis medication.


Inactive TB (Slide Layer)

Inactive vs. Active TB

Inactive (Latent) TB Infection

Active TB Disease

Inactive (Latent) TB Infection



A person is considered to have an **Inactive (Latent) TB infection** when they have a positive skin or blood test, but are not contagious. These individuals have no screening symptoms, but remain at risk for developing Active TB Disease.


Active TB (Slide Layer)

Inactive vs. Active TB

Inactive (Latent) TB Infection

Active TB Disease

Active TB Disease



Active TB Disease only develops when a person who has been exposed to TB is unable to fight off the disease. People with Active Pulmonary or Laryngeal TB disease are contagious to others until they have received enough anti-tuberculosis medication.

1.8 Risk Factors

Risk Factors

Characteristics

Health Issues

Introduction

Some people develop TB disease soon after becoming infected (within weeks) before their immune system can fight the TB bacteria. Other people may get sick years later, when their immune system becomes weak for another reason.

Overall, about 5 to 10% of infected persons who do not receive treatment for latent TB infection will develop TB disease.

A variety of risk factors can increase your chances of becoming infected with TB.

Click on each tab to learn more about these risk factors.

Notes:

Introduction

Some people develop TB disease soon after becoming infected (within weeks) before their immune system can fight the TB bacteria. Other people may get sick years later, when their immune system becomes weak for another reason.

Overall, about 5 to 10% of infected persons who do not receive treatment for latent TB infection will develop TB disease.

A variety of risk factors can increase your chances of becoming infected with TB.

Click the Characteristics button and the Health Issues button to learn more about these risk factors.

Characteristics

- Persons with a higher rate of TB infection include:
- Close contacts of a person with infectious TB disease

- Persons who have immigrated from areas of the world with high rates of TB
- Children less than 5 years of age who have a positive TB test
- Groups with high rates of TB transmission, such as homeless persons, injection drug users, and persons with HIV infection
- Persons who work or reside with people who are at high risk for TB in facilities or institutions such as hospitals, homeless shelters, correctional facilities, nursing homes, and residential homes for those with HIV

Health Issues

If your body's defenses are down, you are more likely to get TB. The following are examples of medical conditions or problems which may weaken your body's defenses:

- HIV infection (the virus that causes AIDS)
- Substance abuse
- Silicosis
- Diabetes mellitus
- Severe kidney disease
- Low body weight
- Organ transplants
- Head and neck cancer
- Medical treatments such as corticosteroids or organ transplant
- Specialized treatment for rheumatoid arthritis or Crohn's disease

Characteristics (Slide Layer)

Risk Factors

Characteristics

Characteristics

Persons with a higher rate of TB infection include:

- Close contacts of a person with infectious TB disease
- Persons who have immigrated from areas of the world with high rates of TB
- Children less than 5 years of age who have a positive TB test
- Groups with high rates of TB transmission, such as homeless persons, injection drug users, and persons with HIV infection
- Persons who work or reside with people who are at high risk for TB in facilities or institutions such as hospitals, homeless shelters, correctional facilities, nursing homes, and residential homes for those with HIV

Risk Factors

Characteristics	Health Issues <p>If your body's defense are down, you are more likely to get TB. The following are examples of medical conditions or problems which may weaken your body's defenses:</p> <ul style="list-style-type: none">• HIV infection (the virus that causes AIDS)• Substance abuse• Silicosis• Diabetes mellitus• Severe kidney disease• Low body weight• Organ transplants• Head and neck cancer• Medical treatments such as corticosteroids or organ transplant• Specialized treatment for rheumatoid arthritis or Crohn's disease
Health Issues	

1.9 Symptoms of TB

Symptoms of TB

If you are infected with Active TB Disease, you may have some or all of the following symptoms:

- Fatigue
- Fever, night sweats
- Weight loss
- Cough
- Chest pain
- Blood-tinged sputum
- Chest X-ray changes

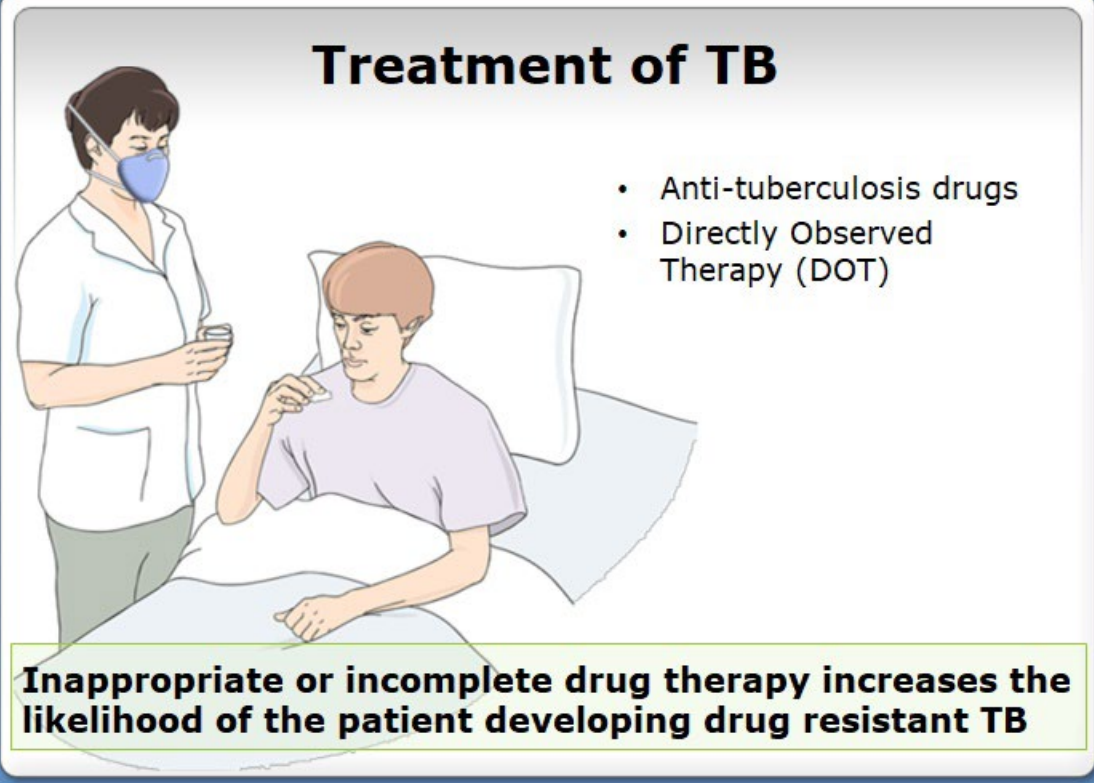


Notes:

If you are infected with Active TB Disease, you may have some or all of the following symptoms:

- Fatigue
- Fever, night sweats
- Weight loss
- Cough
- Chest pain
- Blood-tinged sputum
- Chest X-ray changes

1.10 Treatment of TB



Treatment of TB

- Anti-tuberculosis drugs
- Directly Observed Therapy (DOT)

Inappropriate or incomplete drug therapy increases the likelihood of the patient developing drug resistant TB

Notes:

Patients with Active TB Disease are treated with an appropriate combination of anti-tuberculosis drugs. Initial therapy includes daily doses of several anti-tuberculosis medications.

Drug sensitivity tests are performed on all tuberculosis patients. After several weeks, the results are available and the drug regime should be adjusted accordingly.

Patients must be directly observed while taking anti-tuberculosis drugs. This is referred to as Directly Observed Therapy, or DOT. It is important to observe patients while taking these medications because inappropriate or incomplete drug therapy increases the likelihood of the patient developing a drug resistant strain of TB.

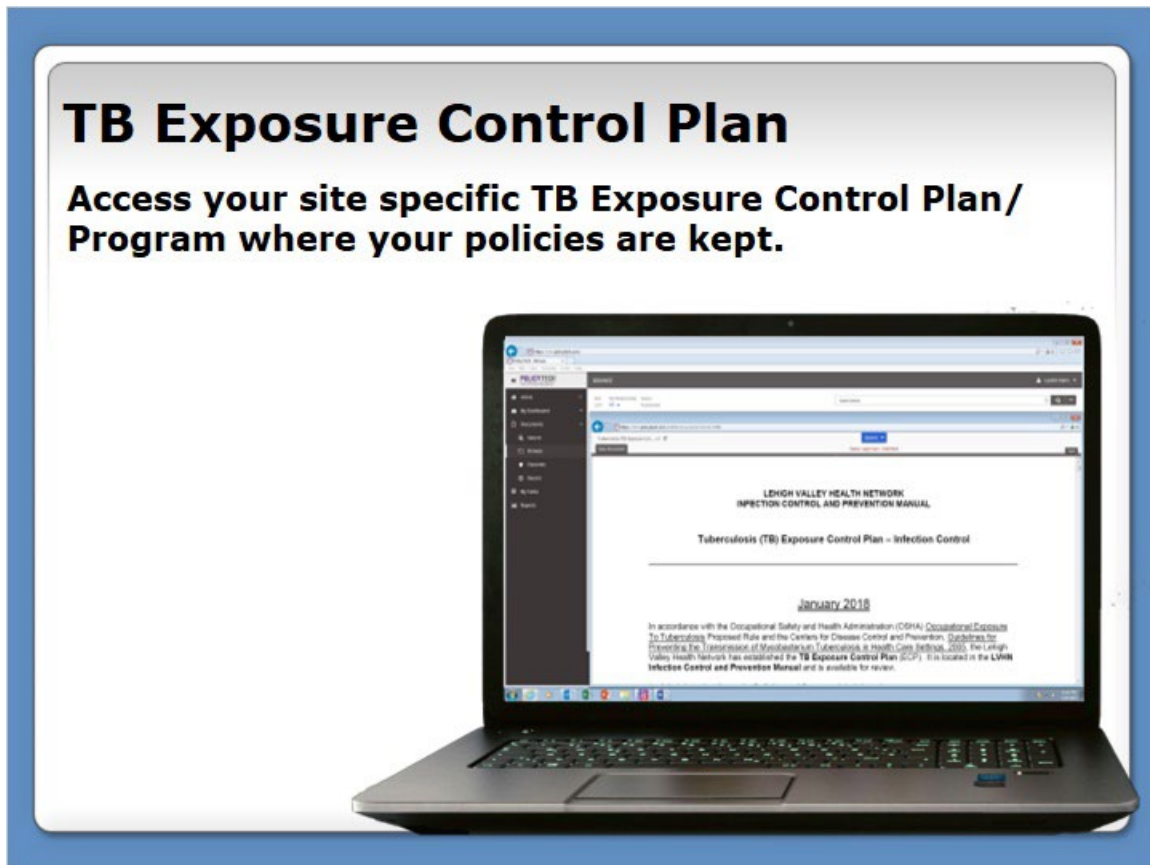
1.11 Protecting Yourself and Others

The infographic features the Lehigh Valley Health Network logo at the top center. Below the logo, the text reads "LVHN is committed to protecting the health and safety of:". Underneath this text are three framed illustrations: a woman wearing a blue surgical mask, a patient in a hospital bed wearing a blue surgical mask, and a young boy and a woman standing together. Below each illustration is a bolded label: "Employees", "Patients", and "Visitors".

Notes:

LVHN is committed to protecting the health and safety of all employees, patients and visitors since TB is an airborne disease that can be transmitted from one person to another, it is important to practice appropriate infection control procedures to protect yourself and others from getting TB. The following section will provide you with more detail on how you can protect yourself and others from TB infection.

1.12 TB Exposure Control Plan



Notes:

Lehigh Valley Health Network has developed a TB Exposure Control Plan for your protection. You can view a complete copy of this plan wherever your site specific policies are kept.

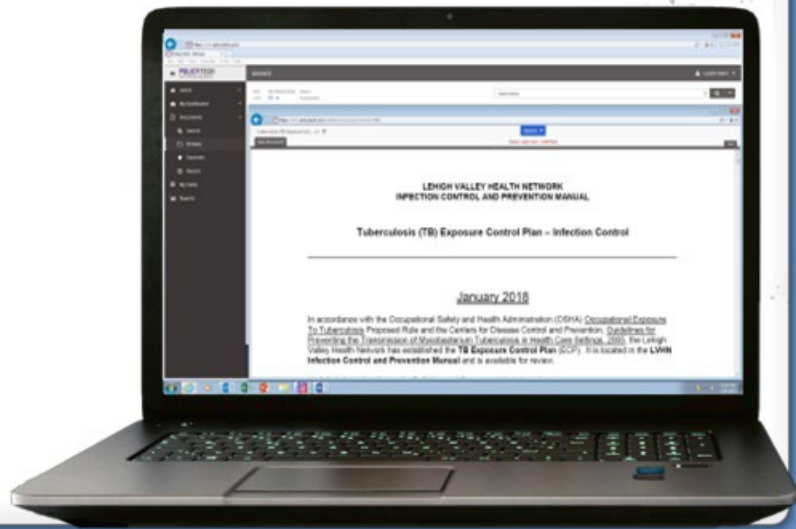
The TB Exposure Control Plan includes information, such as:

- TB screening procedures
- Identification of individuals with TB
- Procedures for the care of patients with TB
- Respiratory Protection Program

Untitled Layer 1 (Slide Layer)

TB Exposure Control Plan

**Access your site specific TB Exposure Control Plan/
Program where your policies are kept.**



1.13 Key Principles for Protection

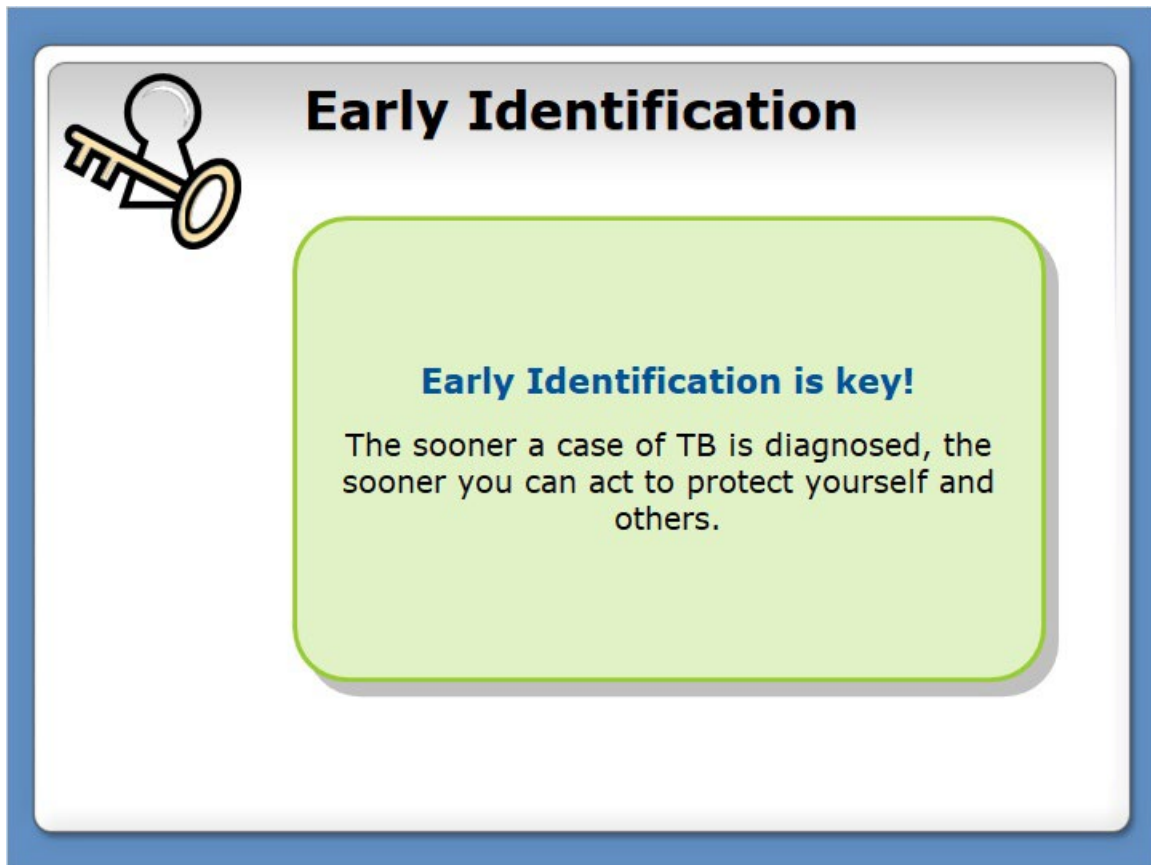



Notes:

There are two key principles to protect yourself and others from TB infections; early identification and basic control methods.

The next section will provide more detail on each of the key principles.

1.14 Early Identification

A graphic with a blue border. On the left is an icon of a key with a person silhouette. To the right is the title "Early Identification". Below the title is a light green rounded rectangle containing the text "Early Identification is key!" and "The sooner a case of TB is diagnosed, the sooner you can act to protect yourself and others."



Early Identification

Early Identification is key!

The sooner a case of TB is diagnosed, the sooner you can act to protect yourself and others.

Notes:

Early identification is key! The sooner a case of TB is diagnosed, the sooner you can act to protect yourself and others.


People with Active TB Disease will not always be aware that they have been infected by the disease. It is important to follow the screening procedures to identify infected persons as soon as possible.

1.15 Employee TB Screening

Employee TB Screening

TB Screenings:

- Performed by Employee Health Services
- Protect the health of our employees and our patients
- Ensure early identification
- Are a condition of employment on hire
- Occur after unprotected exposure to a patient with active TB

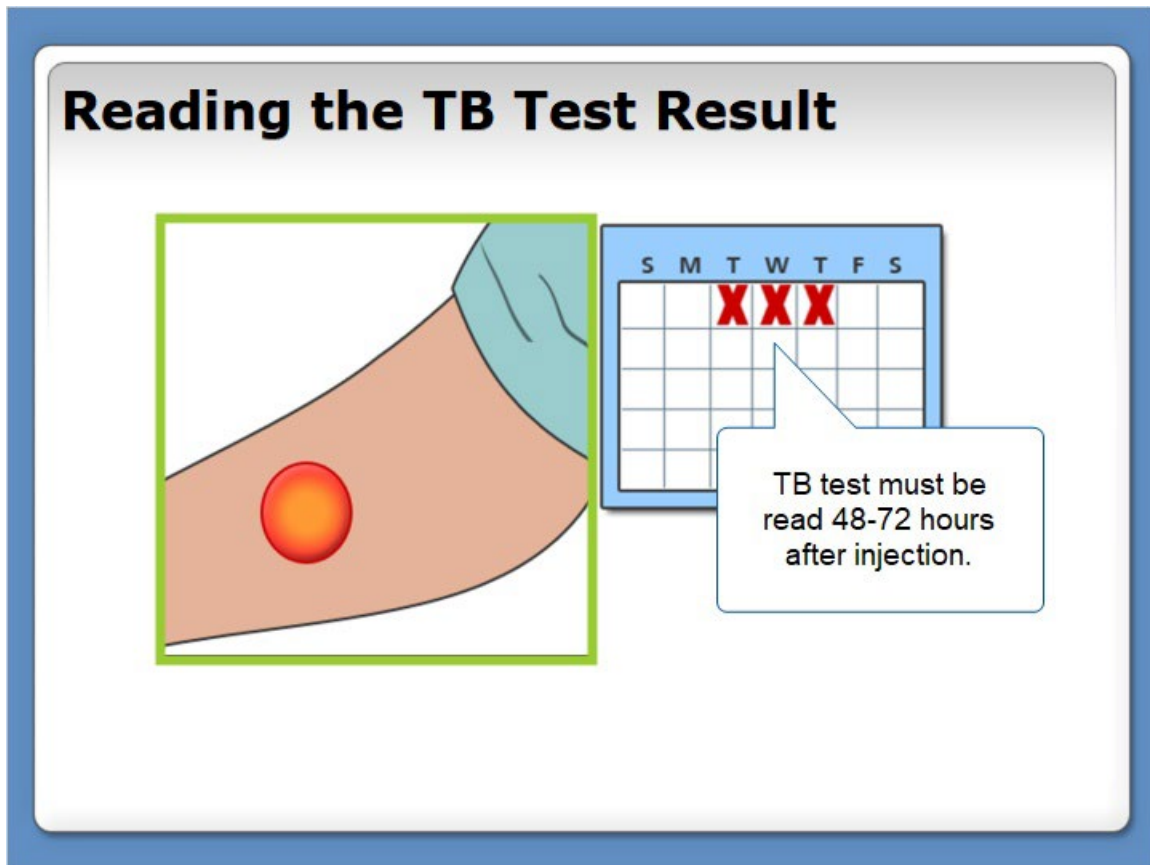
An illustration showing a healthcare worker in a light blue uniform performing a tuberculin skin test on an employee. The worker is on the left, holding a small vial and a syringe, and is injecting the substance into the employee's arm. The employee is on the right, wearing a light blue V-neck shirt, and is looking towards the worker. The background is a light gray gradient.

Notes:

Employee Health Services performs Tuberculosis screenings for employees. The screenings protect the health of our employees and our patients. This testing helps to ensure early identification of changes in TB status and provides those infected with quick medical treatment. Because of the health impacts associated with TB, these screenings are a condition of employment on hire at LVHN.

Screening is performed by one of two methods; Mantoux Tuberculin Skin Tests or Quantiferon TB Gold Test. All employees are first screened for TB before starting work at LVHN. Employees are also screened following unprotected exposure to a patient with active TB.

1.16 Reading the TB Test Result



Notes:

The TB skin test must be read 48-72 hours after injection. The results must be read by an employee health nurse or other designee.

A negative test result shows no visible swelling or discoloration after 72 hours.

This is an example of a **potentially** positive skin test. Redness alone does not indicate a positive test, a skin test must always be read by a trained professional such as an employee health practitioner. Staff properly identified with a positive skin test may be monitored or put on medication.

1.17 Basic Control Methods

Basic Control Methods

Follow the 5 P's to prevent the spread of TB:

Patient screening

Patient hygiene

Place airborne sign on door

Proper room assignment

Properly fitting respirators

Notes:

Once someone has been identified as being infected with active TB disease, how can you prevent the spread of the disease to others?

Following some basic control methods will help prevent the spread of TB. To help you remember, think of the 5 P's:

- Patient TB screening
- Patient hygiene
- Place airborne isolation sign on door
- Proper patient room assignment
- Properly fitting respirators

1.18 Patient Screening Tool

Patient Screening Tool


PLEASE HELP US SERVE YOU

Please notify nurse or receptionist IMMEDIATELY if you answer "YES" to two or more of the following questions

1. Have you been sick with a cough for more than 2 weeks?
2. Have you had contact with anyone with Tuberculosis or Consumption?
3. Have you yourself ever had Tuberculosis or Consumption?
4. Do you have night sweats?
5. Do you cough up blood?
6. Have you lost weight recently for no reason?

Thank you

This is an example of the patient screening tool. The screening method may vary by location.



Notes:

Screening tools have been developed for use throughout LVHN to help identify patients that may have TB. This screening tool is another form of early identification. The other control methods will not be effective if infected patients are not identified early. Screening tools may vary by network location.

Once Active TB Disease is diagnosed in a patient, appropriate therapy should begin immediately. Active TB is identified in patients through history, physical exam, chest x-ray, Tuberculin skin test or Quantiferon Gold Test and bacteriological examination.

1.19 Patient Hygiene


Patient Hygiene

Respiratory Hygiene and Cough Etiquette

Cough Etiquette: Cover your mouth with a tissue when you cough or sneeze

Hand Hygiene

Wash frequently with soap and water or an alcohol based sanitizer

An illustration within a blue-bordered box. The top part shows a woman with brown hair, wearing a pink shirt, coughing into a white tissue held over her mouth. The bottom part shows a pair of hands being washed with white soap suds in a white sink under a running faucet.

Notes:

Remember that TB is a disease that is spread through the air. To prevent the spread of TB, it is important to explain “Respiratory Hygiene and Cough Etiquette” to any patients whose illnesses are associated with airborne transmission.

Cough Etiquette simply means instructing your patient to cover their mouth with a tissue when they cough or sneeze. Special Cough Etiquette stations are located in common waiting areas. These organizers hold tissues, masks, hand sanitizers, and signs for cough etiquette. For more information, click the Resources tab above to view the “Cover Your Cough” poster.

Another important hygiene rule to follow is to wash your hands frequently. Instruct your patients to properly wash with soap and water or an alcohol based hand sanitizer.

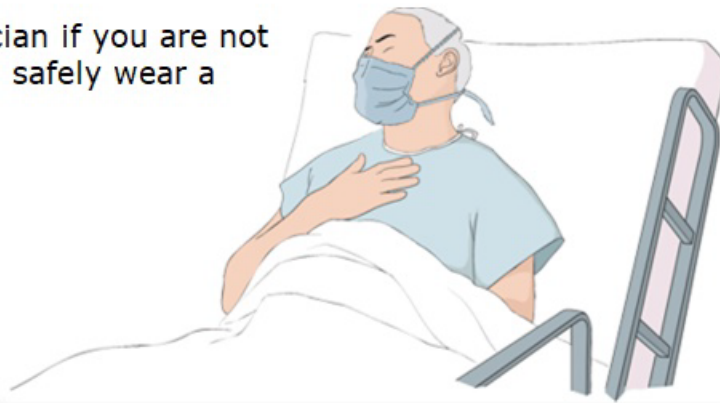
1.20 Surgical Masks

Surgical Masks

Patients with diseases like TB should be encouraged to wear surgical masks.

Patients with suspected or confirmed TB Disease should always wear a surgical mask while outside of the designated isolation room.

Speak with a physician if you are not sure the patient can safely wear a surgical mask.



Notes:

Patients infected with diseases transmitted through the air, like TB, should be encouraged to wear surgical masks. Surgical masks limit the number of contaminated bacteria released into the air by the patient.

Patients with suspected or confirmed active TB Disease should always wear a surgical mask (not a respirator/N-95 mask) while outside of designated isolation rooms. This includes waiting rooms, treatment rooms, and during transport or ambulation. Visitors will be instructed on the use of the N-95 respirator mask worn by the healthcare workers.


Please note that not all patients will be able to tolerate wearing a surgical mask. Speak with a physician if you are not sure if the patient can safely wear a surgical mask.

1.21 Place an Airborne Isolation Sign

Print this sign in Resources!

Place an Airborne Isolation Sign

Signs may appear different at each location. Click on the Resources tab to obtain copies of each site's Airborne Precautions sign.



The sign is pink with a white border. At the top left is a red octagonal 'STOP' sign. To its right, the text reads 'Airborne Precautions' in bold, followed by 'In addition to Standard Precautions'. Below this, a line of text says '*Visitors: See nurse before entering.' The sign is divided into three horizontal sections. The first section contains an icon of hands being washed under a faucet and the text 'Perform hand hygiene when entering and exiting the room.' The second section contains two icons: one of a person wearing a respirator mask labeled 'N95' and another of a person wearing a full-body protective suit. To the right of these icons is the text: '• Wear N95 Respirator or PAPR. • Discard N95 after each use.' The third section contains a list of instructions: '• Close patient/anteroom doors. • Alarm ON. • Patient to wear a surgical mask during transport.' At the bottom of the sign, it says 'Questions? Call Infection Control & Prevention.' and includes the Lehigh Valley Health Network logo.

IC-42
Rev. 3/13

Lehigh Valley Health Network


Notes:

Place an Airborne Isolation Sign on the door for patients who have suspected or confirmed TB. Place this sign on the door or outside the room immediately to alert staff to use special precautions.

1.22 Proper Room Assignment

Proper Room Assignment

1. The door to the precaution or isolation room must be kept closed
2. An airborne precaution sign must be placed on the door or outside the room
3. Airborne precautions should be discontinued only when the patient is on effective therapy, is clinically improving, and has had a negative sputum exam for 3 days in a row.



The illustration shows a person with short blonde hair, wearing a blue short-sleeved shirt, standing in profile facing a light brown door. The person's right hand is on the door handle, and their left hand is raised towards a pink and white sign posted on the door. The sign is titled 'STOP Airborne Precautions' and contains several instructions and icons: 'Wash hands thoroughly at entry', 'Wear N95 respirator or higher level of protection', 'Wear gown and gloves', 'Wear shoe covers and cap', 'Wear face shield or goggles', 'Wash hands with water and alcohol-based hand sanitizer', and 'Wear mask at all times'. The sign also features a 'STOP' sign icon and a '4' in a circle.

Notes:

Proper placement of patients with suspected or confirmed TB will help to prevent exposure to others. These patients should be placed in a room with negative air flow. LVHN has numerous airborne isolation rooms that are designated to safely house patients on airborne precautions.

It is important to remember the following points for patients who are on airborne precautions or in an isolation room:

1. The door to the precaution or isolation room must be kept closed.
2. An airborne precaution sign must be placed on the door or outside the room.
3. Airborne precautions should be discontinued only when the patient is on effective therapy, is clinically improving, and has had a negative sputum exam for tubercule bacilli for three days in a row. Precautions are discontinued on a case by case basis at the physician's discretion.

1.23 Properly Fitting Respirators

Properly Fitting Respirators

- Medical Clearance
- Training Requirement
- Proper Fit
- 3M Application Guidance
- Periodic Medical Evaluation

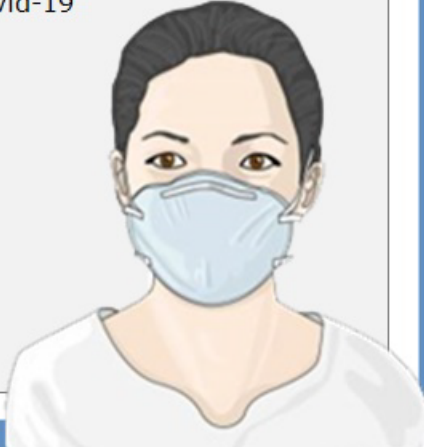
Introduction

Respiratory protection is required to help protect you from diseases spread through airborne contaminants such as:

- TB
- Novel viruses, such as Covid-19
- Chicken Pox
- Measles

“N-95 respirators” are the primary type of respiratory protection used at LVHN.

These are requirements for using respiratory protection. Click each button to learn more.



Notes:

Patients infected with illnesses such as TB, Chickenpox, and other emerging infectious diseases, such as Covid-19, can spread bacteria through the air. Respiratory protection is required to help protect you from diseases spread through airborne contaminants.

“N-95 respirators” are the primary type of respiratory protection used at LVHN.

There are requirements for using respiratory protection. Click each button to learn more.

Properly Fitting Respirators

Medical Clearance

Employees must receive medical clearance to use a respirator from LVHN Employee Health Services

Some people have medical conditions that may prevent them from safely using respiratory protection. Examples of conditions that may cause problems when using a respirator are asthma, heart disease, and claustrophobia.

If your job requires that you wear a respirator, you must first complete an "OSHA Respirator Medical Evaluation Questionnaire". This is done when you are hired for or transfer into a position that may require you to wear a respirator. LVHN Employee Health Services will decide whether or not you are permitted to use a respirator.

If you experience any difficulty when wearing a respirator, promptly report the condition to Employee Health Services.

Medical Clearance

Training Requirement

Proper Fit

3M Application Guidance

Periodic Medical Evaluation

Properly Fitting Respirators

Medical
Clearance

Training
Requirement

Proper Fit

3M
Application
Guidance

Periodic
Medical
Evaluation

Training Requirement

Federal law requires that employees who must use respiratory protection receive training. Employees are required to take training prior to wearing a respirator. After that, employees must receive training each year.

This training module meets the annual training requirement. N-95 users also receive hands-on respiratory protection training at their mandatory annual fit test.



Properly Fitting Respirators

Medical
Clearance

Training
Requirement

Proper Fit

3M
Application
Guidance

Periodic
Medical
Evaluation

Proper Fit

Respirators only provide protection when they are properly fitted to the individual. For this reason, the government requires that all personnel permitted to use N-95 respirators receive an initial fit test. Employees must be properly fitted before they are assigned tasks using N-95's. In addition, annual fit tests may be required to determine if the same type of mask provides adequate protection.



During fit tests and hands-on training, you will learn how to properly wear a respirator. You will also learn how to perform a user check. Perform a user check each time you wear a respirator to ensure you have a good fit.

Properly Fitting Respirators

- Medical Clearance
- Training Requirement
- Proper Fit
- 3M Application Guidance
- Periodic Medical Evaluation

Periodic Medical Evaluation

Periodic medical evaluation is also required every two years. This information is kept confidential and is directly routed to employee health services to be kept in your employee medical record.

You will be prompted to complete the medical questionnaire every two years however, you should contact employee health immediately when:

- You have any difficulty when wearing a respirator (shortness of breath, panic attack, light-headedness).
- The length of time or frequency you need to wear the respirator increases significantly.
- You develop any significant medical problems or symptoms that may limit your ability to wear a respirator.

3M (Slide Layer)

Print this sign in Resources!

Properly Fitting Respirators

Medical Clearance

Training Requirement

Proper Fit

3M Application Guidance

Periodic Medical Evaluation

Helping You Wear it Right

3M™ Health Care Particulate Respirator and Surgical Masks, 1860/1860S

Application



1 Cup the respirator in your hand with the nosepiece at fingertips, allowing the head straps to hang freely below hand.



2 Position the respirator under your chin with the nosepiece up.



3 While holding the respirator in place, pull the top strap over your head so it rests high on the back of your head.



4 While continuing to hold the respirator firmly in place, pull the bottom strap over your head and position it around your neck, below your ears. Untwist the straps. Position the respirator low on your nose.




5 Using both hands, mold the nosepiece to the shape of your nose by pushing inward while moving your fingertips down both sides of the nosepiece.
Note: Always use two hands when molding nosepiece. Pinching with one hand may result in improper fit and less effective respirator performance.

PERFORM A USER SEAL CHECK



6 The respirator must be checked before each use. To perform the user seal check, place both hands completely over the respirator, being careful not to disturb the position, and inhale sharply. If air leaks around your nose, adjust the nosepiece as described in step 5. If air leaks at respirator edges, adjust the straps back along the sides of your head. Perform seal check again if an adjustment is made. If you cannot achieve a proper fit, see your supervisor. Do not enter areas requiring respirator use.

Removal



1 Without touching the respirator, slowly lift the bottom strap from around your neck up and over your head.



2 Lift off the top strap. Do not touch the respirator.



3 Show or discard according to your facility's infection control policy.

3M

WARNING
This respirator helps protect against certain particulate contaminants, but does not eliminate exposure to or risk of contracting disease or infection. Misuse may result in sickness or death. For proper use, see your supervisor or user instructions, or call 3M Health Care Respirator at 1-800-338-3927. In Canada, call 3M Respirator at 1-800-363-7371.

**Infection Prevention Division
3M Health Care**
3510 Company Avenue
St. Paul, MN 55144-1000
U.S.A.
1-800-338-3927
www.3m.com/infectionprevention

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79-2009-0022-1

1.24 Respiratory Protection

Respiratory Protection

- Always wear the same model, brand, and size respirator that you wore during fit testing.
- Never share your respirator.
- Perform hand hygiene before putting on the respirator and after removing it.
- Always perform a user seal check after putting on your respirator.
- Reuse the respirator per current policy.
- Replace the respirator during use if it becomes:
 - Wet, contaminated with blood or body fluids
 - Damaged or distorted in shape
 - Difficult to breath through



Notes:

Always wear the same model, brand, and size respirator that you wore during fit testing. Failure to do so could reduce the level of protection provided by the respirator. Never share your respirator. N-95's are only intended to be used by one person. Perform hand hygiene before putting on the respirator and after removing it. Always perform a user seal check after putting on your respirator. Reuse the respirator per current policy. Replace the respirator during use if it becomes:

- Wet, contaminated with blood or body fluids
- Damaged or distorted in shape
- Difficult to breathe through

1.25 Powered Air Purifying Respirator (PAPR)

Powered Air Purifying Respirator (PAPR)



If you are unable to wear a N-95 Respirator, you must wear a PAPR.

After Each Use:

1. Disinfect
 - Air Filter Unit & Belt
 - Breathing Tube
 - Hood
2. Store Carefully
3. Do Not Share Hoods

Notes:

Employees who are unable to be fitted to wear a N-95 Respirator are trained in the use of the Powered Air Purifying Respirator (PAPR).

When using a PAPR you must remove the hood after use, disinfect, and store in a safe place. Never share your hood. Disinfect the air filter unit & belt, breathing tube, and hood after each use.

1.26 Important Warning

A graphic with a blue border containing a white box with a grey gradient background. Inside the white box is a green octagonal warning sign with a white border and a drop shadow. The sign contains the text: **Important Warning**, **WARNING!**, N-95 Respirators do not provide protection against chemical vapors. If protection from chemicals is required, contact your site's Respiratory Program Manager: LV Region: 610-969-4488, LVH-Schuylkill: 570-621-5025, LVH-Hazleton: 570-501-4258, LVH-Pocono: 570-422-8358.

Important Warning

WARNING!

N-95 Respirators do not provide protection against chemical vapors.

If protection from chemicals is required, contact your site's Respiratory Program Manager:

- LV Region: 610-969-4488
- LVH-Schuylkill: 570-621-5025
- LVH-Hazleton: 570-501-4258
- LVH-Pocono: 570-422-8358

Notes:

N-95 Respirators do not provide protection against chemical vapors. Never assume an N-95 will provide any protection against chemical odors, gases, or vapors.

If protection from chemicals is required, contact your site's Respiratory Program Manager for specific information.

1.27 Contact Information

Contact Information

Print this slide in Resources!

Questions? Need additional information?


Lehigh Valley:
Employee Health: 610-402-8869
Infection Control: 610-402-8999, request Infection Control
Safety Department: 610-969-4488

LVH-Dickson City:
Employee Health: 570-476-3779
Infection Control: 610-681-8080, option 5, extension 28026

LVH-H:
Employee Health: 570-501-4788
Infection Control: 570-501-4073

LVH-P:
Employee Health: 570-476-3779
Infection Control: 570-476-3692
Respiratory Program: 570-422-8358

LVH-S:
Employee Health: 570-621-4351
Infection Control: 570-621-4360
Respiratory Program: 570-621-5025



Notes:

If you have any questions about respiratory protection, please contact the Respiratory Protection Program, the Safety department, or Employee Health.