Personal Protective Equipment (PPE) for suspected high consequence infectious diseases



How to put on PPE (donning).

This PPE must only be used by staff trained and assessed as competent. The products shown are for illustrative purposes only.

- before putting on PPE, ensure you are hydrated, have been to the toilet if needed and feel well to enter the patient room
- if necessary, change into scrubs. Tie long hair back. Remove any jewellery/ ID badges/ lanyards
- collect all the PPE components and take to the area where PPE is put on
- perform hand hygiene and cover any cuts, abrasions or breaks in skin with a waterproof dressing
- PPE should be put on with a buddy present.

Step 1

- Put on wellington boots, half to one size bigger than your normal shoe size. Use a new pair of boots for each entry.
- Used boots should remain in bins until HCID results are known. Boots can be reused prior to results, if decontaminated as described in the doffing process.



Step 4

 Put on inner pair of gloves standard non-sterile, nitrile, short-length gloves.



Step 2

 Put on your disposable FFP3 respirator and check for fit. This MUST be the mask that you are fit tested to. If you have not been fit tested, you MUST NOT enter the patient's room.



Step 5

- Put on the long, reinforced gown. Do not use the inside tie.
- Lightly secure the Velcro fastening at the back of the neck— light enough to allow easy removal, but ensuring the gown will remain closed.
- Tie the gown at the side and ensure the gown cuffs fully overlap the inner pair of gloves.



Step 3

 Put on the hood. Check the fit around the face and jaw (no gaps) and ensure a good overlap is achieved with the mask.



Step 6

- Check for sufficient overlap between the top of the boot and the bottom of the gown: 10-15 cm.
- If too long, trim the gown so it is not a trip hazard. If less than 10cm overlap achieved, check if a longer gown is available.
- If unable to achieve 10 cm overlap, do not continue—inform your senior nurse/ doctor.



Step 7

 Put on middle pair of gloves—these are long cuffed (mid-length) non-sterile gloves and should fully overlap the cuff of the gown.



Step 11

- Put on visor and ensure the band of the visor overlaps with the hood, with no skin showing.
- Check the visor shield overlaps with the sides of the hood, and there is no skin exposed round the jaw line.



Step 8

 Tape the middle pair of gloves to the gown using 4 strips of microporous tape placed lengthways.



Step 12

- Put on outer pair of gloves—standard short gloves for clinical staff.
- If a sterile procedure is to be performed, replace the nitrile gloves with sterile gloves in the patient's room at the time of the task.
- For cleaning tasks, heavy duty style gloves may be donned instead of nitrile gloves.



Step 9

 Take the long length, thick plastic apron. Break the head loop where it usually sits at the back of the neck.



Step 13

- The buddy should run through each step to check all items are in place.
- The time should be written on the shoulder once all checks have been completed.
- If any gaps are noticed, these must be addressed. If unable to be corrected, inform your senior and **do not** enter the patient room until advised it is safe to do so.
- After entering the patient room, remain vigilant of PPE integrity for yourself and any other staff members.
- In the event of a high exposure episode e.g. projectile vomiting, or if there is any concern about PPE integrity, leave the room at the earliest opportunity and inform your buddy prior to doffing.



Step 10

- Put on the apron, tying at the top behind the neck, and bottom around the waist.
- A 'high fit' should be achieved, with the apron high up over the chest area.



