

## Special Pathogen L1 Personal Protective Equipment Donning and Doffing Checklist

### Level 1 DONNING CHECKLIST

Step #	Task	Criteria	Completed
1.	Gather PPE in proper sizes	<ul style="list-style-type: none"> <li>Surgical gown</li> <li>N95 respirator mask</li> <li>Nitrile gloves, extended cuff (2 pr.)</li> <li>Face shield</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Prepare to don PPE	<ul style="list-style-type: none"> <li>Trained observer present with checklist</li> <li>OUTSIDE of the patient's room</li> <li>Remove watches, jewelry, and dangling items that could interfere with integrity of PPE</li> <li>Secure eyeglasses with a tie</li> <li>Hydrate and attend to personal hygiene</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Inspect PPE	<ul style="list-style-type: none"> <li>Inspect PPE for serviceability (e.g., not torn or ripped) and proper size</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Perform hand hygiene	<ul style="list-style-type: none"> <li>Perform hand hygiene with alcohol-based hand sanitizer</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Don nitrile gloves (inner)	<ul style="list-style-type: none"> <li>Don nitrile inner gloves</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Don surgical gown	<ul style="list-style-type: none"> <li>Fully covers torso from neck to knees; arms to end of wrists</li> <li>Fastens at the back of neck; ties at waist</li> <li>Do not tie inside ties</li> <li>Ensures no trip hazard exists</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Don N95 respirator	<ul style="list-style-type: none"> <li>Don N95 mask and check for seal</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Don nitrile gloves (outer)	<ul style="list-style-type: none"> <li>Extends to cover the sleeves or cuffs of the gown</li> <li>Tuck excess material at sleeve into cuff</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.	Don face shield	<ul style="list-style-type: none"> <li>Positions shield above eyebrows and mid-forehead to cover eyes</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
10.	Inspection	<ul style="list-style-type: none"> <li>Extends arms and verifies integrity of PPE with observer:               <ul style="list-style-type: none"> <li>Bends at waist</li> <li>Squats and returns to standing position</li> <li>Slowly turns in circle for final inspection</li> </ul> </li> <li>Observer to mark suit with wearer's name and time donned</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Colored steps indicate location: **Red** = in patient room | **Yellow** = In designated decontamination area | **Green** = In cold/clean zone outside decontamination area  
 Reference: Healthcare providers in the U.S. evaluating PUIs for Ebola who are clinically stable AND do not have bleeding, vomiting, or diarrhea. Accessed online at <https://www.cdc.gov/vhf/ebola/healthcare-us/ppe/guidance-clinically-stable-puis.html>; Accessed on 3/30/2018

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11.	Reminder	<ul style="list-style-type: none"> <li>Hands are to be kept away from all mucous membranes / Review hand signals</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
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## Level 1 DOFFING CHECKLIST

Step #	Task	Criteria	Completed
1.	Trained Observer	<ul style="list-style-type: none"> <li>Engage the trained observer outside patient room with the checklist</li> <li>Determine contact time requirement for disinfectant wipe per product label</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.	Inspect PPE	<p style="color: red; font-weight: bold; margin: 0;"><i>In patient room;</i></p> <ul style="list-style-type: none"> <li>Inspect PPE for soiling or breaches</li> <li>If PPE is visibly contaminated, disinfect by using an EPA-registered disinfectant wipe (allow contact time per product label)</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.	Perform hand hygiene	<ul style="list-style-type: none"> <li>Perform hand hygiene by using an EPA-registered disinfectant wipe (allow contact time per product label) or with alcohol-based hand sanitizer</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.	Doff outer gloves	<ol style="list-style-type: none"> <li>Using gloved hand, grasp the palm area of the other gloved hand and peel off first glove</li> <li>Hold the removed glove in the opposite, gloved hand</li> <li>Slide fingers of the ungloved hand under the remaining glove at the wrist and peel off the remaining outer glove over the first glove</li> <li>Discard both outer gloves in the infectious waste container</li> </ol>	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.	Hand hygiene	<ul style="list-style-type: none"> <li>Clean hands with alcohol-based hand sanitizer</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
6.	Doff face shield	<ul style="list-style-type: none"> <li>Face shield is considered contaminated</li> <li>Remove by tilting the head slightly forward, grasping the rear strap and pulling it gently over the head and allowing the face shield to fall forward</li> <li>Discard in the infectious waste container</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Hand hygiene	<ul style="list-style-type: none"> <li>Clean hands with an EPA-registered disinfectant wipe (allow contact time per product label) or alcohol-based hand sanitizer</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Doff surgical gown	<ul style="list-style-type: none"> <li>Front and sleeves are potentially contaminated</li> <li>Pull the gown away from the body until the ties break</li> <li>Remove gown by pulling the gown away from the neck and shoulders, touching the inside only</li> <li>As the gown is rolled away from the body it is turned inside out, folded, or rolled into a bundle and discarded into an infectious waste container</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.	Perform hand hygiene	<ul style="list-style-type: none"> <li>Perform hand hygiene by using an EPA-registered disinfectant wipe (allow contact time per product label) or with alcohol-based hand sanitizer</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No

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## Level 1 DOFFING CHECKLIST

Step #	Task	Criteria	Completed
10.	Doff inner gloves	<ol style="list-style-type: none"> <li>1. Using gloved hand, grasp the palm area of the other gloved hand and peel off first glove</li> <li>2. Hold the removed glove in the opposite, gloved hand</li> <li>3. Slide fingers of the ungloved hand under the remaining glove at the wrist and peel off the remaining outer glove over the first glove</li> <li>4. Discard both outer gloves in the infectious waste container</li> </ol>	<input type="checkbox"/> Yes <input type="checkbox"/> No
11.	Hand hygiene	<ul style="list-style-type: none"> <li>• Clean hands with alcohol-based hand sanitizer</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
12.	Don nitrile gloves	<ul style="list-style-type: none"> <li>• Don a new pair of nitrile gloves</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
13.	Relocate	<ul style="list-style-type: none"> <li>• <b>Move to designated doffing area</b></li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
14.	Remove N95 respirator	<ul style="list-style-type: none"> <li>• Remove N95 respirator from the back to front and discard in the infectious waste container</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
15.	Doff final gloves	<ul style="list-style-type: none"> <li>• Remove gloves using same procedure as first two pairs</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
16.	Hand Hygiene	<ul style="list-style-type: none"> <li>• Wash or clean hands with an alcohol-based hand sanitizer; hands completely dry before exiting the area</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
17.	Inspect	<ul style="list-style-type: none"> <li>• Inspect for any contamination of the clothing worn under the PPE. If there is contamination, shower immediately.</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No
18.	Follow Up	<ul style="list-style-type: none"> <li>• Perform staff rehab, medical monitoring, documentation, and behavioral wellness check as indicated</li> </ul>	<input type="checkbox"/> Yes <input type="checkbox"/> No

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