Required Extended-Mask Use Policy
COVID-19 Response

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**POLICY:**

The safety of every SCCA patient and employee is our top priority. As the COVID-19 pandemic continues to rapidly evolve and new information becomes available, we have carefully considered the optimal strategies to ensure the safety of our patients and employees, anticipating short and long-term needs. We have also heard employees concerns and want our staff to feel safe and confident as they continue to care for our vulnerable patients during this pandemic.

Over the coming weeks and months we expect to face new challenges, including:

- A planned transition to less restrictive physical distancing measures in the community expected at the beginning of May
- An increase in outpatient visits, procedures and surgical volume
  - An ongoing need to provide care for patients with COVID-19 in clinics, emergency departments and hospitals
- Continued outbreaks in local and regional skilled nursing facilities
- Potential risk of COVID-19 resurgence in Seattle, the Puget Sound region and the State of Washington

In addition, while close contact with symptomatic individuals remains the primary mode of transmission, research supports the risk for pre-symptomatic transmission. In the context of the above, additional interventions are needed to limit the unrecognized introduction of SARS-CoV-2 into healthcare settings and to prevent nosocomial transmission in the hospitals and clinics.

Beginning Monday, April 27, 2020 SCCA will require:

- **All staff in SCCA clinics wear a procedural mask continuously, throughout their entire shift, while on the premises for the safety of our patients and staff.** This mask will be provided by SCCA. Procedural masks should not be used outside of clinic locations.
- **SCCA employees in non-clinic locations are expected to wear, at a minimum, a cloth face covering or a personal mask, as recommended by the CDC, while on premises and within 6 feet of another person.**

Extended use masking is a departure from standard approaches to infection prevention. This change is made...
Based on the continued expansion of the local COVID-19 epidemic and is contingent on our ability to maintain adequate PPE supplies. Please note that the ability to receive additional supplies of masks is not assured and all staff are entrusted with thoughtful and judicious use of their masks.

This mask policy, which includes procedural masks (and not N95 respirators), will serve to:

- Protect our patients and other staff members should the health care worker be infected and is experiencing no or very mild symptoms which may be hard to recognize (e.g. fatigue, myalgias), or should they develop symptoms at work. A mask may decrease the risk of spreading infection from an infected individual to another person.

This practice requires staff participation regarding:

- Strict adherence to proper extended use/reuse of surgical masks
- Strict adherence to hand hygiene
- Proper mask use and hygiene – including:
  - Wearing the mask as directed to cover the mouth and nose
  - Avoiding touching the mask and your face
- Staff members who are already on site should secure a face mask (surgical or procedural mask) and wear it continuously until they leave the clinic
- Before putting on the mask, be sure to perform hand hygiene, and remember not to touch your face after putting the mask in place.
- Please remember that conservation of personal protective equipment (PPE) supply is essential, so take and use only one mask per shift – unless the mask becomes visibly soiled or damaged
- **Strict adherence to COVID-19 Stay at Home when Sick – Return to Work Guidelines:** Employees with any symptoms of a respiratory illness will not be allowed to work on the premises.

Masks are only one component of the COVID-19 Prevention and Control Bundle and not a replacement for physical distancing (6 ft) or frequent hand hygiene. Most importantly, employees with symptoms should **NOT come to work even if wearing a mask**, and complete the [COVID-19 Testing Survey](http://seattlecca.policystat.com/policy/7971701/) to be scheduled for COVID-19 testing.

For staff experiencing irritation or allergies due to extended surgical mask use should inform your supervisor or manager, complete an accident illness report (AIR) and contact the employee health team. Employee health will investigate the potential reaction and, if appropriate, attempt to find an alternative mask made with different components with Infection Prevention.

### Attachments

No Attachments

### Approval Signatures

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<th>Approver</th>
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<tbody>
<tr>
<td>Terry McDonnell: Chief Nurse Exec, VP-Clin Ops</td>
<td>4/24/2020</td>
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<td>Tracy Wong: Dir Value &amp; Pt Exp</td>
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**Applicability**

Seattle Cancer Care Alliance Outpatient Policies
FAQs about the policy

The questions below are answered in this FAQ. Scroll to the following pages for answers.

1. Why are we requiring extended mask use (procedure masks)?
2. Why are we requiring a procedure mask and not an N95 respirator?
3. Does the Required Extended Mask Use policy apply to every member of the workforce working anywhere at SCCA?
4. What if I don’t want to wear a procedure mask?
5. What should I do if I develop a skin or breathing reaction to the procedure mask?
6. Can I bring my own mask?
7. Should all patients be wearing face masks?
8. Should visitors be wearing face masks?
9. I work in a procedural area. Can I wear a single face mask continuously, including across different cases?
10. Can I use my face mask between patients, including those with confirmed COVID-19, suspectCOVID-19, other respiratory viruses or patients in whom none of these apply?
11. I work in a clinical setting. How can I drink when I am supposed to wear a procedure mask?
12. How do I handle the mask when I’m ready to eat/drink during a break?
13. Are staff expected to go outside of the clinic premises to eat or are they allowed to take off their masks to eat while on clinic premises?
14. Can staff gather in break rooms and other places to eat and relax, and if so, should they leave their masks on?
15. “I spilled something on my mask” “My mask is soiled” “The ear loop of my mask broke”, etc.
16. If I need to leave the facility and come back later in my shift, what should I do?
17. Should employees be wearing the mask at home and should their families wear masks?
18. Can I wear my mask out of the clinic and use it on the bus or if I am going to a place where there will be other people?
1. Why are we requiring extended mask use (procedure masks)?

We are continuing to learn new information as the COVID-19 pandemic evolves and are focused on the safety of our patients and SCCA staff. The physical distancing measures put into place in March have been effective in “flattening the curve” in our region. In the coming weeks, we anticipate a transition to less restrictive physical distancing measures in the community and a gradual increase in outpatient visits, procedures, and surgical volumes. There is concern that these changes may lead to increased transmission of COVID-19 in the community and thus we need to put other tools in place to protect our patients and staff.

In addition, there continues to be accumulating evidence that some people can be infected without having symptoms or prior to developing symptoms. Symptomatic transmission remains the most frequent source of infection, however, data indicates that the virus can spread between people interacting in close proximity in the absence of symptoms or at times when their symptoms are mild. Masking at all times will reduce exposure and transmission, especially from individuals in the pre-symptomatic phase of their illness.

This masking policy aims to enhance:

- **Patient safety:** If an SCCA staff member has asymptomatic infection or very mild symptoms of infection that are either hard to recognize or develop during their shift at work, the face mask can contain viral particles and decrease the risk to patients and to other staff in close proximity.

- **Workforce safety:** If an SCCA staff member comes into close contact with an individual (patient, visitor, staff) who either has no signs of infection or an unexpected respiratory symptoms in a patient not in droplet/contact isolation, these masks may provide some additional level of protection against infectious droplets from those individuals. Since it is difficult in many work environments to maintain 6 feet of separation, masks can provide additional protection while working in the clinic.

Importantly, we believe this policy will also support our center wide efforts at PPE conservation. Our mask stockpile at SCCA is not unlimited, so all staff are entrusted with thoughtful and judicious use of their masks.

2. Why are we requiring a procedure mask and not an N95 respirator?

COVID-19 is thought to be transmitted primarily through droplets. A procedure mask provides protection by containing these droplets if someone has the virus and by preventing exposure to the virus if someone has close contact with another person who is infected. N95 respirators are used by nurses and providers caring for COVID-19 positive patients in the ICU and locations where aerosol generating procedures are common.
As a reminder, airborne/respirator/contact (with eye protection precautions) are only required while the patient is undergoing aerosol-generating procedures (e.g. intubation, nebulizer therapy). An N95 respirator is not required to prevent droplet transmission during routine care.

3. Does the Required Extended Mask Use policy apply to every member of the workforce working anywhere at SCCA?

YES. This policy applies to employees working in all SCCA buildings and premises, clinical and non-clinical locations (SCCA South Lake Union Campus, Evergreen Clinic, Issaquah Clinic, Poulsbo Clinic).

For employees working in non-clinical locations:
- Procedure masks are not recommended. If these employees visit buildings where clinical care is provided, the mask policy applies as above, and a procedure mask will be required while in clinic locations
- Employees who are not required to be in clinical spaces should not enter the clinic
- These employees should practice principles of social distancing (separation by 6 feet whenever possible), respiratory etiquette and frequent hand hygiene
- These employees may choose to wear facial protection (e.g. cloth masks) brought in from home while in the non-clinical building
- Symptomatic employees should not come to work sick, even if not in the clinical environment. Should perform daily self-checks before coming to clinic to assure they have no symptoms of COVID-19. Those who have new onset symptoms should fill out the employee health online survey to undergo testing at the employee drive through/walk-up clinic

4. What if I don’t want to wear a procedure mask?

This policy applies to all SCCA personnel and is required. The requirement to wear a mask is part of Infection Prevention’s transmission-based precautions. Similar to the requirement to use hand hygiene – wearing an extended-use mask is not optional.

5. What should I do if I develop a skin or breathing reaction to the procedure mask?

Please remove your mask, inform your supervisor or manager, complete an Accident Illness Report (AIR) and contact the employee health team. That team will investigate the potential reaction and, if appropriate, attempt to find an alternative mask made with different components.
6. Can I bring my own mask?

If you work at an SCCA clinical location, we request that you do not wear masks from home in the clinic. SCCA will provide masks to all employees in our clinical areas at this time. You are welcome to wear a cloth mask to and from work but should exchange for a procedure mask on arriving to the clinic.

If you work in SCCA non-clinical locations (e.g. administrative buildings), you are expected to wear a cloth face covering when within 6ft of another person. You may wear a cloth face covering from home or a cloth mask supplied by SCCA.

7. Should all patients be wearing face masks?

YES. All patients entering SCCA facilities are strongly encouraged to wear their own cloth face covering when entering the healthcare facility. If they do not have a face cover or mask, one will be provided for them.

Symptomatic patients will be provided a procedure mask during front door screening and further evaluated. Once roomed, symptomatic patients should continue to wear the face mask. The mask can be removed to perform a nose, mouth, or throat exam. Asymptomatic patients may choose to wear a mask they bring from home (e.g. cloth mask or scarf).

8. Should visitors be wearing face masks?

YES. Visitors are strongly encouraged to wear face masks or face coverings that they bring with them. If a visitor arrives without a mask, they will be offered procedure mask to wear. The visitor restriction policy limits visitors within our facilities. If a visitor develops symptoms while on the premises, that person should be provided a face mask and asked to leave.

9. I work in a procedural area. Can I wear a single procedure mask continuously, including across different cases?

YES. A single procedure mask can be worn across different patient cases. A mask must be changed, however, if it becomes wet or contaminated during a case. It is recommended that face shields be worn with masks in procedure areas.
10. Can I use my face mask between patients, including those with confirmed COVID-19, suspected COVID-19, other respiratory viruses or patients in whom none of these apply?

YES. Your face mask must be handled carefully to prevent both self-contamination and cross-contamination. Under conditions of extended use or reuse, a **full-face shield must be worn over the face mask when caring for patients in droplet/contact precautions as the form of eye protection and to reduce potential splatter to the mask.** Masks must be changed, however, if they become wet or contaminated.

11. I work in a clinical setting. How can I drink when I am supposed to wear a mask??

Drinking water or beverages are only permitted in designated areas. If you need to drink, ensure you are 6 feet away from others, perform hand hygiene, remove the mask, drink, and then replace your face mask. Always perform hand hygiene after replacing your mask, and be cautious not to touch the front of your mask when placing it back on.

12. How do I handle the mask when I’m ready to eat/drink during a break?

Eating is not permitted in clinical areas. On your break in a non-clinical area follow the steps below.

**Remove the mask:**
1. Perform hand hygiene with soap and water or an alcohol-based hand rub
2. Prepare paper bag.
3. Remove the face mask by grabbing strings by ears and carefully removing mask from face.
4. Store mask carefully to avoid contamination to other surfaces.
5. Perform hand hygiene with soap and water or an alcohol-based hand rub.

After you have finished eating or drinking, take the following steps to replace the mask:

1. Perform hand hygiene with soap and water or an alcohol-based hand rub.
2. Remove mask carefully and don mask ensuring clean side is to your face, taking care to avoid touching face or eyes.
3. Perform hand hygiene with soap and water or an alcohol-based hand sanitizer

**DO NOT** pull the mask off your face around your neck to drink, this will lead to contamination.
13. Are staff expected to go outside of the clinic premises to eat or are they allowed to take off their masks to eat while on clinic premises?

Staff can take off their masks to eat and drink when they are on premises in a location where they can maintain a distance of 6 feet. It is preferable to minimize going outside to the extent possible to prevent the need to discard masks and to help SCCA preserve mask supplies.

14. Can staff gather in break rooms and other places to eat and relax, and if so, should they leave their masks on?

Staff should adhere to the same principles of physical distancing when together in break rooms, conference rooms or other spaces. They should allow 6 feet distance from others and should take the appropriate precautions involving hand hygiene and not touching their faces. Masks can be taken off in such areas for eating and drinking. It is crucial keep the number of people in a break room limited, so managers and staff should consider staggering their break times to avoid crowding.

15. “I spilled something on my mask” “My mask is soiled” “The ear loop of my mask broke”, etc.

Staff whose mask becomes soiled after continuous usage during the day can request a new mask from their manager. Be cautious with your mask to help SCCA preserve mask supplies.

16. If I need to leave the facility and come back later in my shift, what should I do?

Every effort should be made to limit exit and entry to the facility during your shift to preserve supplies of face masks. If you leave the facility, the face mask must be discarded and a new one obtained upon re-entry. You are strongly encouraged to use your own homemade/cloth face mask when outside of the facility and within 6 feet of another person.

17. Should employees be wearing the mask at home and should their families wear masks?

Employees should discard their procedure masks when leaving at the end of their shift and perform hand hygiene after removing their mask. They should not wear them home. Employees and their families may choose are encouraged to wear cloth face masks/coverings outside of the SCCA.

The Washington State Department of Health and the Centers for Disease Control and Prevention recommend that people wear cloth face coverings when they are in public settings where they cannot maintain 6 feet of distance from others. This might include trips to the grocery store, pharmacy, hardware store, health clinic or similar places.
This recommendation is not a substitute for existing guidance to maintain 6-feet of physical distance from non-household members and performing frequent hand hygiene with soap and water or alcohol-based hand sanitizer. Wearing cloth face coverings will not prevent spread of COVID-19 without these other protective measures.

18. **Can I wear my mask out of the clinic and use it on the bus or if I am going to a place where there will be other people?**

NO. The mask needs to be discarded as you are leaving the clinic. It should not be worn on public transportation or in other places outside the clinic. Staff are strongly encouraged to wear cloth face coverings in public settings outside of the SCCA where they cannot maintain 6 feet physical distance. As above, Washington DOH and CDC recommends wearing cloth face coverings in public settings where other physical distancing measures are difficult to maintain.
Cloth or homemade masks for non-clinic-based staff at SCCA

Guidance
All SCCA staff and faculty who are working in buildings with no clinical activity are expected to wear, at a minimum, a cloth face covering or a personal mask, as recommended by the CDC, while on premises and within 6 feet of another person.

Rationale
SCCA believes the majority of transmission occurs from people who develop symptoms that lead to production of respiratory droplets, such as coughing. Data also indicates that individuals with COVID-19 who lack symptoms (asymptomatic), those who will eventually develop symptoms (pre-symptomatic), or those who have only mild early symptoms which are not recognized (e.g. fatigue, headaches, low grade fever) can transmit the virus to others. This means that the virus can spread between people interacting in close proximity (speaking, coughing, sneezing) even if those people are not exhibiting symptoms.

In response to these findings, the CDC now recommends wearing cloth face coverings* in public settings where other social distancing measures are difficult to maintain. This policy has two main benefits:

- By covering your mouth and nose, you are less likely to transmit the virus when you either have asymptomatic or unrecognized early COVID-19 symptoms.
- Wearing a mask helps ensure you don’t touch your face during the day.

Please note: Cloth/Homemade masks provide limited additional protection to those who wear them and are not a replacement for social distancing and hand hygiene. Staff with active symptoms should not come to work even if they are wearing a mask.

*Staff are encouraged to bring their own face covering from home. Staff working in SCCA office buildings can also contact storeroom@seattlecca.org to request cloth masks (two cloth masks per employee are available while supplies last).
Types of masks

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<tr>
<td></td>
<td>Homemade sewn cloth masks; see guidelines for making your own here</td>
<td>Medical grade masks</td>
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<tr>
<td></td>
<td>Bandana/scarf/t-shirt — no-sew masks; see video description here and examples in above guidelines.</td>
<td>N-95 respirators</td>
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Cloth or homemade masks are used by staff in non-clinic locations and medical grade masks and N-95 respirators are used only by staff working in clinic locations.

Cloth or handmade masks should:
- Fit snugly but comfortably against the side of the face
- Be secured with ties or ear loops
- Include multiple layers of fabric
- Allow for breathing without restriction
- Be able to be laundered and machine dried without damage or change to shape

FAQs

Do I have to wear a mask on campus?
YES. We require wearing a cloth or homemade mask on campus, when you have limited ability to maintain 6 feet of space from colleagues while at work. Staff that are closed in office spaces or have the ability to maintain appropriate physical distancing may decide not to wear a mask, but they should continue to ensure they are performing hand hygiene regularly and avoiding close interactions with colleagues.

How do I store my face covering/cloth mask when I enter the clinic and transition to a procedure mask?
Face covering or cloth mask should be stored in a clean, breathable container such as a paper bag. Please bring a clean, breathable container from home to store your personal mask. If forgotten, ask for a paper bag, but please be mindful of limited supplies.
I work in my own office with my door closed and I am by myself all day. Do I have to continue to wear my mask while in my office?
NO. Cloth or homemade masks are to be used when interacting with others in social spaces. If you are the only one in your office, then you can safely remove your mask once you have arrived to work as long as you continue to practice hand hygiene regularly and avoid close interactions with colleagues.

I take the bus to work. Should I wear my mask on the bus?
YES. Public transport is considered a public space, so wearing your mask to and from work can help limit transmission and prevent you from touching your face. However, when on a bus or train, make sure that you try to maintain social distancing of 6 feet during travel, and use hand sanitizer when entering and exiting the bus.

Why is hand hygiene and physical distancing needed if I am wearing a mask?
Wearing cloth or homemade masks does not replace frequent hand hygiene, avoiding touching the face and physical distancing. These are the most important steps to prevent spread of COVID-19. People who wear cloth or homemade masks should not assume that such masks can protect them from getting infected. These masks do not fit as tightly as medical grade masks, and do not have barriers to protect against very small particles that can lead to infection.

I have some mild symptoms; can I wear my mask and come to work?
NO. Wearing cloth or homemade masks does not mean you can come to work while ill. Anyone with active symptoms should not come to work. Those with active symptoms should fill out the online survey at https://www.seattlecca.org/testingsurvey to be tested for COVID-19 by Employee Health.

I need to go to the clinic to help on a project. Can I wear my cloth or homemade mask?
NO. SCCA and Fred Hutch employees are not permitted to wear homemade or cloth masks while in the SCCA clinic. However, medical grade disposable masks will be available when you enter the clinic.

Should cloth face coverings be washed or otherwise cleaned regularly? How frequently?
YES. They should be routinely washed depending on the frequency of use.

How does one safely wash or clean a cloth face covering?
A washing machine using hot water and regular laundry detergent should suffice in properly washing a face covering.

How does one safely remove a used cloth face covering?
Individuals should be careful not to touch their eyes, nose, and mouth when removing their face covering and wash hands immediately after removing.
I have my own N-95 respirators at home, why can’t I wear them?

Medical grade masks are needed in hospitals where medical professionals are caring for patients with COVID-19. The CDC and other organizations do not recommend those outside of health care use N-95 or other medical grade masks. If you would like to learn more about how to donate N-95 respirators or medical grade masks to our clinical staff please contact donate@seattlecca.org.

Links for making your own masks

- [https://www.cnet.com/how-to/make-a-face-mask-or-covering-at-home-how-to-find-cloth-patterns-premade-masks/](https://www.cnet.com/how-to/make-a-face-mask-or-covering-at-home-how-to-find-cloth-patterns-premade-masks/)
- [https://www.youtube.com/watch?v=tPx1yqvJgf4&feature=youtu.be](https://www.youtube.com/watch?v=tPx1yqvJgf4&feature=youtu.be)
Required extended mask usage at SCCA
How to safely put on, take off, and store your mask.

Instructional video on mask use and transitioning to droplet precautions: http://www.seattlecca.org/PPE-donning-doffing

Panopto login instructions
- When Panopto opens, in the Sign in as field, click the down arrow and scroll to SeattleCCA.org
- Log in with your username and password, and the video will begin playing

To put on an extended-use mask
1. Perform hand hygiene for 20 seconds.
2. Put the mask on by securing the ear loops around your ears, making sure the colored side faces out, the nose piece is molded snug to the bridge of your nose, and that the bottom part is pulled under your chin.
3. Perform hand hygiene for 20 seconds.

Please note that the front of the mask you are wearing is contaminated.
- DO NOT touch this area while wearing the mask or while taking the mask off.
- DO NOT eat or drink with the mask on.
- DO NOT pull the entire mask below your chin to eat or talk. If you need to remove the mask, do so by following the instructions listed to the right.
- Please note, this is for extended mask usage only, not for droplet precautions. Information for donning and doffing for droplet precautions can be found in the video link above.
- To prevent glasses from fogging up, ensure that the pliable top of the mask is molded to the bridge of your nose and surrounding face area.

To remove an extended-use mask
1. Perform hand hygiene for 20 seconds.
2. Remove the mask by grasping the loops from your ears. Do not grab the front of the mask — it is contaminated.
3. Place your mask in your brown paper bag for storage.
4. Perform hand hygiene for 20 seconds.
To transition from an extended-use mask to droplet precautions

Remove the extended-use mask:
1. Perform hand hygiene for 20 seconds.
2. Remove the mask by grasping the ear loops. Do not grab the front of the mask — it is contaminated.
3. Keep your brown paper bag and throw your extended-use mask in the trash. You will be wearing the orange mask for the remainder of the shift.
4. Perform hand hygiene for 20 seconds.

Put on droplet precaution PPE in this order:
1. Hand hygiene for 20 seconds.
2. Gown
3. Droplet precaution (orange) mask
4. Face shield
5. Gloves

To remove droplet precaution PPE:
1. With gloves on, remove the “third arm” of the gown.
2. Remove gloves.
3. Perform hand hygiene for 20 seconds.
4. Remove face shield and place on isolation cart or designated table.
5. Leave your mask on — this will be your mask for the rest of day.
6. Perform hand hygiene for 20 seconds.
7. Remove your isolation gown, making sure you do not touch the contaminated outside of the gown (directions to do this in video referenced at the top of form).
8. Perform hand hygiene for 20 seconds.
10. Pour the alcohol solution onto the microfiber cloth that is stored in each isolation area, making sure to have an ample amount for cleaning and wiping down the face shield entirely, including the entire headband. The dwell time for the alcohol is 5 minutes, so make sure that the face shield is visibly moist when done wiping it down.
11. While holding the face shield, wipe the top of the isolation cart or designated table with alcohol, ensuring the cloth is wet enough to visibly moisten the top of the cart or table.
12. Place the sanitized face shield on the sanitized surface.
13. Ensure you keep your brown paper bag for future storage of your mask.
14. Remove gloves and perform hand hygiene for 20 seconds.

Instructional video on mask use and transitioning to droplet precautions: [http://www.seattlecca.org/PPE-donning-doffing](http://www.seattlecca.org/PPE-donning-doffing)

Panopto login instructions
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- Log in with your username and password, and the video will begin playing
How to safely put on, take off and reapply a mask

How do I put on my mask?

1. Perform hand hygiene with soap and water or an alcohol-based hand sanitizer.
2. Without touching the front of your mask, stretch the bands around your ears or secure the ties around your head.
3. Cover the area from the bridge of your nose to under your chin, and fit the face covering snugly but comfortably against the side of your face. Make sure you can breathe without restriction.
4. Wash your hands with soap and water or hand gel (if soap and water aren’t available).

How do I take off my mask?

1. Perform hand hygiene with soap and water or an alcohol-based hand sanitizer.
2. Grab ear loops or ties and carefully remove the mask. Do not touch the front of the mask.
3. Store mask carefully to avoid contamination to other surfaces.
4. Perform hand hygiene with soap and water or an alcohol-based hand rub.

After you have finished eating or drinking, take the following steps to reapply the mask

1. Perform hand hygiene with soap and water or an alcohol-based hand sanitizer.
2. Remove mask carefully from storage and don mask, ensuring clean side is to your face, taking care to avoid touching face or eyes.
3. Perform hand hygiene with soap and water or an alcohol-based hand sanitizer.

Important notes about wearing a mask:

- Wash your hands each time you put on and take off the mask.
- Avoid touching the front of your mask while you’re wearing it. If you do, wash your hands.
- Do NOT pull the mask down to expose your nose or mouth. Adjust the mask using the ties on your head or cords around your ears.