

<b>DOCUMENT TYPE:</b> <input type="checkbox"/> Covid-19 Screening & Treatment Algorithm <input checked="" type="checkbox"/> <b>Covid-19 Policy &amp; Procedure</b>	<b>DATE OF ORIGIN:</b> 4/27/2020 <b>LAST REVIEWED:</b> 10/5/2021 <b>LAST UPDATED:</b> 10/5/2021	<b>DOCUMENT #</b> C19 PP-069
<b>DOCUMENT OWNER(S):</b> Vanessa Makarewicz, John Lynch, Seth Cohen, Adrienne Schippers,		
<b>WEB ADDRESS (URL):</b> <a href="https://one.uwmedicine.org/coronavirus/COVID19%20Policy%20Statement%20Library/Required%20and%20Extended-use%20Masking%20Policy%20and%20FAQ.pdf">https://one.uwmedicine.org/coronavirus/COVID19%20Policy%20Statement%20Library/Required%20and%20Extended-use%20Masking%20Policy%20and%20FAQ.pdf</a>		

## UW Medicine Required and Extended-Use Masking Policy

OVERVIEW	
<b>Policy Statement</b>	UW Medicine requires the use of masks in order to reduce the likelihood of transmission of SARS-CoV2, the virus that causes COVID-19. The requirements are defined as reflected in the procedures and FAQ below.
<b>Purpose:</b>	<ul style="list-style-type: none"> <li>Protect patients and co-workers from transmission of infection by individuals in the pre-symptomatic phase of illness or who may develop symptoms while at work (transmission prevention)</li> <li>Provide additional protection to HCWs should they come into close contact with a patient who may be infected without symptoms or limited symptoms that have not yet been recognized as COVID-19 (acquisition prevention)</li> </ul>
<b>Scope</b> <i>(Policy Applies to)</i>	UW Medicine clinical entity employees, including SoM employees who work in clinical sites, Patients, Visitors, and Vendors
<b>Exclusions</b>	SoM employees who work in locations with non-clinical activity including research, administrative, and educational areas within the SoM
<b>Definitions</b>	<p><b>Procedure, surgical, or hospital mask:</b> a mask that is supplied by UW Medicine for the purposes of patient care and meets standards per Infection Prevention &amp; Control.</p> <p><b>Cloth face cover:</b> a self-made or purchased “mask” that has not been evaluated by Infection Prevention &amp; Control or is made of cloth.</p> <p><b>Personal mask:</b> a mask purchased by an employee or visitor. This may be a clinical-level mask, but has not been reviewed by Infection Prevention &amp; Control.</p> <p>For this document, the term <i>procedure mask</i> will refer to masks supplied by UW Medicine and <i>face covers</i> and <i>personal mask</i> will refer to items brought in by the employee.</p> <p><b>Extended use:</b> refers to the practice of wearing the same mask/respirator for repeated close contact encounters with several patients, without removing the mask/respirator between patient encounters. Disposal upon removal of mask/respirator.</p> <p><b>Reuse:</b> refers to the practice of using the same mask/respirator for multiple encounters with patients or for an entire period of time but removing it (‘doffing’) after each encounter or the defined period of time. The mask/respirator is stored in between encounters to be put on again (‘donned’) prior to the next encounter with a patient or co-workers.</p>
<b>References</b>	<ul style="list-style-type: none"> <li><a href="https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html">https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html</a></li> <li><a href="https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html">https://www.cdc.gov/coronavirus/2019-ncov/hcp/using-ppe.html</a></li> <li><a href="https://www.doh.wa.gov/Emergencies/COVID19/ClothFaceCoveringsandMasks">https://www.doh.wa.gov/Emergencies/COVID19/ClothFaceCoveringsandMasks</a></li> </ul>

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**GENERAL STANDARDS AND EXPECTATIONS**

**General Masking Standards:**

- Valved masks are not allowed. If a visitor or patient refuses to change out a valved mask, they can enter the facility by placing a procedure mask over their valved mask.
- This policy is contingent on the ability to maintain adequate personal protective equipment (PPE) supplies. Any decision to change this masking requirement based on supply will be made by the UW Medicine Emergency Operations Center Incident Command and is communicated through our current [PPE Capacity](#), which is informed by our PPE Conservation and Mitigation Policy. Therefore, all staff are entrusted with thoughtful and judicious use of their masks.

**Staff, Students, Trainees, and Faculty:**

- All UW Medicine staff, students, trainees, and faculty must wear a procedure mask while in hospitals, clinics, clinical laboratories, and other clinical areas.
- Clinical areas:
  - **UWMC – ML clinical spaces:**
    - Hospital floors 1, 2, and 3 go to the AA wing double doors prior to (east of) the lobby of the Health Sciences Building. In applying this rule, please be sensitive to the location of Dental clinics, which do extend into the HSB in the A and D wings.
    - Hospital floors 4, 5, 6, end at Pacific elevator doorway leading into Health Sciences Building. The Roosevelt Clinic Buildings 1 and 2, Eastside Specialty Center, Stadium Sports Medicine Clinic, Arlington Cardiology Clinic, and the Yakima Maternal Fetal Clinic
  - **UWMC – NW clinical spaces:**
    - The main hospital building, Outpatient Medical Center, and all clinic spaces on or off the main hospital campus
    - If you work outside of the main hospital building and no patient care is performed on your floor, masking is optional if you are fully vaccinated. Masks must be worn in public areas shared by patients such as elevators and hallways.
  - **HMC clinical spaces:**
    - The main hospital building (including the Maleng Building) and off-campus clinics (e.g., Pioneer Square Clinic)
    - NJB floors 1 through 11, except for research spaces with locked entrances on those floors.
    - PSB floors 1 and 2
    - HMC COVID-19 vaccine clinics and vans
  - **ALNW:** Employees can follow the [University of Washington masking policy](#) [University of Washington face covering policy \(UW-FCP\)](#) when at base and during flights without patients.
  - **UWNC:** Masking is required in all UWNC clinics

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- **SLU:** Masking is required in all SLU clinics and adjacent entrances, elevators, and bathrooms. Employees can follow the [UW-FCP](#) elsewhere in the building.
  - **Prosthetics and Orthotics Clinic:** Masking is required of all healthcare workers and vendors
  - **UW Medicine clinical laboratories:** Masking is required of all healthcare workers and vendors
  - **UW Tower:** UW Medicine employees who work in the UW Tower can follow the [UW-FCP](#)
  - **UW Health Sciences Building:** The Health Sciences Building is not considered a clinical space (dental clinics are an exception). Please be sensitive to the location of dental clinics, which extend into the HSB in the A and D wings.
  - **Other Off-site Administrative Buildings without any clinical activity (ex. Columbia Center):** UW Medicine employees should follow the [UW-FCP](#).
- All UW Medicine staff and faculty who are working in areas not defined above will follow the University of Washington [Face Mask Requirements](#).
  - Staff and faculty working in clinical areas, as defined above, should eat and drink in designated break areas. Interventions to improve safety during break and mealtimes include, but are not limited to, minimize number of people in breakroom at one time, remaining masked if not eating/drinking in the breakroom, eating alone in designated eating areas, etc. Brief sips and snacks in shared offices are only permitted if >6 feet away with a cumulative unmasked time of <15min during a 24 hour period. , Masks should be promptly replaced after eating or drinking.
  - Staff and faculty will wear a procedure mask, cloth face cover, or personal mask in hallways, elevators and other common spaces in clinical areas
  - Some staff and faculty may not be able to wear a mask or face cover due to a medical condition. These exceptions will be accommodated per the usual process by working with the staff or faculty manager, supervisor or chief and the employee health team responsible for the employee’s site of practice.
  - If working with patients who use visual cues (e.g. lip reading) for communication, contact interpreter services department for plan and safe masking alternatives.

**Patients:**

- All inpatients and outpatients entering UW Medicine facilities are required to wear procedure mask at all times. If the patient wants to continue to wear a personal cloth face cover or personal mask, they can, but a procedure mask needs to be placed over it. Procedure mask will be provided by UW Medicine.
- All inpatients, regardless of COVID testing, will wear a facemask, if tolerated, when healthcare workers are present.
- All inpatients in cohorted rooms will be masked upon admission until COVID admission surveillance test results and are encouraged to wear masks throughout hospital stay
- All inpatients will be masked outside of their room, if tolerated
- Please refer to the [masking accommodation policy](#) for alternative solutions for patients who are unable to

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wear a mask due to a disability

**Visitors:**

- All visitors Entering UW Medicine facilities are required to wear a procedure mask at all times. This includes while in patient rooms. If the visitor wants to continue to wear personal cloth face cover or personal mask, they can, but a procedure mask needs to be placed over it.

**Vendors & Volunteers:**

- All vendors and volunteers must follow the same requirements as staff and faculty. Vendors are strongly encouraged to provide their own cloth face covers or personal mask when working in buildings with no clinical activity.

**PROCEDURE**

1. Before putting on the mask, perform hand hygiene, and remember not to touch your face after putting the mask in place.
2. The masks should cover your nose, mouth, and chin.
3. Avoid touching the mask and then your face.
4. Perform hand hygiene before and after removing the mask.

**Additional Online Resources:**

1. [Universal Masking Dos and Don'ts](#)

**FREQUENTLY ASKED QUESTIONS**

**How do I know when I am in a clinical space?**

Clinical spaces for each campus is defined in the policy statements above.

**If we work in a shared office and space (clinical), can we take our masks off if we are 6ft from eachother?**

No. Shared spaces present unique challenges:

- Most times these spaces have less ventilation and fewer air exchanges each hour compared to patient care spaces and are often crowded. .
- 6 ft is not an exact science, rather, a guideline used to assess risk. Measuring 6ft of distance from your co-worker will mitigate risk, but not eliminate it. Cumulative time together within a 24 hour period, distance, and ventilation are all factored into determining a high risk COVID exposure.
- Multiple people may enter and exit these shared spaces.
- Due to the fact shared spaces are high risk and to mitigate this risk,masking needs to be enforced in these areas. Individuals should limit unmasked time in rooms with another unmasked person to less than 15 min in a 24 hour period.

**Can I drink coffee/water in a shared office and space (clinical or non-clinical)? What about cubicles, do they provideprotection?**

Brief moments to hydrate yourself is important, following the protocols outlined in this policy, but remember

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to have your coworkers remained masked while you do this. This will reduce your exposure risk. Cubicles or plexiglass barriers do not provide the same level of protection as a mask. Eating or drinking is not allowed at nurses stations or in areas of active clinical care due to both COVID prevention, but also prevention of the acquisition of many other organisms.

**Can I eat in my shared office?**

Ideally, no. It is best to remove yourself from your workspace and eat in well ventilated spaces. If you must eat in a shared office, you must ensure all your coworkers are masked the entire time you are eating and limit your unmasked time to 15 min in a 24 hour period.

**Can I take my mask off if I am giving a lecture?**

No.

**Where can I get a procedure mask?**

Depending on your site of work, masks may be supplied at your clinic, unit, or hospital entrance, or may need to be brought with you to your site of practice if outside a UW Medicine clinic or hospital. More information will be available directly from your site.

**When can I wear a cloth face cover or my own face mask?**

UW Medicine strongly recommends that all staff and faculty wear a cloth face cover or self-purchased mask when outside of work and home. Remember to wash your personal cloth face covering often. If you go to or through a building with clinical activities, you will need to transition to a procedure mask.

If you work in a non-clinical setting, you should abide by the [UW-FCP](#).  
[Definitions of Clinic settings can be found here.](#)

In clinical areas, a cloth face mask must be exchanged to a procedure mask, unless directed by EHS accommodation.

**What if I don't want to wear a mask?**

This policy applies to all UW Medicine personnel. The requirement to wear a mask is part of infection prevention & control transmission-based precautions.

**Does the UW Medicine Required and Extended Use Masking policy apply to every member of the workforce working anywhere at UW Medicine?**

Yes, this policy applies as noted in the scope and exclusions section

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

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Please remove your mask, don a face shield, inform your supervisor, manager or chief and contact the employeehealth team assigned to your work area immediately. That team will investigate the potential reaction and, if appropriate, attempt to find an alternative mask made with different components or other alternative face covering.

**How do I transition to and from wearing another form of respiratory protection like an N95 respirator and a surgical mask?**

You should move at least 6 feet away from another person, wash your hands and remove your procedure mask. Donthe N95 per protocol and when finished, doff per protocol. After washing your hands again, replace with procedure mask.

**Should visitors be wearing face masks?**

Yes. See policy statement above.

**Should all patients be wearing face masks?**

Yes. See policy statements above.

**In patient care or procedural areas, can a single procedure mask be worn continuously, including acrossdifferent patient spaces?**

Yes, a single mask can be worn across different cases. Masks must be changed:

- If the mask becomes wet or contaminated during careOR
- If used in droplet precautions without the use of a face shield that completely covers the face mask(e.g. goggles)
- Care of patients with known or suspected COVID-19 requires the use of a respirator. A procedure maskis suitable if an appropriate respirator is not available due to supply shortage.

**I work in a clinical setting; how can I eat when I am supposed to wear a procedure mask (surgical or procedural)?**

Eating is not permitted in clinical areas. On your break in a non-clinical area, perform hand hygiene, and removethe mask, by grasping the loops behind your ears (avoid touching the front of the mask) and perform hand hygiene again before you eat. After completing your meal, perform hand hygiene again, don a new mask and perform hand hygiene. Extended mask use or mask reuse is dependent on our [PPE Capacity](#). Please refer to [PPEmitigation and Conservation policy](#) for strategies.

**I work in a clinical setting. How can I drink when I am supposed to wear a procedure mask (surgical orprocedural)?**

Drinking is 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 don a new face mask. Always perform hand hygienewhen replacing your mask. Do NOT move your face mask down to your chin/neck or remove one side to drink and then replace the mask, this can lead to self-contamination.

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**Are staff expected to go outside of the hospital premises to eat to take off their procedure masks? Or are staff allowed to take off their masks to eat while on hospital premises?**

Staff can take off their masks to eat and drink when they are on premises in a location where they can maintain 6 feet from another person.

**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 facemasks. If you leave the facility, the procedure mask must be discarded and a new one obtained upon re-entry. Use your own face mask when outside of the hospital and within 6 feet of another person. Staff must adhere to appropriate doffing technique when removing their mask and should also use hand hygiene after mask removal.

**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 social distancing when together in break rooms, conference rooms, or other spaces. It is important to limit the number of people in a break room: managers should develop approaches to stagger staff break times and minimize the number of people in break rooms at any given time.

**Are there any limits on what I can use for a cloth face mask?**

Please use CDC guidance to assist with what can be used for a cloth face mask. Cloth face mask materials are to be consistent with UW Medicine dress and uniform guidelines and should not include potentially offensive language or images that could be considered offensive or threatening.

**May patients, visitors, staff or faculty use face masks or cloth face coverings with valves?**

No. Masks with valves allow exhaled air to be vented into the room, potentially exposing others to unfiltered, exhaled air. Persons using these types of masks will be provided with a procedure mask to place over the valved mask.

**What if I cannot tolerate a procedure mask?**

Please schedule an appointment with Employee Health Services (EHS). Universal masking and eye protection options are as follow:

- Goggles and procedure mask
- EHS-approved personal eye protection and procedure mask
- Face shield and procedure mask

○ *Note: if the employee is unable to tolerate wearing of a procedure mask for the duration of*

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*their shift, they may utilize a cloth mask. The employee must wear a procedure mask over cloth mask.*

- *Note: Cloth masks alone cannot be worn by staff in any patient care areas.*

**Do I have to wear a procedure mask under my PAPR hood?**

It depends!

- When caring for a confirmed COVID positive patient. No mask is needed under PAPR, unless performing sterile procedure.
- If caring for a PUI or COVID negative patient (e.g. TB patient), you must don procedure mask. Use the following steps:
  - Remove current universal mask, dispose, and perform hand hygiene
  - Don clean universal mask and PAPR hood and machine
  - Perform patient care
  - Upon exiting the room, remove PAPR hood carefully. If you can retain the procedure mask, continue to use this as your universal mask. If it comes off with the PAPR hood, dispose and obtain another.

**VERSION HISTORY**

Revision Date	Description of Change
11/17/2020	Provides updated guidance for when patients should wear masks Updates FAQs related to masking in shared workspaces
1/8/2021	Adds details about limiting time in rooms where other individuals are unmasked
6/20/21	Provides updates to reflect transition to aerosol precautions
7/20/2021	Provides guidance for masking in areas outside the main hospital campuses and reflects the incorporation of vaccination status in masking requirements
8/20/2021	Updates to the FAQs
10/5/2021	Update to require procedure mask or better within the clinical footprint. Update to cloth mask accommodation and addition of procedure mask for visitors and patients entering UWM facilities.