PPE RECOMMENDATIONS

MINIMUM
- Contact & droplet

REQUIRED
- Gown, particle filter respirator, eye protection, gloves
- Visor, head & neck protection as per local guidelines

RECOMMENDED ACTIONS

First Responders

Optimise the setting for resuscitation:
- Ongoing resuscitation should occur in the highest level of isolation immediately available.
- A negative pressure room is the most appropriate location for AGPs but may not always be available.
- Resuscitation should not be withheld if a single room is not immediately available.

If appropriate, consider early use of airway interventions:
- A tracheal tube is more reliable at preventing aerosol generation than a supraglottic airway or bag-mask ventilation.
- In the lead up to tracheal intubation, consider the following to reduce the risk of virus transmission:
  - Bag-mask ventilation is best performed with two rescuers where possible – one rescuer using two hands to hold the mask and ensure a tight mask seal, and the second rescuer alternating between doing compressions and squeezing the bag.
  - A supraglottic airway may provide a better airway seal than a face mask.
  - For ventilation with a bag-mask or supraglottic airway, pause chest compressions for ventilation using a 30:2 compression to ventilation ratio. Prolonged bag-mask ventilation should be avoided.

Rationale
- Ventilation is considered an AGP, regardless of whether it is delivered through a supraglottic airway, endotracheal tube or face mask.
- Negative pressure rooms do not provide additional protection for people in the room, but do minimise the risk of transmission to patients, staff and visitors in adjacent areas.

Sources