

Safety Practices and Use of Personal Protective Equipment for Community Visits: Question & Answer by Dr. Nancy Edwards, PhD, ANP-BC, RN

Questions:	Answers:
Is the data on the slide titled, "Update on Incidence April 2" for the U.S.A. only?	Yes, it is.
What do you mean by airborne? I was told that in order to be airborne it needs to self-replicate with the oxygen. Is that what you mean by airborne?	<p>Airborne and droplet are sometimes confusing. When somebody coughs, there are droplets that are sent through the air and it's the droplets that cause the virus.</p> <p>Airborne means you don't necessarily have droplets. It's within the oxygen and just from breathing the air you can get the virus.</p> <p>We're thinking the virus is transmitted more through droplet and contact but airborne hasn't been ruled out 100%.</p>
We have a hot air blower for hand drying in our bathroom in the office. Should we ask staff to stop using this? I am concerned that it may spread the virus into the air and surfaces in the bathroom.	If people are totally washing their hands for thirty seconds, then the virus should be killed but people don't always do that. It would be better not to use air dryers as it can be a cause of aerosolizing the virus.
How long can the virus last on surfaces at the grocery store such as plastic bags, fruits, vegetables, cardboard, etc.?	You might notice a ban for bringing in your own bags to grocery stores from home. Plastic grocery bags are probably the safer of the options. One thing we are seeing is to disinfect a part of your counter and use that as your 'clean counter'. For fruits and vegetables, it's good practice to thoroughly wash them. Some people are saying to use soap and water on fruits and vegetables. Others think there may be an issue with ingesting the soap and just using good friction and water to wash fruits and vegetables is enough.
I have staff who are afraid to do home visits (and clients who are afraid to allow in-home care) because of the risk of transmission by people who are asymptomatic. By asymptomatic, I mean infected but no symptoms showing	We are seeing people who are asymptomatic or showing minimal symptoms but if we use good hand cleaning hygiene and maintain social distancing of six feet, we should be safe. Continue to maintain good hand washing and social distancing to keep ourselves as safe as possible.

<p>yet (not specifically people who never have symptoms). How do you respond to this concern?</p>	
<p>Are the cloth masks cleaned enough in cold water?</p>	<p>Findings are that it's best to use the warmest water possible with detergent. Detergent and friction are what helps to destroy the fatty layer of the virus which then helps to kill the virus. While you should use warm or hot water if you can, making sure that you have a good cycle in your washer and appropriate detergent is also important.</p>
<p>Some of us with APS, do investigations in Nursing Homes and Mental Health Hospitals. As the COVID-19 cases are rising in these places, should we be wearing masks if we have to enter the facility?</p>	<p>In high risk places where there are outbreaks, you should wear a mask. In non-high-risk places where there are no confirmed cases in the setting, it shouldn't be necessary. For those settings, social distancing (six feet) and good hand wash hygiene techniques are sufficient.</p>
<p>From what the CDC has reported, hand sanitizer is not killing this virus; only soap and water. Has that changed? Is this true?</p>	<p>If it's 60% alcohol hand sanitizer with appropriate friction, it should be enough. A small amount of hand sanitizer rubbed on hands for five seconds is not enough, just like washing hands for five seconds won't work. Use an appropriate amount of hand sanitizer with a good amount of friction for at least twenty seconds. Hand sanitizers must have at least 60% alcohol.</p>
<p>When do you recommend masks, gloves, etc.? The information about putting these things on/off is very useful, but are PPE needed for non-clinical home visits?</p>	<p>If nobody in the home has signs or symptoms (i.e. not ill), then the recommendation is to not use PPE. Instead, good hand hygiene, disinfecting, and awareness of where you're putting your belongings when you enter, and exit is enough.</p> <p>A lot of people right now are showing certain allergic symptoms due to it being high allergy season. If anyone has symptoms of illness and you have any doubt, I recommend wearing a mask.</p>
<p>Regarding making bleach solution, can you address if it needs to be made new every day? How long does a bleach solution last before it is ineffective?</p>	<p>No current known reports of the need to create daily solution. Will have to confer with DPH authorities to verify.</p>

<p>I spray my car down after visits with Lysol and avoid it for a few hours. Is that helpful?</p>	<p>Yes, make sure that you spray it enough to see the moisture and leave it to air dry. Some people are spraying the disinfectant and wiping it off and this is not enough. Lysol is a good disinfectant to use but unknown if it has any effects on paint for cars.</p>
<p>My friend who has COVID was told by her doctor to quarantine herself from her 2 cats. Her doctor told her she can be re-infecting herself if she sneezes, coughs on her cats and then pets them. Do you agree?</p>	<p>If someone is positive for COVID, they could possibly re-infect themselves by coughing or sneezing on the pet, but the pet is not affected. For this reason, pets should stay away from people who are positive for COVID.</p>
<p>What is the possibility of contracting this virus from sharing books, puzzles, etc. from other households?</p>	<p>We don't for sure know how long the virus stays on surfaces. It's best not to transfer anything from one place to another if it can be helped. You can wipe the outside of objects with disinfectant to minimize transfer of the virus. Estimates say it's anywhere from thirty-six hours to five or six days that the virus survives on more porous surfaces and even longer on steel.</p>
<p>What is the difference in transmission of COVID-19 between wearing gloves and not wearing gloves and washing your hands?</p>	<p>Wearing gloves is better but it does not substitute for hand washing. You should wash your hands before and after wearing gloves which offers two barriers versus only hand washing which offers one barrier. However, gloves should be reserved for high risk environments. There's no need for gloves when working around your home.</p>
<p>How do we protect our patients from passing virus on to them from our clothes?</p>	<p>Six feet of social distancing helps. If this is not option and you have to get in close contact with patients, minimizing contact and regularly washing clothes thoroughly with soap and water every night will help. Waterproof gowns can serve as a barrier if they are available. If you know you will have to have close contact, seeing those patients earlier in the day could help when you've had less contact with other people. Though not approved by the CDC, some people are using plastic aprons similar to what's used in the food service industry as an alternative to an impermeable gown to prevent spread and contamination.</p>

<p>Are health care professionals being tested?</p>	<p>Some are being tested, depending on the area. For instance, in Indiana, only healthcare providers who are symptomatic are being tested. As more testing becomes more available, testing of healthcare providers will likely increase.</p>
<p>How long does the virus stay in the air?</p>	<p>The virus is thought to spread by droplet and contact not necessarily airborne. However in procedures in which the virus is aerosolized, such as suctioning or intubation, the researchers concluded that the virus could remain airborne for “up to 3 hours post aerosolization.”</p>
<p>Can we use Lysol on a N95 mask? Can you wash an N95 mask?</p>	<p>The fastest and most effective way to sterilize a used mask, they found, was to put it in an oven on low heat -- about 158 F -- for 30 minutes. A typical kitchen oven works fine for this, according to the study authors. Masks cleaned this way keep about 97% of their ability to screen out small particles.</p>
<p>Can COVID-19 be transferred by being touched by an unknown infected person?</p>	<p>Yes, it is transmitted by touching items that have the virus.</p>
<p>What happens if you unable to contact the client to determine if they have been exposed or not? How would you proceed with visit especially when you have no other pertinent information on the client or they have limitations in capacity?</p>	<p>At this time, I would proceed with a Mask and Gown for any protection.</p>
<p>Are there recommendations on appropriate precautions to take if you must respond to a home, due to an emergency, where residents exhibit symptoms of COVID-19?</p>	<p>I would use all the PPE that has been discussed. Also try to maintain the 6 foot distance, but that may not be feasible. After the visit, I would change my clothes and shower prior to entering another home visit.</p>
<p>Are there extra precautions that high risk individuals (i.e. folks with underlying conditions and/or who are immune compromised) who are still working should be taking?</p>	<p>There are mixed recommendations but overall, the message is to stay home if possible. If not remember to wear a mask and gloves at all times and wash hands frequently. Try to avoid anyone who has been exposed to the virus</p>
<p>If someone has COVID-19, can bedbugs transmit the virus if they bite more than one person? While the critter may</p>	<p>There is no evidence right now to support COVID-19 transmitting through pests.</p>

<p>not contract the virus, does their digestive system break down the virus that may be present in blood?</p> <p>How do you quarantine caregiver from their needy relative, or serve a household with bedbugs?</p>	
<p>Would you provide a symptom review for COVID-19 risk?</p>	<p>Those at highest risk for COVID are Older Adults, individuals with Respiratory issues such as COPS, and Asthma, individuals with autoimmune illness such as HIV, Lupus, cancer, transplants, smoking etc, and individuals with chronic diseases such as kidney disease, heart disease, liver disease and diabetes</p> <p>Symptoms include mild to severe respiratory illness such as dry cough, difficulty breathing and fever. Other common signs include headache, pain or pressure in chest, and confusion</p>
<p>Who should be seeing a Doctor?</p>	<p>If you develop emergency warning signs for COVID-19 get medical attention immediately. Emergency warning signs include*:</p> <ul style="list-style-type: none"> • Trouble breathing • Persistent pain or pressure in the chest • New confusion or inability to arouse • Bluish lips or face <p>*This list is not all inclusive. Please consult your medical provider for any other symptoms that are severe or concerning.</p> <p>However make sure if your symptoms are not severe, call before going to the ER etc. Many symptoms can be treated from home.</p>
<p>Is it safe to eat fresh salad or raw vegetables?</p>	<p>For fresh produce that will not be cooked before eating, wash thoroughly under running water. If desired, use a vegetable scrub brush and scrub the surface</p>

	vigorously with a small amount of soap and water (be gentle with softer produce). This method is effective at removing pathogens on the surface. Wash the scrub brush with additional soap and water after each use. Other popular rinses such as vinegar are not known to be effective at killing viruses.
Is it better to go into the grocery store and pick your own groceries or to order them online for delivery?	Staying at home is always the best.
Is it safe for more than one person to ride in an elevator at a time?	The main thing is to be able to preserve the 6-foot distancing, so it depends on the size of the elevator and how many other people are on the elevator. The problem is that you can never determine how many others will get on. You can always get off if you cannot maintain the distancing