



Health care providers use of N95 masks - Frequently Asked Questions

The office of the Chief Medical Officer of Health (CMOH) has updated guidance on the use of N95 masks within its guidance on Personal Protective Equipment. The following addresses frequently asked questions related to these changes for health care providers (HCPs).

When are frontline staff recommended to use N95 masks?

The use of N95 masks is discretionarily recommended when providing direct care (within 2 metres) or someone with suspected or confirmed COVID-19. This includes symptomatic individuals who are being tested for COVID-19. As per routine, a Point of Care Risk Assessment (PCRA) should be done with each client interaction to determine if additional precautions are necessary. The guidance provided is specific to the COVID-19 pandemic, health care providers should also consider what additional precautions are necessary or recommended for other communicable diseases.

What is a Fit test and when should it be done?

A fit test is a standardized test to check the seal of an N95 mask and involves a qualitative or quantitative approach in addition to a seal check with every donning. You should follow your organization's specific policy on whether a fit test is required for your job. Fit testing is not required for wearing an N95 specific to COVID-19 (with the exception of performing an AGMP). If N95s are not available, use of a well-fitting, Health Canada approved KN95 may be used. A close seal of the mask is sufficient, which can be verified when donning a mask.

What is a seal check?

A user seal check is a procedure conducted by a respirator (N95, KN95) wearer to determine if the respirator is being worn properly. It should be performed every time an N95 mask is worn. Steps include:

- Don mask as outlined on
 - a. <https://yukon.ca/en/health-and-wellness/health-concerns-diseases-and-conditions/find-information-health-professionals>
 - b. https://yukon.ca/sites/yukon.ca/files/hss/hss-imgs/donning_ppe_droplet_and_contact_march_2020.pdf
- Place both hands over the mask.
- Breathe in and out.
- If you have a good seal, the face piece should collapse slightly when you inhale.
- As you exhale, you should not feel air leaking out.
- If you have air leaks, check that nothing is obstructing (blocking) the sealing surface, adjust the nose piece or straps, and repeat the user seal check.



What can be done to decrease risk of skin breakdown while wearing an N95?

Skin damage can occur with more frequency with the use of N95 masks due to the increased pressure and frictional forces. The damage can be to the skin surface and/or subdermal damage. The following practices¹ can mitigate the risk of skin breakdown:

- Apply skin sealants/protectants on areas affected by the mask. Ensure these protectants are dry before putting on mask.
- Ensure your skin is clean and well moisturized before and after work.
- **Do not apply** petroleum or moisturizer before donning the mask as this may interfere with the sterilization of the mask.
- Minimize touching face with contaminated hands,
- Additional resources
 - [American Academy of Dermatology Association, *Preventing and treating occupationally induced dermatologic conditions during COVID-19*](https://www.aad.org/public/diseases/coronavirus/occ-induced)
<https://www.aad.org/public/diseases/coronavirus/occ-induced>
 - [Shared Health Manitoba, Quick Reference Guide Prevention & Management of Skin Injury from Personal Protective Equipment \(PPE\)](https://sharedhealthmb.ca/files/covid-19-ppe-skin-injury-grg.pdf)
<https://sharedhealthmb.ca/files/covid-19-ppe-skin-injury-grg.pdf>

Why aren't all frontline staff recommended to wear N95 masks at all times?

- Routine screening is done for symptoms and contacts of COVID-19. If someone doesn't fall into these categories, they are not likely to have COVID-19. With continuous medical masking of clients and continuous medical masking and eye protection of staff, an N95 is not warranted.
- If the client is found to have COVID-19, the staff member wearing a medical mask (surgical or procedural) and eye protection would not meet the threshold of an exposure and therefore the HCP is not considered a contact. Prolonged use of a N95 that would be needed to meet the continuous masking criteria is very challenging and is not recommended when the risk does not warrant their use.

¹ American Academy of Dermatology Association (2022) *Preventing and treating occupationally induced dermatologic conditions during COVID-19* available at: <https://www.aad.org/public/diseases/coronavirus/occ-induced>