





COVID 19 Protective Eyewear Guidance

Intention of this document is to provide information on the recommended use of eyewear at PHSa.

There are different types of protective eyewear (e.g. goggles, face shields, safety glasses). Eye protection provides a barrier to infectious materials entering the eye and is often used in conjunction with other personal protective equipment (PPE) such as gloves, gowns, masks or respirators (Centers for Disease Control and Prevention (CDC), 2013). Eye protection is an integral part of staff protection against transmission of viral particles. Goggles or face shields are required PPE used in Droplet & Contact precautions and Airborne precautions, including aerosol-generating medical procedures (AGMPs).

1. Complete a Point of Care Risk Assessment (PCRA) for every patient/client interaction and use appropriate PPE as indicated by the PCRA in alignment with IPAC policy.
2. Protective eyewear is required any time a physical distance of 2 metres cannot be maintained and as per the IPAC recommendation.
3. Protective eyewear **must be donned before** interaction with patients/clients.

Options	Considerations in selection
<p>Goggles</p> 	<p>Goggles with a snug fit around the eyes provide the most reliable eye protection from splashes, sprays, and respiratory droplets.</p> <p>Note: The characteristics of the goggles that make them the most reliable protection for the wearer do result in concerns with comfort during extended periods of use.</p> <ul style="list-style-type: none"> • If you have purchased your own prescription goggles, ensure they are CSA approved, latex free, and able to be cleaned and disinfected
<p>Face Shield</p> 	<p>Face shields cover the maximum area of the face to reduce exposure from splash, spray or droplets to both the eyes and face. Face shields are preferred choice for AGM procedures and during procedures with risk of significant BBF splash.</p> <p>A single-use face shield can be re-used by the SAME user until it becomes cracked or visibility is compromised. Refer to IPAC recommendations for cleaning and disinfection.</p> <p>Note: BCEHS has approved the use of face shields for eye/face protection based on Scene safety assessment and PCRA.</p>

<p>Safety Glasses</p> 	<p>Safety glasses primarily provide protection from impact i.e. flying objects, particles or dust. They do not provide the same level of protection from splashes, mists, sprays, and droplets as goggles or face shields. They are not recommended for close clinical contact, especially if the client is unmasked and any AGP procedures.</p> <p>If you use them, be aware that there will be gaps close to your eyes between the glasses and your face. Eyewear should be individually assigned and fitted so that gaps between the edges of the device and the face are kept to a minimum.</p> <p>Always perform a risk assessment for every client/patient interactions as per the IPAC Policy. Ensure your safety eyewear fits properly.</p>
<p>Mask with visor</p> 	<p>Masks with visor are commonly used in healthcare settings however, they do not meet the eye protection requirements set out in CSA Standard CAN/CSA-Z94.3-07 or Z94.3-15, Eye and Face Protectors.</p> <p>Masks with visor may not provide the same level of protection from splashes, sprays, and droplets as goggles or face shields. The gap on the forehead area does not comply with the best practices for eye protection (i.e. snug forehead fit). They are not recommended for any AGM procedures.</p> <p>If you use them, be aware that there will be gaps close to your eyes between the visor and your face. Always perform a risk assessment for every client/patient interactions as per the IPAC Policy.</p>
<ul style="list-style-type: none"> • If you wear prescription glasses, use a face shield or goggles/safety glasses that fit snugly, with no gaps between the glasses and your face. 	
<p>Additional Guidance for the Use of Protective Eyewear</p> <ul style="list-style-type: none"> • Ensure eye protection and respirator or surgical mask compatibility so that there is no interference with the proper positioning of the eye protection or with the fit or seal of the respirator or surgical mask. • Remove eye protection after the client has left, unless implementing extended use. • Use of eye protection can be extended. Eye protection should be changed when soiled or damaged. • All eye protection must be cleaned and disinfected between uses. For cleaning and disinfection of the protective eyewear, please refer to IPAC recommendations specific to your site. <p>Sources: https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html</p>	