

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/decontamination-reuse-respirators.html>

Decontamination and Reuse of Filtering Facepiece Respirators

Disposable filtering facepiece respirators (FFRs) are not approved for routine decontamination and reuse as standard of care. However, FFR decontamination and reuse may need to be considered as a crisis capacity strategy to ensure continued availability.

A study evaluating the persistence of SARS-CoV-2 (the virus that causes COVID-19) on plastic, stainless steel, and cardboard surfaces showed that the virus is able to survive for up to 72-hours [1]. One strategy to mitigate the contact transfer of pathogens from the FFR to the wearer during reuse is to issue five respirators to each healthcare worker who may care for patients with suspected or confirmed COVID-19. The healthcare worker will wear one respirator each day and store it in a breathable paper bag at the end of each shift. The order of FFR use should be repeated with a minimum of five days between each FFR use. This will result in each worker requiring a minimum of five FFRs, providing that they put on, take off, care for them, and store them properly each day. Healthcare workers should treat the FFRs as though they are still contaminated and follow the precautions outlined in our reuse recommendations. If supplies are even more constrained and five respirators are not available for each worker who needs them, FFR decontamination may be necessary.

Other decontamination methods (spraying with bleach, microwaving, or laundering of the N95, etc) may be/are potentially harmful to the FFR and may also present a hazard to the wearer.

The bandanas or other appropriate face "coverings" now increasingly being worn, or required (as in LA) can simply be laundered routinely.

Here is the link to the surgeon general's video on how to make a face covering: <https://youtu.be/tPx1yqvJgf4>