

EXAMPLE ONLY – THIS IS NOT INTENDED AS A RECOMMENDED SET OF STANDARD OPERATING PROCEDURES FOR YOUR FACILITY.

EACH FACILITY MUST DEVELOP THEIR OWN SPECIFIC SOP'S FOR THEIR USE OF PPE IN THEIR FACILITY.

WARNING: Always refer to and heed all Warnings, Cautions, and Notes in User's Instructions P/N 02521215 Rev F or later, particularly for important battery care and charging instructions and warnings.

PURPOSE:

To protect staff from airborne pathogens during routine care for patients where protection from airborne contaminants is warranted.

POLICY:

MAXAIR 78 Series Cuff Systems (Shroud and Hood Configurations are also available) are to be used by all health professionals entering negative airflow, Airborne Infection Isolation Rooms (AIIR) during hospitalization of patients requiring Airborne Precautions (See Exposure Control Plan).

PROCEDURE:

1. All staff who will have need to enter an airborne isolation room will be familiar with MAXAIR Powered Air Purifying Respirators and receive initial training describing purpose, adequate use, and care of the configurations used. Additional training will be provided to direct caregivers as needed before a patient arrives on the unit or after need for airborne precaution is determined.
2. Proper assembly and donning/doffing procedure:
 - A. Insert the back end of the helmet into the pocket in the back end of the HE filter. Pull the front end of the filter down over the front end of the helmet, pulling the filter alignment hole (at the front and center of filter next to the magenta NIOSH approval label) over the center post of the helmet. Press both sides of the filter down onto the Velcro pieces on the left and right side of the helmet.
 - B. Place the filter cover on top of the helmet. Insert the helmet alignment post into the filter cover alignment hole and gently push the cover down onto helmet. Secure the filter cover to the helmet in the back by pulling the straps under the back of the helmet and snapping them together.
 - C. Attach the cuff by feeding the helmet power cord through the buttonhole in the cuff from the inside to the outside. Align the zipper on the cuff with the mating zipper on the filter cover lens, and zip the cuff to the lens.
 - D. Tuck the back end of the cuff under the ratchet suspension knob and center headpiece adjustment strap. This must be assembled correctly in order to properly utilize a stethoscope and be able to hear properly.
 - E. Attach the battery to the battery belt, and plug the power cord from the helmet into the battery.
 - F. Adjust the ratchet suspension knob counterclockwise to ensure the helmet will easily fit over the head. Pull the front bottom of the cuff down slightly, and simultaneously place your chin into the cuff and place the helmet on your head. Position the helmet so that the bottom of the front headband is no higher than

½” above the eyebrows in order to view the Air-Flow and Battery LED status indicators, should they illuminate. Adjust the ratchet suspension knob clockwise for a comfortable and secure fit.

- G. After exiting the patient’s room, the healthcare professional should remove MAXAIR, wipe down the outside surface of the lens and filter cover with an approved anti-microbial wipe and store MAXAIR in a plastic bag outside the patient’s room on a cart, wall hook, or other provided storage media.
- H. At the end of the shift, the caregiver should remove the comfort strips from the front and rear headbands, and the cuff, and dispose of them according to hospital protocol. Then wipe down the inside and outside of the lens and the top of filter cover with an approved anti-microbial wipe. Finally, replace the comfort strips and assemble a new cuff to the lens.
- I. The Battery should be placed on the charger and charged until the red charging light turns green. **The Battery must be removed from the Charger when the light turns green or after typical time for charging has expired (reference User’s Instructions P/N 02521215 Rev F or later for important charging instructions and warnings.)**
- J. Filters should be changed when the Yellow LED status indicator stays on, when breathing resistance increases, and when the filter becomes damaged or exposed to blood or bodily fluids. Otherwise, a general recommended filter replacement schedule is every 6-12 months depending upon use and storage conditions.

NOTE: The hospital protocol may include that the sterile processing department picks up the MAXAIR CAPR Systems from the units and disinfects them according to protocol.

- 3. Batteries are to be changed/charged after the end of each shift when in used on a routine basis. **Refer to User’s Instructions P/N 02521215 Rev F or later for important battery care and charging instructions and warnings.**
- 4. Use of MAXAIR CAPRs can be discontinued upon Physician orders and /or recommendation from the Infection Control Practitioner.
- 5. Equipment Storage & Maintenance
 - A. MAXAIR CAPRs will be stored on the Med/Surg unit and in the Emergency Room, or as otherwise directed by hospital protocol.
 - B. MAXAIR CAPRs will be stored assembled and ready for immediate use.
 - C. The batteries will be inspected quarterly by the Infection Control Coordinator or designee and recharged as needed.
 - D. When in use, MAXAIR CAPRs will be placed on the cart outside of the patients’ room and batteries will be charged at the end of each shift.
 - E. The Infection Control Practitioner/Designee is responsible for having the MAXAIR CAPRs cleaned and reassembled when they are to be readied for a next patient use.

NOTE: Hospital protocols may dictate the Sterile Processing Department to be responsible for item E. above.

- 6. Traffic Control

- A. Hospital Employees not directly involved in the direct care of the patient requiring Airborne Precautions will not be allowed in the rooms.
- B. The doors to the rooms will remain closed at all times to maintain negative pressure and avoid disruption of air flow.
- C. Nursing has the authority and responsibility to limit visitors and guests as needed for patient, visitors and employee safety.
- D. All visitors entering the airborne infection isolation rooms will be required to wear a MAXAIR CAPR, or an N95 mask respirator as minimum.