When N95 supplies are running low, limited re-use of N95 respirators when caring for patients with COVID-19 might become necessary.

**Reuse** refers to the practice of using the same N95 respirator for multiple encounters with patients but removing it (‘doffing’) after each encounter.

**Respirator Reuse Recommendations**

There is no way of determining the maximum possible number of safe reuses for an N95 respirator as a generic number to be applied in all cases. The recommendations below are designed to provide practical advice so that N95 respirators are discarded before they become a significant risk for contact transmission or their functionality is reduced.

- Discard N95 respirators following use during aerosol generating procedures (nebulizer, CPAP, or intubation).
- Discard N95 respirators contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.
- Discard N95 respirators following close contact with any patient co-infected with an infectious disease requiring contact precautions.
- Store respirators in a breathable container such as a paper bag between uses. To minimize potential cross-contamination, store respirators so that they do not touch each other and the person using the respirator is clearly identified. Storage containers should be disposed of or cleaned regularly.
- Clean hands with soap and water or an alcohol-based hand sanitizer before and after touching or adjusting the respirator (if necessary for comfort or to maintain fit).
- Avoid touching the inside of the respirator. If inadvertent contact is made with the inside of the respirator, discard the respirator and perform hand hygiene as described above.
- Use a pair of clean (non-sterile) gloves when donning a used N95 respirator and performing a user seal check. Discard gloves after the N95 respirator is donned and any adjustments are made to ensure the respirator is sitting comfortably on your face with a good seal.