

Expanded Use of Eye Protection for ALL Direct Patient Care

UCSF Health has a multipronged approach to optimizing health care personnel safety during the COVID-19 pandemic that includes screening, universal masking, and for specific encounters, COVID testing. These protocols continue to evolve as COVID community transmission increases.

In addition to universal masking, we recommend **expanded use of eye protection** (e.g., eye shields, face shields, or safety glasses) for **ALL** direct, close patient encounters in the clinical care environment.

It is acceptable, but not required, to continue wearing eye protection in the clinical environment when not involved in a direct patient encounter.

Eye protection does not replace the recommendation for screening, physical distancing, or universal masking.

Face shields are preferred if you are caring for a patient with clinically suspected or confirmed COVID infection, are wearing an N95 respirator, or anticipate being splashed or sprayed with bodily fluids.

Health care personnel should follow current recommendations for [extended use and reuse guidance](#):

- Eye protection can be used for multiple patient interactions per extended and reuse guidance
- When removing the eye protection, inspect and clean it, and store it in a clean, dry place
- It is acceptable to re-use eye protection for multiple days as long as it is not cracked or damaged.



Eye Protection demonstrated as eye shields with universal mask

Expanded use of eye protection for all direct, close encounters for patient care is recommended. As a reminder, eye protection is routinely **required** for:

- **Droplet Isolation:** including patients with concerning symptoms undergoing initial evaluation
- As part of **Standard Precautions** if anticipating splashes or sprays of blood or other body fluids/secretions.

Expanded Use of Eye Protection for ALL Direct Patient Care- FAQ

1) Why is eye protection protective?

Eye protection can further reduce the COVID-19 exposure risk and can serve as a physical barrier to deter health care personnel from directly touching their eyes. Eye protection does not replace universal masking and physical distancing.

2) Why is eye protection being recommended now?

During the COVID-19 pandemic, we have adopted a multipronged approach to maximize safety for our health care personnel and patients. This includes the universal masking program, symptom and exposure pre-visit and lobby screening, COVID testing for specific encounters/procedures, and physical distancing. Eye protection offers an added layer of protection for healthcare personnel.



Eye Protection Demonstrated as Face Shield with Universal Mask

3) What if I am not involved in a direct, close patient encounter? Can I wear eye protection?

Yes. The expanded use of eye protection is recommended for all direct, close encounters for patient care in the clinical care environment. However, it is acceptable for any UCSF health care personnel to wear eye protection while performing non-clinical duties in the clinical buildings.

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4) What types of eye protection are acceptable?

Face shields, eye shields, and other safety eye protection, such as safety goggles are acceptable. Prescription and reader glasses are **NOT** acceptable eye protection; use eye shield, face shield or other safety glasses over your prescription/reader glasses.

5) Are there scenarios when a face shield is preferred over other eye protection?

Yes. A face shield is preferred if you are caring for a patient with clinically suspected or confirmed COVID infection, are wearing an N95 respirator, or anticipate being splashed or sprayed with bodily fluids.



*Eye Protection Demonstrated as
Safety Goggles*

6) Do I need to wear a surgical mask if I am wearing eye protection?

Yes. Eye protection does not replace universal masking and physical distancing.

7) If a patient is asymptomatic and can remain masked, should I wear eye protection?

Yes, health care personnel should wear eye protection even if the patient is masked.

8) What if the patient (and/or visitor/caretaker) is incorrectly wearing the mask or keeps removing it?

Teach patients and visitors how to wear a mask appropriately and remind them to leave it on for the duration of their visit. Masks protect both the patient and health care personnel from spreading and being exposed to COVID-19.

9) If I will work with multiple patients who cannot mask or need to remove their mask, can I leave my eye protection on for my shift and clinic session?

Yes. If you anticipate needing the eye protection for multiple or sequential patients, you can leave it on between patients under the [extended use guidance](#). If your eye shield becomes soiled during the course of the day, please remove and clean it. You can also choose to remove the eye protection between encounters following the re-use guidelines.

10) Should I re-use my eye protection?

Yes. Please follow the [extended use and reuse guidance](#). Of note, the eye protection should be cleaned, stored in a clean/dry place, and used over multiple days. Inspect it prior to each use and discard and replace it if it is cracked or damaged. The eye protection should be cleaned using a hospital-approved disinfectant following the appropriate dwell time. After the appropriate dwell time, the eye shield can be wiped down with soap/water OR an alcohol pad to remove any residue left behind.

11) How is our supply of eye protection?

We currently have an adequate supply of face and eye shields to accommodate this recommendation.

12) How do I order more eye shields or face shields?

Order face and eye shields through Materiel Services.

415-353-1837 (Parnassus) 885-7255 (Mount Zion) or 476-1116 for (Mission Bay)