This procedure covers all care delivery in COVID-19/respiratory evaluation units, urgent care units, emergency departments, when reuse of gowns is needed due to a shortage. Reuse of gowns is approved for a single provider for one shift and for multiple patients on a unit.

**Notes**
- In areas with frequent gowning, optimally leave gown on for as long as tolerated to reduce potential for contamination during doffing
- Gown should be removed at any time, if contaminated
- This guidance applies to suspect or confirmed COVID-19 patients
- Gowns should NOT be reused for patients with C. difficile, norovirus, or colonization/infection with multidrug-resistant gram-negative bacteria

**Gowns**
- Each provider wears the same gown for as long as possible, ideally the entire shift
- The gown should be removed if:
  - Provider needs to leave the unit
  - Gown is visibly soiled
  - Prolonged, direct patient care is provided (e.g., help with ADLs, use of bedpan) where contamination is more likely
- Providers should use the standard gown doffing procedure to avoid self-contamination
- Perform thorough hand hygiene while wearing gown and when doffing
- Perform patient care as usual, adhering to Standard Precautions

**Surgical Masks with or without Face Shields or Goggles/Visor**
- Masks may be worn continuously for as long as tolerated, unless moist or visibly soiled
- Once masks are removed, they should be discarded (unless intact in times of severe shortage; see BILH Surgical Mask Reuse Procedure)
- Face shields, goggles and visors may be wiped with standard hospital disinfectant between patients, if soiled. Goggles and visors that can be effectively cleaned may be able to be reused.

For Drive-thru Respiratory Testing Sites:
- Use the same mask with or without faceshield, goggle/visor and gown until visibly soiled
- Change gloves and perform hand hygiene between each patient