

# N95 Decontamination & Reuse Method Decision Matrix



**N95DECON**

The purpose of this tool is to provide a high-level comparative overview of methods for the decontamination and reuse of N95 respirators during the COVID-19 pandemic.

These methods should only be employed in crisis shortages and should be part of a PPE containment strategy. Each method requires detailed protocol implementation for operator and user safety.

This tool is not intended to provide all information for implementation, but rather to allow quick comparison for decision-makers to select methods that best fit the local setting prior to detailed investigation for effective implementation [Version 1.0, published Aug. 8, 2020]

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Method	Reprocessing Method Level of Decontamination	Demonstrated SARS-CoV-2 Viral Inactivation	Effect on N95 FFR Filtration Efficiency (FE) & Fit	Removal of Chemical Residue Required?	Regulatory Guidance for N95 FFRs**	LMIC Availability	Operator Hazard*	Startup Costs	Recurring Costs	Time per cycle	Protocol Available	Typical Scale of Operation	Requires electricity	Use for surgical masks	Number of Studies**	Scientific References	Implementation References
<b>Methods being implemented in hospitals</b>																	
Vaporized Hydrogen Peroxide	**			Yes	FDA EUA <sup>1</sup> , CDC <sup>2</sup> , NIOSH FE pass <sup>3</sup>	Low	Chemical <sup>4</sup>	\$\$\$	\$\$\$	4-8 hours	Hospital- implemented	Facility	Yes		+++	4 <sup>###</sup>	5, 6, 7
Hydrogen Peroxide Gas Plasma	**			Yes	FDA EUA <sup>1</sup> , CDC <sup>2</sup> , NIOSH FE pass <sup>3</sup>	Low	Chemical <sup>4</sup>	\$\$\$	\$	2-6 hours	Hospital- implemented	Facility	Yes		+++	4 <sup>###</sup>	8
UV-C Room	**			No	CDC <sup>2</sup> , NIOSH FE Pass <sup>3</sup>	Mid	Direct exposure <sup>4</sup>	\$\$\$	\$	System-dependent <sup>5</sup>	Hospital- implemented	Facility	Yes		+++	9 <sup>###</sup>	10 <sup>†</sup> , 11, 12
UV-C Cabinet	**			No	CDC <sup>2</sup> , NIOSH FE Pass <sup>3</sup>	Mid	Direct exposure <sup>4</sup>	\$\$	\$	System-dependent <sup>5</sup>	Facility	Yes			+++	9 <sup>###</sup>	10 <sup>†</sup> , 13 <sup>†</sup> , 14 <sup>†</sup>
Humid Heat Oven	**			No	FDA EUA <sup>15</sup> , CDC <sup>2</sup>	High	#	\$	\$	60 min	Generic SOP	Facility	Yes	Possibly; sparse data	++	16 <sup>###</sup>	17 <sup>†</sup> , 18 <sup>†</sup>
<b>Methods not well-established, but under investigation</b>																	
Microwave Generated Steam	**			No	-	High	#	\$	\$	2-3 min	Generic SOP	Individual	Yes		+	16 <sup>###</sup>	19, 20
Room Temperature Waiting Time	**			No	CDC <sup>2</sup>	High	#	\$	\$	7 days	Generic SOP	Both	No	Yes	++	21 <sup>###</sup>	
Liquid Hydrogen Peroxide	**			Yes	CDC <sup>2</sup>	High	Chemical <sup>4</sup>	\$	\$	24 hours	None	Individual	No		+	4 <sup>###</sup>	22, 23, 24
Steam Autoclave	**			No	NIOSH FE pass <sup>3</sup>	High	#	\$\$\$\$	\$	<60 min	None	Facility	Yes		++	16 <sup>###</sup>	23, 25, 26
Dry Heat Oven	**			No	NIOSH FE pass <sup>3</sup>	High	#	\$\$	\$	>60 min	Generic SOP	Facility	Yes		++	16 <sup>###</sup>	23
Container Immersion in Boiling Water	**			No	-	High	#	\$	\$	45 min	Generic SOP	Individual	No		+	16 <sup>###</sup>	27 <sup>†</sup>
Multicooker	**			No	-	High	#	\$	\$	30 min	Generic SOP	Individual	Yes		+	16 <sup>###</sup>	28, 29
Chlorine Dioxide commercial system	**			Yes	NIOSH FE pass <sup>3</sup>	Low	Chemical <sup>4</sup>	\$\$\$\$	\$	1-12 hours	Generic SOP	Facility	Yes		++	30, 31	
Chlorine Dioxide small scale	**			Yes	NIOSH FE pass <sup>3</sup>	High	Chemical <sup>4</sup>	\$	\$	1-12 hours	Generic SOP	Both	No		++	30, 31	
Ozone	**			Yes	NIOSH FE pass <sup>3</sup>	Low	Chemical, environmental <sup>4</sup>	\$	\$	3-6 hours	None	Both	Yes		+	32	

<b>Methods that are NOT recommended for use</b>																	
Alcohol submersion				Yes	Not recommended	-	#	-	-	-	-	-	-	-	+++		22, 23
Bleach submersion				Yes	Not recommended	-	Chemical <sup>4</sup>	-	-	-	-	-	-	-	+++		22, 23
Soapy water submersion				No	Not recommended	-	-	-	-	-	-	-	-	-	++		23
Sunlight				No	Not recommended	-	-	-	-	-	-	-	-	-	++	9 <sup>###</sup> , 21 <sup>###</sup> , 33	
Ethylene Oxide				Yes	CDC Caution	Low <sup>6</sup>	Chemical, carcinogen <sup>4</sup>	-	-	-	-	-	-	-	++		22, 23, 24
Formaldehyde Vapor				Yes	Not recommended	-	Chemical, carcinogen <sup>4</sup>	-	-	-	-	-	-	-	+		35
Gamma Ray				No	Not recommended	-	Direct exposure <sup>4</sup>	-	-	-	-	-	-	-	+		36 <sup>†</sup>

Legend	RED = Not expected to yield appreciable decontamination	RED = unlikely to inactivate SARS-CoV-2 to 3-log levels on N95 FFR material	RED = <95% Filtration Efficiency or poor N95 fit after method use	RED = Residue removal required and safe removal has NOT been clearly demonstrated on N95 FFRs.	* N95 respirators reprocessed with high-level disinfection techniques can be returned in a pooled fashion to any new user	** N95 respirators reprocessed with low-, or intermediate-level disinfection techniques must be returned to the initial user to prevent cross-contamination of other pathogens (e.g. bacteria, bacterial spores)	*** Refers to regulatory approval specific to the use of this method for N95 decontamination and reuse, including methods for removal of potential toxic residues.	The existence (or lack thereof) of an FDA EUA is not a definitive statement about effectiveness (or ineffectiveness) of a treatment method.	% EIC more common in Latin America, low availability in sub-Saharan Africa	& UV-C decontamination depends on dose; at least "10cm" must be applied to all N95 surfaces for 3-log inactivation of enveloped viruses.	Because dose = irradiance x time, and irradiance of UV-C systems can vary widely, the time per cycle will vary but is typically on the order of minutes to hours.	# Operator Hazard = ALL methods carry risk of self-contamination to the operator. PPE for droplet & contact precautions should be worn (Mask, gloves, long-sleeved gown, eye protection) while reprocessing PPE	\$ Startup Costs: \$\$\$\$ = \$50,000, \$\$\$ = \$5,000 - \$50,000, \$\$ = \$500 - \$5,000, \$ = <\$500	\$ Recurring Costs: \$\$\$\$ = \$10 per respirator, \$\$\$ = \$1-\$10 per respirator, \$\$ = \$0.10 - \$1 per respirator, \$ = <\$0.10 per respirator	# Studies refer to peer-reviewed literature on specific method use (both supporting and controverting) for decontamination of N95 respirators (including pre-print studies closely reviewed by N95DECON)	### Citation refers to N95Decon Technical Report (summary report with multiple citations therein)	† At least one author is affiliated with N95Decon		
GREY = Unknown due to insufficient or conflicting data	YELLOW = Some level of decontamination. Demonstrated to inactivate SARS-CoV-2 or similarly resistant viruses by at least 3-log. Will NOT inactivate bacterial spores.	YELLOW = Likely to inactivate SARS-CoV-2 to at least 3-log, demonstrated only with similar pathogens on N95 FFR material	YELLOW = Mixed or limited results for filtration after method use	YELLOW = Residue removal required but safe removal for N95 FFRs demonstrated in literature.	GREEN = High-level disinfection (Validated process used to render a product free of all forms of viable microorganisms to 10 <sup>6</sup> sterility assurance level) (37, 38, 39)	GREEN = Demonstrated to inactivate SARS-CoV-2 to at least 3-log levels on N95 FFR material	GREEN = >95% Filtration Efficiency and passing fit test after method use	GREEN = No residue removal required											

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