FACT SHEET FOR HEALTHCARE PERSONNEL

Duke Decontamination System for Decontaminating Compatible N95 Respirators January 21, 2021

Coronavirus
Disease 2019
(COVID-19)

You have been given a **decontaminated N95 respirator** that has been decontaminated using a decontamination system that is authorized to decontaminate compatible N95 respirators **for multiple-user reuse by healthcare personnel (HCP) in a healthcare setting** (i.e., HCP may receive a different respirator following decontamination than the one they had previously used) to help prevent HCP exposure to pathogenic biological airborne particulates during the COVID-19 pandemic.

This Fact Sheet informs you of the significant known and potential risks and benefits of the emergency use of decontaminated, compatible N95 respirators. These compatible N95 respirators have been decontaminated using the Duke Decontamination System with Hydrogen Peroxide Vapor (hereafter referred to as "decontaminated N95 respirators" and "Duke Decontamination System" throughout this Fact Sheet).

Whether or not you use a surgical mask, respirator, or face shield, always follow infection control measures: wash hands, cover coughs and sneezes, stay home if you may be sick.

What are the symptoms of COVID-19?

Many patients with confirmed COVID-19 have developed fever and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing). However, limited information is currently available to characterize the full spectrum of clinical illness associated with COVID-19. Based on what is known about the virus that causes COVID-19, signs and symptoms may appear any time from 2 to 14 days after exposure to the virus.

Public health officials have identified cases of COVID-19 infection throughout the world, including the United States, which may pose risks for public health. Please check the CDC webpage for the most up to date information.

What do I need to know about the emergency use of the Duke Decontamination System and decontaminated N95 respirators?

- The Duke Decontamination System has been authorized for emergency use to decontaminate compatible N95 respirators for multiple-user reuse by HCP during the COVID-19 pandemic to prevent wearer exposure to pathogenic biological airborne particulates, including SARS-CoV-2.
- Compatible N95 respirators are either authorized NIOSH-approved respirators or respirators that are authorized and listed in Exhibit 1 to FDA's emergency use authorization (EUA) for non-NIOSHapproved imported filtering facepiece respirators (FFRs) that are not manufactured in China, and that do not have exhalation valves or a duck-billed design, and do not contain cellulose-based materials or antimicrobial agents.
- The Duke Decontamination System is not authorized for use with the following:
 - Respirators containing cellulose-based materials;
 - Respirators containing exhalation valves;
 - Respirators containing antimicrobial agents;
 - o Respirators containing a duck-billed design; and
 - Respirators that are authorized by the Non-NIOSH Approved Disposable Filtering Facepiece Respirators Manufactured in China
- Successful testing on decontaminated N95
 respirators demonstrated acceptable performance
 through 4 decontamination cycles for sporicidal
 activity, viricidal activity, filtration efficiency,
 breathability, form fit testing, and strap integrity
 testing.
- Preparing compatible N95 respirators for decontamination:
 - Remove the compatible N95 respirator per institutional procedures
 - Place compatible N95 respirators into the collection bin located in your patient care location

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 Discard if decontaminated 4 times or if visibly soiled or damaged

Use of decontaminated N95 respirators:

- ✓ Decontaminated N95 respirators are not sterile
- ✓ HCP must perform a user seal check of the decontaminated N95 respirator according to OSHA standards prior to beginning a shift. If the user seal check does not pass, the respirator must be discarded
- ✓ HCP must receive the same model of decontaminated respirator for which they have been fit tested. If such model of respirator is unavailable, then Duke must provide HCP with fit testing prior to using an alternative model of decontaminated compatible N95 respirator
- ✓ Inspect respirators <u>after each use</u> prior to submission for decontamination
- Discard respirators with <u>visible soiling</u> (e.g., blood) <u>or damage – do not use and do not send</u> for decontamination
- √ The number of tick marks indicates the number of times a respirator has been decontaminated (maximum 4 times)
- Report problems with decontaminated N95 respirators to Duke Health.
- Monitor yourself for signs and symptoms of potential infection with SARS-CoV-2 or other respiratory infection for up to and including 14 days after last contact with the SARS-CoV-2 virus and related material, and promptly report such information to Duke Health.
- Report damage or discoloration observed upon receipt of the decontaminated N95 respirators, and potential exposure of HCP from breaks in or other damage to or degradation of the decontaminated N95 respirators to Duke Health.
- Respirators that are NIOSH-approved before decontamination (https://wwwn.cdc.gov/niosh-cel/) only retain their NIOSH approval status postdecontamination if the respirator manufacturer permits the use of the decontamination method with the specific system and cycle parameters. To

determine the NIOSH approval status of a specific decontaminated NIOSH-approved respirator, please check with the respirator manufacturer and/or check the respirator labeling. If a respirator is no longer NIOSH-approved after use of the particular decontamination method, its performance (i.e., fit, filtration, and breathability) might not consistently meet NIOSH-approved N95 standards.

Use appropriate personal protective equipment (PPE) when caring for individuals suspected of having COVID-19 as outlined in the CDC webpages, including *Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the COVID-19 Pandemic, Infection Control, and FAQ on PPE.*

Current information on COVID-19 for healthcare personnel is available at CDC's webpage, *Information for Healthcare Professionals* (see links provided in "Where can I go for updates and more information" section).

What are the known and potential benefits and risks of using decontaminated N95 respirators that were decontaminated using the Duke Decontamination System?

Potential benefits include:

- May help prevent exposure to airborne pathogens, and therefore reduce the risk of infection or illness
- Extends the usability of compatible N95 respirators by allowing for decontamination and reuse

Potential risks include:

- Failure of filtration efficiency
- Reduced breathability
- Strap failure and ineffective face-fit
- Reused respirators may not have been effectively decontaminated of SARS-CoV-2 or other pathogens
- Cross-contamination from ineffective decontamination

Overview of the Duke Decontamination System

The Duke Decontamination System is a self-contained decontamination product that uses vapor phase

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hydrogen peroxide (VHP) for decontamination of compatible N95 respirators that are contaminated or potentially contaminated with SARS-CoV-2 or other pathogenic microorganisms.

Each decontamination cycle in the Duke
Decontamination System consists of injecting VHP into
the decontamination room until achieving a saturated
atmosphere indicated by micro condensation;
maintaining the VHP exposure for a 20-minute dwell
time; and allowing the VHP to off gas to a level below 1
ppm prior to post decontamination processing. A
minimum of one biological indicator is dispersed
throughout the system to indicate a successful
decontamination cycle. This decontamination system
enables the reuse of compatible N95 respirators that
would otherwise be disposed of after a single use.
However, respirators that are visibly soiled must be
discarded and not reused or decontaminated.

What is an EUA?

The United States Food and Drug Administration (FDA) has made the emergency use of the Duke Decontamination System to decontaminate compatible N95 respirators available under an emergency access mechanism called an Emergency Use Authorization (EUA). The EUA is supported by the Secretary of Health and Human Service's (HHS's) declaration that circumstances exist to justify the emergency use of medical devices due to insufficient supply during the COVID-19 pandemic.

The Duke Decontamination System has been made available under an EUA and has not undergone the same type of review as an FDA-approved or cleared device. FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, available alternatives, and based on the totality of scientific evidence available, it is reasonable to believe that the Duke Decontamination System may be effective at preventing HCP exposure to pathogenic biological airborne particulates during periods of insufficient respirator supply during the COVID-19 pandemic by decontaminating, for a maximum of 10 decontamination cycles per respirator, compatible N95

respirators that are contaminated or potentially contaminated with SARS-CoV-2 or other pathogenic microorganisms.

The EUA for the Duke Decontamination System is in effect for the duration of the COVID-19 declaration justifying emergency use of medical devices, unless terminated or revoked (after which the products may no longer be used).

Where can I go for updates and more information?

CDC webpages:

General: https://www.cdc.gov/COVID19

Healthcare Professionals:

https://www.cdc.gov/coronavirus/2019-nCoV/guidance-

hcp.html

Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the COVID-19 Pandemic:

https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html

Infection Control: https://www.cdc.gov/coronavirus/2019-ncov/infection-control/index.html

FAQ on PPE:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-use-faq.html

FDA webpages:

General: www.fda.gov/novelcoronavirus

EUAs: https://www.fda.gov/medical-devices/emergency-situations-medical-devices/emergency-use-authorizations