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COVID-19 PPE Questions

Define the kinds of equipment that are considered standard/universal precautions.

Per OSHA guidelines, universal precautions are an approach to infection control to treat all human blood and certain human body fluids as if they were known to be infectious for HIV, HBV and other bloodborne pathogens, (Bloodborne Pathogens Standard 29 CFR 1910.1030(b) definitions).

Bloodborne Pathogen Standard 29 CFR 1910.1030(d)(1) requires:

- Employees to observe Universal Precautions to prevent contact with blood or other potentially infectious materials (OPIM).
- Under circumstances in which differentiation between body fluid types is difficult or impossible, all body fluids shall be considered potentially infectious materials.
- Treat all blood and other potentially infectious materials with appropriate precautions such as:
 - Use gloves, masks, and gowns if blood or OPIM exposure is anticipated.
 - Use engineering and work practice controls to limit exposure.

The CDC recommends Standard Precautions for the care of all patients, regardless of their diagnosis or presumed infection status. Standard Precautions apply to 1) blood; 2) all body fluids, secretions, and excretions, except sweat, regardless of whether or not they contain visible blood; 3) non-intact skin; and 4) mucous membranes. Standard precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in hospitals.

Standard precautions includes the use of: hand washing, appropriate PPE (e.g., gloves, gowns, masks, eye protection, etc.) whenever touching or exposure to patients' body fluids is anticipated.

CDC guidance for funeral directors handling decedents indicates that funeral professionals should follow [Standard Precautions](#), including additional personal protective equipment (PPE) if splashing of fluids is expected, during both transfers and embalming. It is always better to don (put on) more PPE and be safe than sorry. See: [Frequently Asked Questions about Personal Protective Equipment \(CDC\)](#).

All PPE should be donned (put on) and doffed (taken off) and disposed of properly.

What PPE should funeral directors use during a transfer? Once the decedent is in a body bag and the bag has been disinfected, must a funeral professional still use full PPE?

Per CDC guidelines, if it is necessary to transfer a body to a bag, follow Standard Precautions, including additional PPE if splashing of fluids is expected. See: [Frequently Asked Questions about Personal Protective Equipment \(CDC\)](#)

For transporting a body after the body has been bagged, disinfect the outside of the bag with a product with [EPA-approved emerging viral pathogens claims](#) is expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).

Wear disposable nitrile gloves when handling the body bag.

After cleaning and removal of PPE, perform hand hygiene by washing hands with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water is not available. Soap and water should be used if the hands are visibly soiled.

What kind of PPE should a funeral director don when making a removal at a hospital, nursing home or other healthcare facility?

Per CDC guidelines, follow Standard Precautions when making a transfer from any facility. See: [Frequently Asked Questions about Personal Protective Equipment \(CDC\)](#).

Should we wear masks going into a house if we know the decedent is infected?

Anyone who enters a home of an infected individual should don a face mask and proper PPE. See: [Frequently Asked Questions about Personal Protective Equipment \(CDC\)](#)

In lieu of disposable masks, what respirators are recommended?

NFDA is aware of the challenges with PPE. We have spent more than a decade building relationships with federal officials responsible for responding to public health crises and mass-fatality situations. We are leading a discussion with federal officials about ensuring funeral home staff are on the priority list for receiving these critical supplies.

Already, the White House has issued an [Executive Order](#) that would fast-track FDA approval and domestic production of PPE and other pharmaceutical and medical supplies needed by those on the front lines of the COVID-19 pandemic.

During a live NFDA Facebook event with the CDC on March 16, the federal experts recommended that funeral homes that are concerned about a potential or imminent shortage of PPE should contact their state health department or local healthcare coalition as they are best positions to help troubleshoot through potential shortages. The CDC has offered this guidance:

- [Strategies for Optimizing the Supply of N95 Respirators](#)
 - [Conventional Capacity Strategies](#)
 - [Contingency Capacity Strategies](#)
 - [Crisis/Alternate Strategies](#)

We will continue to provide updates on this essential issue.

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