



## AIRTEC

### Powered Respirator Kit

**D1257**

## Cleaning

The **D1257** is part of a system that helps reduce exposure to certain airborne contaminants. Before use the wearer must read and understand these user instructions. Follow all local regulations. Misuse may result in injury, sickness or death. For correct use consult these user documents. The Headwear, air hose and belt can be single use items.

(Please also follow 3W Medical Cleaning and Disinfection after interaction with known or suspected Acute respiratory illness from novel or emerging pathogens e.g. Coronavirus SARS-CoV-2 COVID-19)

Important the filter should never be cleaned only replaced for new, the filters will be contaminated with the virus, follow disposal guidelines from your Infection Prevention Controller (IPC). (Keep a record of each PAPR blowers unique serial number, and record this with the filter inserted and disposal date)

Always follow your Healthcare Facility IPC guidelines for PPE wear during decontamination procedures. We recommend following the Public Health England, National Infection Prevention and Control Manual April 2020. (Routine decontamination or reusable non-invasive patient care equipment).

If using the air hose cover should have been disposed of prior to the cleaning and disinfection process, as part of the doffing sequence.

### Decontaminate

Remove debris or residue with warm water and mild detergent. pH neutral (pH6-8), soft cloth or paper. Rinse and dry prior to disinfection.

Discard comfort bands if still present from hood suspension cradle.

Remove belt, wash each surface if reusing.

1. Start with the breathing hose still while attached to the blower housing, decontaminate the blower housing and battery.
2. Wash hood suspension cradle and internal hood then move to external hood, starting at air hose portal, and suspension ratchet, moving to the front visor (clean to dirty protocol)
3. Remove battery, clean battery, and battery cavity of blower (trying not to wet contact pins).
4. Rinse and dry.

### Disinfect

Use Healthcare approved disinfectant, 1000 parts per million available chlorine, ppm av cl./Clinell Wipes. (as listed on 3W Medical coronavirus care)

Surfaces must be visibly wet with disinfectant for 1 full minute.

Disinfect each surface, following the same sequence as the cleaning:-

1. Breathing Hose, top of blower outlet. Remove breathing hose from blower, take care not to allow liquid to drip into blower outlet.
2. Disinfect rest of blower body, battery, belt and headcover.

### Rinse

Rinse thoroughly with fresh water to remove all disinfectant residue from all surfaces.

All **D1257** equipment should be thoroughly dried and stored in a clean area. Remove disinfection solution from the PAPR assembly by wiping with a clean cloth dampened with fresh water. Rinse the cloth often to help ensure effective removal of the disinfectant solution. Do not allow liquid to enter the air outlet port.

All components should be allowed to air-dry completely prior to reuse or storage. Air dry in an uncontaminated atmosphere, temperature not to exceed 49 °C (120 °F).

Breathing tube drying can be accelerated by connecting it to the motor/blower unit and using it to force air through the tube until dry.

If using this method, orient the blower and breathing tube in such a way that prevents liquid from entering the blower. The comfort bands should be fitted to the internal suspension cradle just before starting the donning procedure.

## Maintenance

Examine the condition of the fabric, head suspension, visor, outer shroud and as applicable, inner shroud, collar. Check that there are no cracks, rips, dents, holes, tears, or other damage.

- Look closely at the seams. Ensure seams are intact and there are no gaps in the seams. There should be no tears or holes that could permit contaminated air to enter the hood or headcover.
- Look for scratches or other visual distortions that could make it difficult to see through the visor. Examine the head suspension for cracks or other damage.
- Examine the entire breathing tube. Look for tears, holes, cracks, distortions, or any other sign of wear or damage. Bend the tube to verify that it is flexible. The breathing tube should fit firmly into the air source connection.

If you discover any signs of wear and/or damage, discard the component and replace it with a new one. Failure to do so may affect respirator performance and reduce the degree of protection provided, this may result in sickness or death.

### When to Change PAPR Filters

Particulate filter change schedules for PAPRs are determined by two main considerations: filter loading (clogging of the filter from captured particulates) and a facility's infection control policy.

In healthcare facilities, PAPR filter change schedules for airborne biological aerosols are primarily determined by the facility's infection control policy. The infection control policy should be developed based on applicable national and local guidelines.

Most healthcare organizations develop their filter use and reuse policy based on the biological agent of concern, likelihood of the filter becoming contaminated, and potential for patient-to-patient and patient-to-worker cross-contamination.

While the outside filter body can be wiped down for cleaning, do not attempt to clean the filter media inside the filter body. When changing the PAPR filter, follow the hygiene and infection control practices established by your employer based on the specific contaminants to which the respirator assembly has been exposed and the cleaning agent used.

Dispose of the filter according to your infection control policy and all applicable requirements.

Close consideration needs to be given to the policies and practices used for cleaning the PAPR. It is important to remember that a PAPR is used to filter out contaminants from the air, and therefore contaminants are concentrated on the filter/cartridge itself, and potentially on other surfaces of the PAPR system.

