

Putting On / Taking Off PPE when Observing Health Care Workers

Supports health care workers caring for unstable or confirmed cases of viral hemorrhagic fever (VHF)

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Recommended steps for a trained observer to put on PPE

Key considerations:

- The specific putting on and taking off instructions will vary depending on the Personal Protective Equipment (PPE) used. Organizations are to develop and adapt protocols that are suitable for the PPE they have selected (similar or higher level of protection than what is recommended in this document).
- Organizations ensure that trained observers are trained and have practiced safely and correctly putting on, using, and taking off PPE.
- Organizations ensure that trained observers demonstrate competency in PPE use before assisting a health care worker (HCW).
- PPE is stored and put on in a designated clean area outside of contaminated zone (patient care area).
- The trained observer should not enter the patient's room but must be able to clearly instruct and observe putting on and taking off PPE and assist (if needed and as per organizational policy).
- A mirror in the designated area can be useful for the trained observer while putting on PPE.



1 – Gather recommended PPE for the trained observer*

- Well-fitting fluid-resistant medical mask.
- Disposable full-face shield.
- Disposable fluid-resistant cuffed sleeve gown that covers to mid-calf.
- Gloves with extended cuffs to pull over gown cuffs.

2 – Clean hands with ABHR

3 – Put on gown

4 – Put on medical mask

5 – Put on full face shield

6 – Put on gloves and extend over gown cuffs



In case of any contamination, report to your Infection Prevention and Control (IPAC) team / Occupational Health coordinator and follow safety steps as per organizational policy.

*Refer to [Infection Prevention and Control Management of Viral Hemorrhagic Fever in Acute Care](#) for PPE specifications.

Recommended steps for a trained observer to take off PPE

Key considerations:

- The specific putting on and taking off instructions will vary depending on the PPE used. Organizations are to develop and adapt protocols that are suitable for the PPE they have selected (similar or higher level of protection than what is recommended in this document).
- Organizations ensure that trained observers are trained and have practiced safely and correctly putting on, using, and taking off PPE.
- Organizations ensure that trained observers demonstrate competency in PPE use before assisting a HCW.
- Designate an area or zone for PPE removal (e.g., anteroom or adjacent vacant patient room) if available. Alternatively, a clearly demarcated area inside the patient room near the door can be designated for PPE removal and not used for any other purpose.
- The designated PPE removal area should contain a leak-proof biohazard waste container, a stool that can be cleaned and disinfected, alcohol-based hand rub (ABHR), hospital-approved disinfectant wipes and a clean section where gloves can be stocked. Having a mirror can be useful while putting on PPE.
- Post signage within the designated area outlining each step of the process of taking off PPE.
- Take care to prevent self-contamination and contamination of the surroundings during removal.
- Discard all PPE in a leak-proof biohazard waste container.
- Frequently clean and disinfect the PPE removal area, including after each individual has removed PPE, if possible. This cleaning can be achieved by having environmental services put on PPE (minimum that of a stable patient) and clean the PPE removal area.

1 – Inspect gloves for contamination

- If visibly soiled, disinfect gloves with ABHR or disinfectant wipe prior to removing gloves.

2 – Remove gloves using glove-to-glove technique

- Perform hand hygiene with ABHR on bare hands, allow hands to dry.

3 – Remove gown

- Unfasten the gown.
- Pull gown away from body, rolling inside out touching only the inside of the gown.

4 – Perform hand hygiene with ABHR



5 – Remove full-face shield

- Remove the face shield by tilting the head slightly forward, grasping the rear strap and pulling it gently over the head and allowing the face shield to fall forward, then discard.
- Care must be taken not to touch the face when removing the face shield.
- Avoid touching the front surface of the face shield.

6 – Remove mask

- Remove mask using the ear loops, pull forward away from face and dispose into a leak-proof biohazard waste container.

7 – Perform hand hygiene with ABHR

Sources

Ontario Agency for Health Protection and Promotion (Public Health Ontario). Infection prevention and control management of viral hemorrhagic fever in acute care. 2nd ed. Toronto, ON: King's Printer for Ontario; 2026. Available from: https://www.publichealthontario.ca/-/media/Documents/V/26/vhf-ipac-acute-care.pdf?&sc_lang=en

Centers for Disease Control and Prevention (CDC). PPE: confirmed patients and clinically unstable patients suspected to have VHF: for health care providers [Internet]. Atlanta, GA: CDC; 2024 May 9 [cited 2026 Jun 16]. Available from: <https://www.cdc.gov/viral-hemorrhagic-fevers/hcp/guidance/ppe-clinically-unstable.html>

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