

Use and Care of Cloth Face Coverings (aka Homemade Masks)

Background: The Centers for Disease Control (CDC) recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies), especially in areas of significant community-based transmission. UVMHC and UVMHN recommend employees wear cloth face coverings while in locations outside of direct patient care areas.

Purpose: The purpose of this guidance is to help health care workers follow best practices for using and caring for cloth face coverings. These recommendations represent our best attempt at synthesizing the available information. Little empirical data on SARS-CoV2 on fabric exists. We have assumed that SARS-CoV2 will be susceptible to the same agents and interventions as other coronaviruses. As this is a fluid area, recommendations may change over time.

What is a cloth face covering?

A cloth face covering (CFC) (often referred to as a homemade mask during the COVID19 pandemic) is a facial covering made of multiple layers of cloth fabric. For the purpose of this missive, it specifically excludes procedure (surgical) masks, N-95 masks; and paper dust masks (for example those used when sanding wood).

When should I wear a cloth face covering?

A cloth face covering should only be used in conjunction with all other COVID-19 preventive recommendations. It is not a substitute for physical distancing, handwashing, or staying at home. For health care workers (HCWs), the recommendation is to wear the cloth face covering while in the public or in the hospital or clinic complex until seeing patients. When seeing patients, HCW should wear procedure (surgical) masks per UVMHC and UVMHN policy. Once a HCW begins wearing a surgical mask, they should continue to wear that same surgical mask for the duration of time seeing patients. Cloth face coverings are NOT considered personal protective equipment (PPE). Once the HCW has completed clinical duties and has left the clinical environment, they may resume wearing the cloth face covering until they get home. Avoid donning and doffing the mask repeatedly. Health care workers (and others) should wash their hands before and after touching the cloth face covering.

How does one safely remove a used cloth face covering?

Individuals should be careful not to touch their eyes, nose, and mouth when removing their cloth face covering and wash hands immediately after removing. Remove the mask by the straps that loop over the ears or tie behind the head. If the cloth face covering has two ties, untie the bottom tie first.

What should I do with the cloth face covering when not wearing it in the hospital or clinic?

The cloth face covering can be placed in a paper bag with your name on it or hung from an iv pole or hook.



Should cloth face coverings be washed or otherwise cleaned regularly?

Cloth face coverings should be routinely washed depending on the frequency of use but if possible, daily. Factors that suggest immediate washing include visible soiling and wetness.

How should I wash my cloth face covering?

The cloth face covering can be washed with other clothing in a washing machine using standard detergent. It is not clear that hot water has any advantage over cold water, as the virus is an enveloped virus susceptible to detergent washing. Drying in a dryer is likely very effective in inactivating SARS-CoV2. Hand washing with soap and water followed by drying in a dryer is also fine. Handwashing in a dilute bleach bath followed by drying in dryer is also likely effective. If the cloth face covering contains removable coffee or charcoal filters, these should be removed before washing.

Are there other ways to sterilize cloth face coverings?

While some studies have suggested that microwaving fabric on high for three minutes is effective at inactivating respiratory viruses, some are wary of this technique, as this has occasionally led to home fires. Also, if using a microwave, be sure to remove any metal pieces. Ironing at high temperature (e.g. cotton setting) until the cloth is hot should be effective since heating to 60C or higher temperature for a specified time is an acceptable method of SARS-CoV2 inactivation in biohazard laboratories. Given how long the virus can be detected on porous materials, simply allowing the mask to hang dry for three days (shorter if exposed to sun and warmer temperatures) should also be effective.