



# CHILDREN AND FACEMASKS

## ....TO MASK OR NOT TO MASK....



### Why should children wear facemasks?

- 🐾 Provide a physical barrier between the mouth/nose and the immediate environment
- 🐾 Block large particle droplets from coughs and sneezes

### Who should wear facemasks?

- 🐾 Children presenting with influenza like illness (ILI)
- 🐾 Children presenting with immuno suppression or chronic illness
- 🐾 Children with ILI who leave the hospital/exam room to go to the bathroom or diagnostic procedures
- 🐾 Healthy children in a crowded healthcare setting (e.g. emergency room waiting area)

### Who is at higher risk for infection?

- 🐾 Children under 5 years of age
- 🐾 Children who have asthma, chronic pulmonary, cardiovascular, hepatic, hematological, neurologic, neuromuscular or metabolic disorders such as diabetes
- 🐾 Children who are immunosuppressed (caused by medications or by HIV)
- 🐾 Children and adolescents who are receiving long term aspirin therapy and who might be at risk for experiencing Reyes Syndrome after influenza virus infection

### How to keep facemasks on children?

- 🐾 If available, ideally use a pediatric sized/child friendly mask
- 🐾 Educate children (and families) on the importance of keeping the mask on even when talking, coughing or sneezing
- 🐾 Make it fun for children:
  - 🧼 Create a game for putting/keeping the mask on (e.g. superhero type mask)
  - 🧼 Use of positive reinforcement measures (e.g. stickers)
  - 🧼 Use older children as role models for keeping them on (e.g. older siblings)
  - 🧼 Praise child for a job well done

## Assessing pediatric patients wearing facemasks

-  Good assessment of the pediatric patient is important, especially those under 6 months who cannot receive the influenza vaccine. Be alert to subtle changes.
-  Do not use facemasks on pediatric patients who are anxious, restless, vomiting, lethargic, or in respiratory distress
-  Routinely assess children wearing a mask, **especially if quiet**, to assure that their condition is not deteriorating
-  Be aware of the risk of misidentifying children when multiple siblings are wearing masks and undergoing treatment

## What to do when supplies of pediatric facemasks are limited

-  Promote and educate on cough and sneeze etiquette
  -  If available, review learning materials (e.g. CDC brochures, Sesame Street cough etiquette video)
  -  Provide sufficient hand sanitizer, tissues or wipes and disposal containers
-  Fold adult sized masks in half and fit them across their small faces
  -  Ask children to decorate their “special” mask (non-toxic markers, stickers, crayons)
-  Cohort symptomatic (influenza like illness) children
  -  If separating siblings (families), be sure to have enough staff members to assist. If this is not possible, consider separating families with flu symptoms from other well families and children
-  Avoid close contact - keep healthy children at least 6 ft apart from ILI patients
-  Adopt visitor policies, restricting children during a pandemic outbreak



### Remember to:

**Properly dispose of used pediatric facemasks and wash your hands**

### References:

- 1) Hohenhaus, Susan M., Responding to the Threat of Pandemic Flu in Pediatric Patients. ENA Connection. 2009 Nov; 3.3 (10): 8
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- 3) School Nurse Emergency Care Course, Fifth Edition. Maywood, IL: Illinois Emergency Medical Services for Children; 2016.
- 4) Esther Munoz, RN, BSN, CIC, When and How to Wear A Facemask. Phoenix Children's Hospital. 2009

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