MADISON COUNTY MEMORIAL HOSPITAL		
SUBJECT: Facial Coverings	POLICY #: IC-35	
DEPARTMENT: Infection Control	<b>PAGE</b> : 1 of 6	
REFERENCE: Florida Rule 59A-35.125 Standards for the Appropriate Use of Facial Coverings for Infection Control	APPROVED BY: Risk Management	
	DATE: 7/24/2023 REVISED DATE: 12/8/2025	

#### **PURPOSE**

To establish standards for the appropriate use of facial coverings/masks in accordance with Florida Rule 59A-35.125, ensuring safety, infection prevention, and clear conditions for requiring or opting out of facial coverings based on patient, visitor, and employee status.

#### **DEFINITIONS**

- A. **Common area** Areas in the health care setting where patients are not treated, examined, or diagnosed.
- B. **Employee** Any person employed or contracted by the facility, including clinical, administrative, maintenance, aides, contractors, students, and volunteers.
- C. **Patient** Individual receiving care from a health care practitioner or provider.
- D. **Visitor** Person present in the facility who is not a patient or employee.
- E. Sterile areas Locations where surgery or aseptic procedures are performed.
- F. **Sterile procedure** Aseptic procedure intended to minimize contamination and surgical site infection.
- G. **Mask/Facial Covering** A facial covering that covers the nose and mouth, including procedure masks or respirators. *Respirators require OSHA-compliant fit-testing when used for airborne protection.*

#### **POLICY**

Madison County Memorial Hospital may require the use of facial coverings only under conditions permitted by Florida Rule 59A-35.125 and may encourage voluntary masking during times of increased respiratory illness prevalence. Facial covering use may differ for patients, visitors, and employees depending on health status, location, and infection risk.

#### **PROCEDURE**

### A. Patients

Patients may only be required to wear a facial covering when in a common area and exhibiting signs/symptoms of or having a diagnosed infectious disease spread by droplet or airborne transmission, per FL 59A-35.125(2).

#### **B.** Visitors

Visitors may be required to wear a facial covering only when:

- 1. Exhibiting signs/symptoms of or diagnosed with droplet/airborne transmissible disease;
- 2. In sterile areas or locations where sterile procedures occur;
- 3. In an inpatient/clinical room with an infectious patient under droplet/airborne precautions;
- 4. Visiting an immunocompromised patient where masking is ordered for patient safety;
- 5. When requested by the patient.

### C. Employees & Contract Staff

Employees may opt-out of facial covering requirements **unless** one of the following applies. A mask or respirator is required when the employee is:

- 1. Conducting sterile procedures;
- 2. Working in sterile areas;
- 3. Caring for an immunocompromised patient where provider determines masking is necessary;
- 4. Caring for a patient under droplet or airborne isolation;
- 5. When requested by the patient;
- 6. Performing hazardous activities requiring facial protection by industry standards.

Respirator use (N95+) must follow OSHA fit-testing requirements.

#### D. General

MCMH may temporarily expand masking during respiratory outbreaks or as directed by Infection Control and Administration. Notification will be made via internal communication and signage.

#### **OPT-OUT PROCESS**

Patients & Visitors:

May request to opt out when safe alternative infection-control measures exist.

Requests will be reviewed by Infection Control or designee. Visitor opt-out requests may only be denied when no alternative method of infection control exists, per 59A-35.125(4)(b)

#### Employees/Contract Staff:

May opt-out unless conditions listed under Section C apply. Requests are reviewed by Infection Control/Employee Health. Documentation of opt-out approval should be maintained by Employee Health.

#### **EXCLUSIONS TO OPT-OUT**

Opt-out is not permitted if no safe alternative exists or if masking refusal compromises safety of others. Exclusions apply for:

- Symptomatic or infectious patient/visitor (droplet/airborne)
- Provider-determined medical or safety contraindication
- Sterile procedures/areas
- Immunocompromised patients requiring protection
- Droplet/airborne isolation
- PPE required to prevent physical injury or harm

### **COMMUNICATION/EDUCATION**

Activation of masking outside isolation scenarios must be approved by **Infection Control and Administration** based on clinical risk, outbreak conditions, or regulatory direction.

When masking requirements are active, communication will occur through signage, internal notification, safety huddles, and policy distribution. Policy will be updated promptly if state guidance changes.

# Appendix 1 – Masking Quick Chart for Staff

Situation	Mask Required?	Туре
Patient/visitor symptomatic respiratory	Yes	Surgical/Procedure Mask
Droplet Isolation	Yes	Surgical Mask
Airborne Isolation	Yes	N95/Respirator
Sterile Procedure/OR	Yes	Surgical/N95 per procedure
Immunocompromised patient w/ provider directive	Yes	Surgical Mask
Routine care w/o isolation	<b>Optional</b>	N/A

Visitors may request to opt-out of masking when a safe alternative infection-control method exists, per Section "OPT-OUT PROCESS" of this policy.

# **Appendix 2** — **Patient & Visitor Masking Guide**

Individual Type	Mask Required?	Conditions Where Mask May Be Required Under FL 59A-35.125
Patient	✓ Only in specific scenarios	<ul> <li>In common areas AND symptomatic or confirmed droplet/airborne disease</li> <li>Provider orders masking based on patient-specific risk</li> <li>Agreement with opt-out limitations when no safe alternative exists</li> </ul>
Visitor	✓ Only under defined conditions	<ul> <li>Symptomatic or diagnosed with droplet/airborne illness</li> <li>Entering sterile areas or where sterile procedure is occurring</li> <li>Visiting infectious patient under droplet/airborne precautions</li> <li>Visiting immunocompromised patient when provider requires masking</li> <li>When patient requests</li> </ul>
<b>Employee/Staff</b>	✓ When exclusions apply	See Appendix 3 — Employee Masking Matrix

Visitors and patients may request to opt out when a safe alternative infection-control option exists, as outlined in the policy Opt-Out section.

# **Appendix 3 – Employee Opt-Out Matrix**

## **Employee May Opt-Out?** Condition

× No	Sterile area and/or sterile procedure
X No	Droplet or airborne isolation
X No	Immunocompromised patient w/ provider directive
X No	OSHA PPE hazard requirement
✓ Yes	Routine care (no restrictions)
<b>√</b> Yes	Common areas / non-clinical unless conditions above apply

Employees may opt out of facial covering use unless one of the above **No Opt-Out** conditions is present, consistent with Florida Rule 59A-35.125(5).