



FAQ #1 N95s" TO "THINGS YOU NEED TO KNOW ABOUT N95s

- This type of mask is formally called the N95 Respirator (there are some variations with other letters in front of the N). It is seen as more protective than a surgical mask because it filters aerosols (tiny airborne particles).
- It is only proven to filter aerosols if it has been fit-tested to the user by a mask technician to ensure that there is a proper seal.
- Regardless of some internet stories, there is no evidence that COVID-19 is airborne (i.e., it is not in an aerosol state).
- In health care guidance documents, you may have come across the term “Aerosol Generating Procedures” (AGPs), that N95s are recommended for. These include very invasive procedures, such as intubating or extubating a patient. Things that a ND would never have to do.
- Except for these extreme procedures in intensive care settings, COVID-19 is transmitted by droplets, not aerosols. Appropriate droplet protection is the regular surgical mask (along with gloves and other PPE where required).
- This works both ways, in that it protects the practitioner, but also the patient from inhaling droplets in very close proximity (e.g., via a cough or sneeze).
- All of the current guidance in Ontario for any regular face-to-face care (except AGPs) is for surgical masks, not N95s.
- N95s are generally (in normal times) much more expensive than surgical masks and some users find them less comfortable. If you have N95s they can certainly be used (without fit testing being needed) just like a surgical mask for droplet protection, but they are designed to do much more, hence the higher cost.

If you are in the market for masks, it is my personal perspective that you only need surgical masks. I realize that these are hard to find and more expensive than usual. The OAND is working to find solutions to these problems.

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