Face Covering FAQs

On February 10, 2021, the Centers for Disease Control and Prevention (CDC) updated its guidance on the use of masks. The new CDC guidance provides information about choosing a mask, its fit, mask fitters and braces, double-masking and KN95s. An FAQ section is provided below.

In light of increasing case transmission due to the Delta variant, the University is again requiring the use of face coverings by all individuals, regardless of vaccination status, as more fully described below starting August 11, 2021. The requirements of this policy will be in place for at least the first weeks of the fall semester to aid in protecting the U-M community from the spread of COVID-19, including the Delta variant.

Except as otherwise allowed by this policy, U-M requires all students, staff, faculty, and visitors to wear a face covering that covers the mouth and nose when indoors on U-M property (including the Ann Arbor, Dearborn and Flint campuses as well as U-M controlled properties off campus) and when on U-M buses. Certain units, such as University of Michigan – Health, may issue local level policies that supersede this policy and must be followed as applicable.

Frequently Asked Questions

Why is the CDC issuing new guidance on Face Coverings?

This new guidance was issued to assist the public in improving the fit and filtration of masks to reduce the spread of COVID-19. To put this into context, it is important to understand that face coverings primarily provide a physical barrier that can help contain the spread of respiratory droplets when an infected person coughs, sneezes, or talks. This is considered source control. By covering their mouth and nose with a face covering a person is less likely to transmit the virus to others if they are asymptomatic or have unrecognized, early COVID-19 symptoms. Masks work best when everyone wears one. A face covering is not intended to fully protect the wearer but will stop some respiratory droplets from others. Throughout this pandemic, research has shown that the use of face coverings has reduced community transmission of COVID-19. A face covering also prevents the wearer from touching their nose and mouth with unwashed hands.

What are important Factors to Consider When Selecting a Face Covering?

The most important factors to consider when selecting a face covering are fit and comfort. A face covering should completely cover your nose and mouth, be secure under your chin and fit snugly against the sides of your face. It should be comfortable enough so you won’t feel the need to touch it often as you go about your day. Fit is the most important criteria to consider since a mask will only work if worn consistently. It must be easy to wear, and breathable.

In general, masks with layers can be more filtering than single layer masks and stop more respiratory droplets from getting through. The CDC recommends masks with two or more layers of washable, breathable fabric that fit comfortably on the face.

Can I wear a face shield or mask with an exhalation valve?
The use of a face shield as a substitute for a face covering is not allowed nor is the use of any face covering with an exhalation valve as supported by the Centers for Disease Control and Prevention.

**With the new variants of SARS-CoV-2 in circulation, should I get a better mask?**

When choosing a mask, it is recommended you focus on layers and fit. Cloth masks with two or more layers of washable breathable fabric or 3-ply disposable masks that fit well are both effective in preventing transmission of COVID-19 including the new variants.

**Should I Double Mask?**

You may consider double masking if your mask does not have multiple layers or does not fit well. You may choose to wear two cloth masks or wear one disposable mask under a cloth mask. The second mask should push the outer edges of the inner mask against your face to limit gaps.

Neither the CDC nor U-M is requiring the use of a double mask. It is not recommended to combine two disposable masks when double masking, since this will not improve fit. Importantly, because breathability often decreases as filtration increases, do not wear masks or double up on masks if this feels suffocating or makes breathing difficult.

**Should I wear a “mask fitter” or brace to improve my fit?**

The CDC’s new guidance mentions the use of a mask fitter or brace to prevent leakage. Mask fitters and braces are not in common use and are not preferable to choosing a mask with the best fit for you. Remember that the best mask is a comfortable one that you can wear all day.

**Can I get an N95 mask?**

An N95 is actually a high-efficiency respirator that must fit tightly to work properly. Most people find wearing an N95 respirator for extended periods to be very uncomfortable. N95 respirators are not abundant, so U-M allocates these masks to researchers and healthcare workers who absolutely need them for protection to work exposures other than Covid-19. There is also mandatory training, fit-testing and medical clearances required for people who need to wear an N95 respirator.

**What about KN95 masks?**

“KN95” is a designation for masks made in China with good filtration, but they have not been tested to verify compliance with U.S. standards. They typically have ear loops, which prevents a tight fit. A KN95 mask is not a substitute for an N95 respirator. While the FDA has given emergency use authorization for some brands if there is no alternative, there are many counterfeit and poor quality KN95 masks being sold. We recommend only purchasing these through our strategic vendors on Marketplace such as Fisher, Medline or Grainger to ensure quality.

If you choose to wear a KN95 mask, only use one KN95 mask at a time.

**What about KF94 and other masks?**

A great variety of other masks are being advertised, but many are untested, non-standard and poor quality. We do not recommend their purchase or use.