



# GET US PPE SHORTAGE INDEX

**FEBRUARY 2021**

All information in this index is derived from Get Us PPE's database of requests for Personal Protective Equipment (PPE) unless otherwise stated.

**MEDIA CONTACTS:**

Amanda Peery-Wolf | Ali Hickerson | Stephanie Zeller

PHONE: +1 (631) 853-9164

EMAIL: [media@GetUsPPE.org](mailto:media@GetUsPPE.org)

# Get Us PPE Shortage Index

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## ABOUT GET US PPE SHORTAGE INDEX

Founded by emergency physicians in March 2020, Get Us PPE is the largest national nonprofit getting personal protective equipment (PPE) to healthcare and other essential workers, free of charge. Our mission is to equitably provide PPE to the people most in need. To request PPE donations, frontline workers register their PPE needs on our site. This information has allowed us to amass the most comprehensive database of PPE shortages in the United States. The Get Us PPE Shortage Index is a monthly collection of proprietary summary metrics derived from this database.

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# PPE SHORTAGE INDEX KEY TAKEAWAYS

## February 2021

**In February 2021, requests for PPE decreased for the first time since September 2020, falling by 52%. However, frontline workers in 44 states reported they are still experiencing shortages of necessary PPE.**

**35% of frontline workers requesting N95 masks in February 2021 reported that their facility had no supply remaining — up from 28% in January.**

**Nonprofit and community organizations made more PPE requests than any other type of facility, with 17% of total February requests.**

**The previous administration only systematically collected data on PPE shortages in hospitals, leaving Get Us PPE to build the most comprehensive national database of shortages in other frontline facilities—many of which still do not have enough PPE.**

**The PPE shortage crisis has morphed into a supply-demand mismatch problem. Although domestic supply of PPE has increased over recent weeks, many small and under-resourced frontline facilities still cannot identify legitimate PPE sources or afford the new PPE on the market.**



### **DR. MEGAN RANNEY, CO-FOUNDER & ER DOCTOR**

Megan Ranney, MD, MPH, is a co-founder of Get Us PPE, emergency physician, Associate Professor of Emergency Medicine at Brown University, and the Director at the Brown-Lifespan Center for Digital Health. Commenting on the evolving PPE shortage, Dr. Ranney says, “While on the surface, frontline facilities now seem to have access to PPE, there are many that still lack the resources to obtain the equipment they need. Get Us PPE’s goal is to provide PPE to these frontline organizations, which span from nursing homes to public schools to home health aide agencies. Our monthly shortage indices aim to bring the public’s attention to frontline workers in need.”



# GET US PPE SHORTAGE INDEX BY THE NUMBERS

**<25%**  
requests filled

**>75%**  
requests unfilled



**21,250**

total individual requests for PPE since March 2020.

REQUESTS FOR PPE DECREASED 52% BETWEEN JAN. AND FEB. 2021

**91+ million**  
**8.5 million**

pieces of PPE requested to fill need for just **one week**

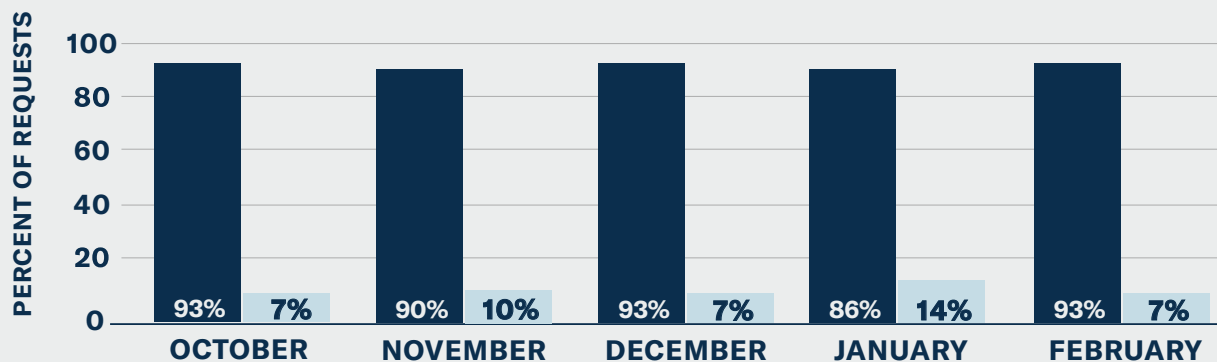
pieces of PPE delivered to frontline workers

## % REQUESTS FROM HOSPITALS VS OTHER FACILITIES

Non-Hospitals\*

Hospitals

\*Such as nursing homes, home health aide agencies, clinics, group homes, shelters, and COVID-testing facilities.



## TOP 3 MOST REQUESTED TYPES OF PPE, FEBRUARY 2021



DISINFECTING WIPES



HAND SANITIZER



NITRILE GLOVES



# THE N95 AND NITRILE GLOVE SHORTAGE, FEBRUARY 2021

## N95 MASKS

**\$0.38\***

PRE-PANDEMIC PRICE PER MASK

**\$4-7.00\*\***

AVG. PANDEMIC PRICE PER MASK

**1,300%** ↑

INCREASE IN N95 PRICE

## NITRILE GLOVES

**\$0.05\***

PRE-PANDEMIC PRICE PER PAIR

**\$0.30-.40**

AVG. PANDEMIC PRICE PER PAIR

**600%** ↑

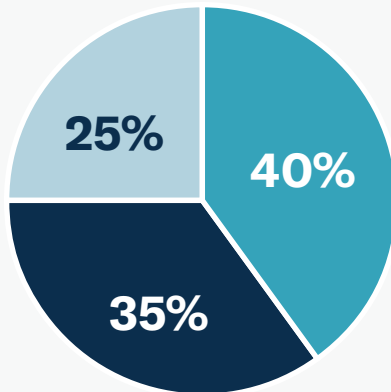
INCREASE IN GLOVE PRICE

\* According to a Society for Healthcare Organization Procurement Professionals report

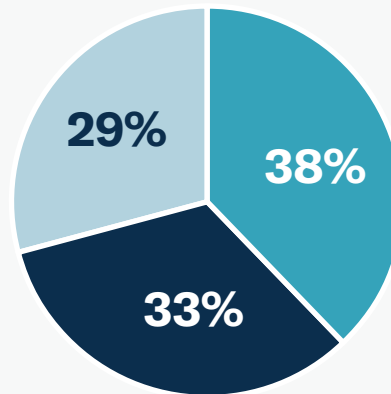
\*\* For individual/small batch orders; bulk orders often have lower unit prices

## TIME UNTIL FACILITIES REQUESTING N95s AND NITRILE GLOVES RUN OUT OF SUPPLY

■ Facilities out of supply    ■ Facilities with < 7 days' supply    ■ Facilities with ≥ 7 days supply



N95 MASKS



NITRILE GLOVES

## PERCENT OF REQUESTERS FORCED TO REUSE N95 MASKS AND NITRILE GLOVES

**87%**

N95 MASKS

**76%**

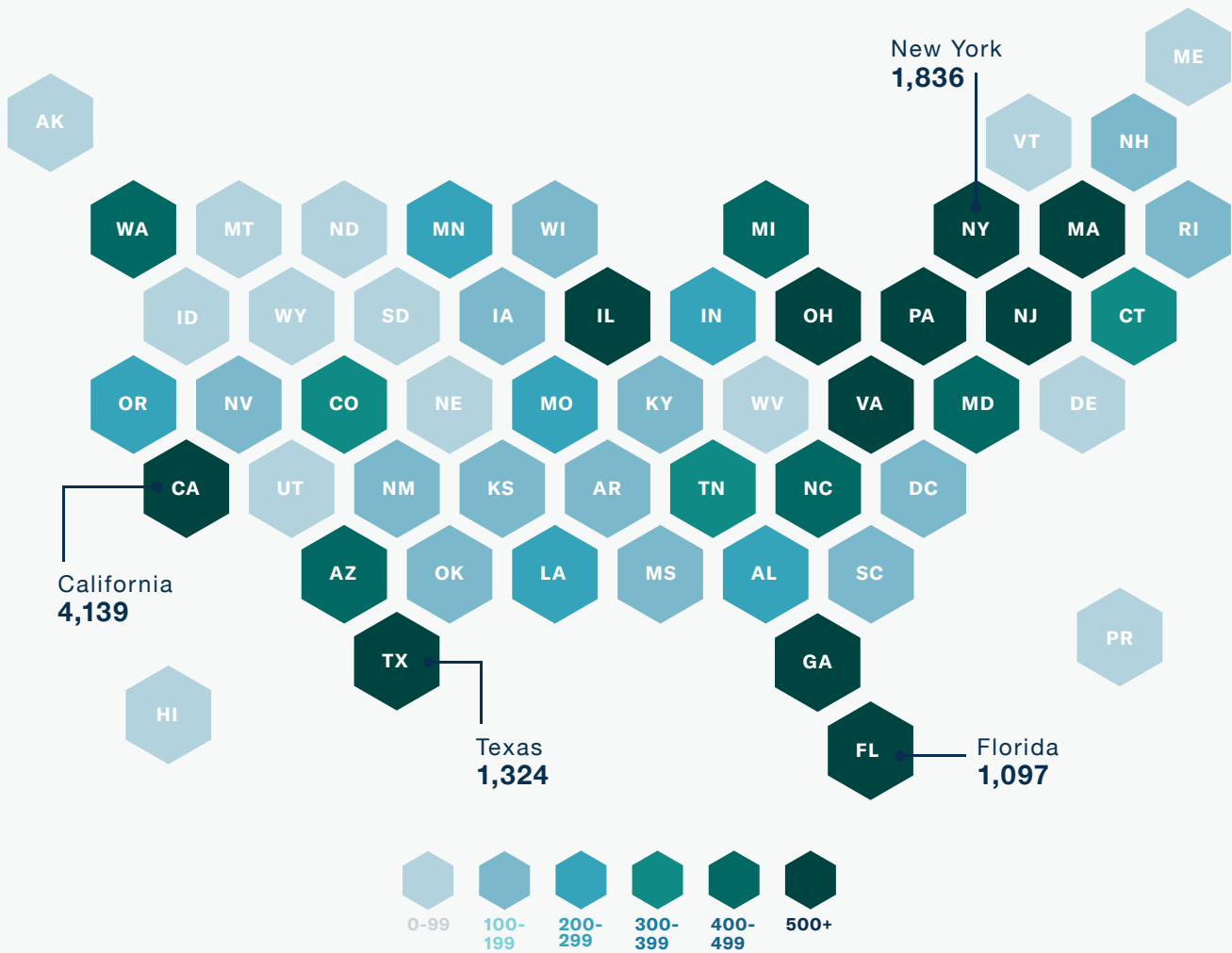
NITRILE GLOVES



# TOTAL REQUESTS FOR PPE BY STATE

as of February 2021

Since March 2020, Get Us PPE has received requests from frontline facilities in all 50 states and some US territories.



Since March 2020, requests for PPE donations have poured into Get Us PPE from many types of frontline facilities, including schools, community centers, shelters, and more. However, the Trump administration only systematically collected PPE shortage data from hospitals, leaving Get Us PPE to build the most comprehensive national database of PPE shortages across all frontline facility types. Over time, our request form was adapted to collect relevant information from each facility type, giving us unique insight into the full breadth of shortages.

An earlier version of the map above was included in the Biden Administration's National Strategy for the COVID-19 Response and Pandemic Preparedness, demonstrating that the federal government is now looking beyond hospital PPE shortages, considering data collected from many organizations in need.

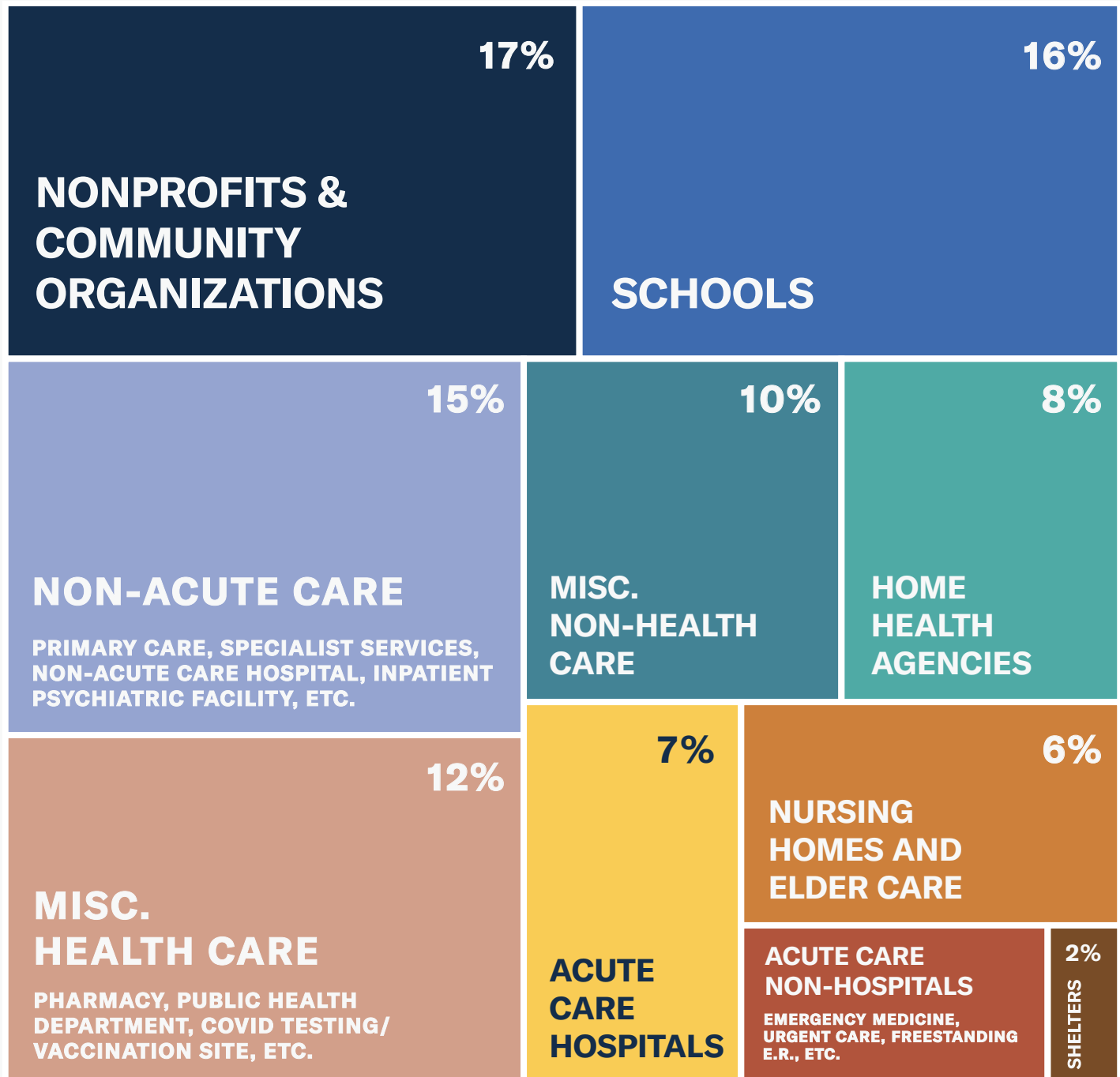
**In February 2021, we received requests from**



**44 states + Washington, D.C.**



# TYPES OF FACILITIES REQUESTING PPE FEBRUARY 2021\*



\*Our outreach efforts may impact this data.



# ABOUT THE DATA

Get Us PPE is driven by hundreds of dedicated volunteers, and though we maintain a commitment to equity as a central value, our perspectives are still limited. Here, we explain our methods for data collection, the limitations of the data, and the individuals involved at each step.

This data is derived from PPE requests entered into the request form on our website. We accept requests from a range of frontline organizations, including healthcare facilities and organizations, natural disaster relief groups, homeless shelters, social services organizations, and many more. On our request form, we capture information on the location, size, and scale of each requesting facility and the type of care provided there. This helps us deliver the most appropriate PPE for each facility and to prioritize the most underserved, in-need communities, while taking into account logistical factors for PPE deliveries. Finally, we collect information on need—types of PPE needed, amount needed per week, how the requester/institution is currently using PPE (normally? rationing?), and how long until PPE runs out.

We maintain a large store of need and supply-related data. This data is provided by individuals and institutions across the United States in critical need of PPE. In order to ensure we have the most up-to-date information, we clean the data by removing duplicate requests and ensuring requesting facilities are only counted once.

Sometimes, individuals filling out our request form make mistakes while entering their needs and information. They may not have exact figures, or may not know answers to specific questions on the form. Our Data Verification team works to verify requesting facilities and to ensure the information they're entering is accurate.

Get Us PPE was founded quickly and scrappily. We assumed we would not be needed long—two weeks at most—before another group would solve the PPE crisis. Yet we are still seeing PPE shortages across the country. Our original scope and mandate didn't demand sophisticated technological architecture, but we have since adjusted. We became the architects of our own technology solutions in order to meet the immense and continued need nation-wide. Over time, we have improved our request form and systems to ensure we are capturing all the information required to make the most equitable distribution choices possible. As a result, many data fields are absent from earlier requests. We are now working to fill those blanks wherever possible by retroactively providing more information about institutions requesting and their needs, allowing for improved visualization and analysis both now and in the future.

One of the largest factors driving the data we chose to compile and visualize in this index is the qualitative data obtained through numerous outreach projects to facilities nationwide. Hundreds of Get Us PPE volunteers called or emailed facilities, especially those in under-served communities and recorded their comments, many of which provide anecdotal evidence for types of shortages that may remain hidden in large datasets. The data in this document, pulled from our database, tells many of these stories quantitatively. As this crisis evolves, we will continue to employ this mixed-methods approach in order to tell the story of the PPE shortages frontline workers are experiencing on the ground every day.

This data is as accurate as possible at the time of publication.

## GET US PPE SHORTAGE INDEX CONTRIBUTORS

**Data Analysis, Design, and Visualization:** Stephanie Zeller

**Director of Product and Technology:** Cody Reinold

**Director of Communications and Policy:** Amanda Peery-Wolf

**Communications and Policy Strategist:** Sam Cohen

**Director of Development:** Adriane Kiss

**Public Relations Lead:** Stephanie Zeller

**Public Relations Team:** Dave Close, Amanda Peery-Wolf, Stephanie Zeller, Ali Hickerson, Katie Hurley, PT, DPT, Sam Cohen, Unnati Gupta, Deepthi Satya, Anna Dai-Liu

**Design Team Lead:** Priscilla Woo

**Deputy Director of Operations for Health Equity:** Joanna Calderon, MPH

**Data Dashboard Architects:** Ryan Cranfill and Donni Popejoy

## GET US PPE LEADERSHIP

**Executive Director:** Shikha Gupta, M.D.

**Advisory Board:** Christopher Barsotti, M.D; Zach Peery-Wolf; Megan Ranney, M.D., MPH; Shuhan He, M.D., Dorothy Jones-Davis, Ph.D; Ram Bala, Ph.D; Dottie Enrico, Esther Choo, M.D., MPH; Jacqueline Chan

**Co-Founders:** Jeremy Faust, M.D., MS; Esther Choo, M.D., MPH; Megan Ranney, M.D., MPH; Shuhan He, M.D; Ali Raja, M.D., MBA; Val Griffeth, M.D., Ph.D

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