## **Unmasking Safety: Innovations in Validating PPE Doffing Protocols with**

## **Bacteriophages**

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Introduction	Methods			Conclusion
•Personal protective equipment (PPE) is central to	Video Analysis Videos of the original doffing protocol were examined for potential contamination pathways.			•Even with well-trained HCWs and a trained observer, self-contamination during the doffing
minimizing exposure to high-consequence	Fluorescein Testing Pr	Protocols were tested using fluorescein to reveal contamination pathways.		process can occur.
precautions.	Bacteriophage Protocols were tested using three distinct genetically marked $\lambda$ bacteriophage sprayed on critical areas of HCWs that then completed the doffing protocol (Burke et al.).			•With the revised protocol and equipment, we were able to prevent any viable self-contamination.
<ul> <li>Donning and doffing protocols are essential to prevent contamination and provide safety to</li> </ul>	Analysis Bacteriophages were identified by PCR and quantified by plaque forming units.			•Medical units that treat HCIDs should empirically test
healthcare workers (HCWs).	Revision Donning and doffing equipment and protocols were revised and retested via bacteriophage.			procedures used.
•PPE ensembles and the associated donning and				
doffing protocols generally aren't empirically				
validated and are based on recommendations from		Results		
the manufacturer of individual products.				
	Fluorescein testing revealed t sites on PPE that contribute to	With the original protocol, all       o     HCWs were found to have viable	To address the high recovery of viable phages, donning and doffing	Acknowledgements
Our goal was to improve PPE protocols and ensembles to minimize the risk of cross contamination to HCW.	contamination pathways: critical triangle, coverall cuffs, and back hood.	and high-density phages on their hands, arms, or scrub attire. This highlights that contamination was not avoidable with the original methods.	protocols were changed by changing the equipment, reordering the steps, and adding new techniques. With the revised protocol, no viable phages were found on any HCWs.	The authors would like to thank all members of the Serious Communicable Disease Program, the Infection Preventionists, the Levin Lab at Emory University Hospital, and the continuous partnerships created to maintain safety, infection prevention, and preparedness throughout our healthcare system.
		Phage Original         Original Protocol Recovery           Critical Triangle         25% (3.6E4)         0%         25% (2.5E3)         50% (2.72E4)           Coverall Cuffs         0%         0%         25% (1.8E3)         0%	Phage Origin Revised Protocol Recovery Critical Triangle 11% (X) 0% 22% (X) 0%	References
		Back Hood 25% (3.6E4) 50% (1E3) 50% (3.75E3) 2.5% (5E4) Scrubs Hands Forearms Inside PAPR Recovery Location	Loverani curis         22% (x)         11% (x)         33% (x)         44% (x)           Back Nood         67% (x)         33% (x)         11% (x)         44% (x)           Scrubs         Hands         Forearms         Inside PAPR           Recovery Location         1         1         1	Burke, K., Berryhill, B.A., Kraft, C. S., Smith, A., Morgan, J., Tarabay, J., & Carag, J. (2023, December). 746. A Bacteriophage-Based Validation of a Personal Protective Equipment Doffing Procedure to be Used with High Consequence Pathogens. In <i>Open Forum Infectious Diseases</i> (Vol. 10, No. Supplement_2, pp. ofad500- 807). US: Oxford University Press.