New Innovations in Reusable OR Textiles

By Angie O'Connor
Director, Clinical Resources - Acute Care
Encompass Group, LLC

The Operating Room (OR) is the biggest user of medical supplies in a US hospital and its efficiency is crucial to the success of the entire facility. The Association of periOperative Registered Nurses (AORN) has been calling for the "greening" of the OR since March, 2006 when the AORN House of Delegates approved the Position Statement on Environmental Responsibility. According to the position statement, "Nurses have an ethical responsibility to actively protect the environment, promote and participate in resource conservation, and seek to understand the political, economic and public health components of environmental health". This means, for the first time, OR nursing staff is being challenged to consider making environmentally friendly decisions over those that are more conventional or traditional. One of those choices may be whether to use reusable OR gowns, mayo stand and back table covers and surgical drapes rather than the more traditional disposable products. This decision is made even easier when the impact of cost and provider comfort is also considered. This article will provide an overview of the environmental, cost, and provider comfort issues and outline the steps to consider when evaluating reusable gowns and drapes.

Historical Perspective

In the late 1800s it was determined that the surgeon's hands must be scrubbed, surgical instruments must be boiled, and wound drapes must be rendered germ free. This prompted the introduction of the freshly laundered, sterile gown, and one or more layers of sterile cotton sheeting (muslin) to drape the surgical wound. In the early 1950s muslin was viewed as being an acceptable bacteriological barrier when dry, however, it lost that capability after it became wet, even with multiple layers. The emergence of HIV in the early 1980s, led to concerns about the spread of bloodborne diseases, prompting a shift from reusable to single-use devices. Increases in waste production were a byproduct of this shift.

New Perspective

Today's reusable textiles are not those of 30 years ago. They are technologically advanced, tested to meet barrier performance standards and refined to provide optimal clinical comfort and ease of use. There are five key factors that influence the selection of drapes and gowns used in the OR. They are:

- safety and performance standards for barrier protection
- comfort
- costs associated with use
- environmental impact
- an ongoing, effective evaluation process

Safety and Performance Standards for Barrier Protection

In 2003, regulatory standards were developed by the American National Standards Institute (ANSI) and the Association for the Advancement of Medical Instrumentation (AAMI). These standards were updated again in 2012. AAMI PB70 Levels of Barrier Protection define the protective performance of surgical drapes and gowns as a barrier against the penetration of fluids, such as blood and other body fluids, and pathogens. Four levels of performance are designated, from Level 1 (the lowest barrier performance) to Level 4 (the highest). The protective barrier choice should be based upon anticipated exposure to fluid.
There are tests required to demonstrate the barrier protection of each level. The chart below provides an overview of levels 1-4.

<table>
<thead>
<tr>
<th>ANSI/AAMI PB70 Barrier Performance</th>
<th>Anticipated Risk of Exposure to Fluid, Fluid Spray/Splash or Pressure on Gown or Drape</th>
<th>Examples of Procedures with Anticipated Exposure Risks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>Minimal</td>
<td>Simple excisional biopsies, lumps and bumps, ophthalmology and ENT</td>
</tr>
<tr>
<td>Level 2</td>
<td>Low</td>
<td>Tonsils and adenoids, endoscopic GI, orthopedic procedures with tourniquet, open hernia repair, MIS, interventional radiology or cath lab</td>
</tr>
<tr>
<td>Level 3</td>
<td>Moderate</td>
<td>Mastectomies, arthroscopic orthopedic procedures, endoscopic urological procedures, open GI and GU procedures</td>
</tr>
<tr>
<td>Level 4</td>
<td>High</td>
<td>Hands in body cavity, ortho without tourniquet, open CT, trauma or C-sections</td>
</tr>
</tbody>
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It’s important to note that both single-use and reusable surgical gowns and drapes are governed by the same regulatory standards covering performance claims, care & handling, labelling and overall safety practices. There are not more stringent regulations for one or the other.

**Comfort**

A 2010 study in the O.R.s of two large hospitals in the Washington, D.C. area found that most surgeons and surgical technologists preferred the reusable healthcare textiles, at levels 2 and 3, for shorter procedures. For longer procedures, almost all the O.R. personnel overwhelmingly rated the reusable level 4 gowns with breathable laminates more comfortable. Eighty-six percent (86%) of the participants rated the comfort of the reusable gowns as superior. The ease of use for reusables was rated superior by 87%. Only 6% of participants rated the disposable gowns as superior.

**Cost**

There are many cost issues to examine when considering the use of reusable drapes and gowns versus disposable drapes and gowns. It is important to differentiate between the cost-per-use versus the actual purchase price. Third party processing/laundering can be very cost effective due to economies of scale, while regulated waste and disposal costs tend to be significant with disposables. The routine disposal of unused items in disposable packs which result in unnecessary product and disposal costs, further support the use of reusable custom packs. There are many intangible or hidden factors as well. The number of handling steps, recovering lost instruments, non-doubling of tray drapes, and savings in water and energy use are all advantages in the argument for reusables.

Many hospitals undertake economic analyses before product purchase but these results are rarely published or made available. One report resulting from a 2006 study shows the cost benefit of reusables over disposables when the cost-per-use approach is taken.
Cost per Use Analysis of Reusable versus Disposable Surgical Gowns

<table>
<thead>
<tr>
<th></th>
<th>Reusable Gown (50 uses)</th>
<th>Disposable Gown</th>
</tr>
</thead>
<tbody>
<tr>
<td>Purchase Price</td>
<td>$60</td>
<td>$4.50</td>
</tr>
<tr>
<td>Cost per Use</td>
<td>$1.20</td>
<td>$4.50</td>
</tr>
<tr>
<td>Administrative Costs</td>
<td>$0.15</td>
<td>$0.15</td>
</tr>
<tr>
<td>Laundering</td>
<td>$0.50</td>
<td>$0.00</td>
</tr>
<tr>
<td>Packing and Sterilization</td>
<td>$0.40</td>
<td>$0.00</td>
</tr>
<tr>
<td>Waste Disposal</td>
<td>$0.00</td>
<td>$0.25</td>
</tr>
<tr>
<td><strong>Total Cost per Use</strong></td>
<td><strong>$2.25</strong></td>
<td><strong>$4.90</strong></td>
</tr>
</tbody>
</table>


Serious consideration must be given to the environmental impact for reusables versus disposables. There are quantifiable differences in the resources and impact associated with waste management.

**Costs Associated with Waste Removal**

One of the biggest challenges faced by hospitals regarding waste management is being compliant with State and Federal Regulating Agencies such as OSHA and DOT. Many times state laws define the regulations for how a hospital must handle and dispose of their regulated medical waste (RMW). Many disposable gowns and drapes are classified as regulated medical waste. The disposal cost of RMW is estimated to be 8 times that of normal solid waste ($963 v. $121 per ton). Reported costs for RMW vary from $0.20 to $0.50/per pound with one study finding the average cost to be $0.28/pound. There are stringent regulations, often with heavy penalties for not adhering to the regulatory process.

Incineration was once the method of choice for dealing with medical waste. Hospitals using onsite incinerators were exposing the public to emissions that included mercury, dioxins, and other highly toxic substances. By 1997, new regulations brought about the closure of several thousand onsite medical waste incinerators and today, fewer than 100 such installations are still operating. Currently, most healthcare facilities either ship their waste to large, centralized incinerators, or use technologies other than incineration to sterilize medical waste prior to disposal in the standard municipal solid waste stream.

**Hidden and Intangible Costs**

Studies have shown that reusable linens actually require fewer handling steps than disposables which saves staff time. One AORN survey found that the processes of ordering, transporting and delivering sterile disposable gowns and drapes had six additional steps as compared to contracting with a third-party laundry for reusables.

It’s also not unusual for medical instruments to be left behind in the OR, primarily in the surgical drapes and table covers. When they are discarded along with the disposable drapes and covers, they have to be replaced. The University of Maryland Medical Center, which moved to reusable textiles more than 15 years ago, estimates that in 2010 it saved approximately $39,000 in returned instruments (which would have been thrown away if the hospital was using disposable gowns and drapes in its OR).

In addition, commercial laundries are far more efficient with water and energy due to volume and economies of scale.

Studies support that environmental costs are significant. In 1998, the CDC hypothesized that there were no differences in life cycle impacts between reusable and disposable gowns. However, since 1993, there have been five life cycle studies of protective surgical gowns and none of these studies support the CDC hypothesis conclusion. The published life cycle studies compare a fixed number of disposable gowns with a single reusable gown used 50 to 75 times. All of the life cycle studies found that the reusable system
provided substantially better environmental profiles than single-use systems. Life cycle assessments proved that selecting disposables instead of comparable reusables increased energy use and carbon footprint by 200% to 300%, increased the water footprint by 250% to 330% and increased solid waste from 38 kg to 320 kg per 1000 gown uses (a 750% increase). These findings clearly support an environmental benefit with the use of reusables.

Environmental Impact

Within a hospital, ORs contribute disproportionately to healthcare waste production. In fact, a routine operation at a hospital produces more waste than a family of four produces in an entire week.

The AORN, which has taken a stance on environmental issues for more than 20 years, has an official position statement on environmental responsibility that clearly states that perioperative practices should include “selecting reusable equipment and materials (e.g., drapes, gowns, patient positioning devices) that are of a quality equal or superior to one-time use items.”

The Canadian Medical Association Journal in 2012 featured a study by Stall and colleagues which estimated that total knee replacements in Canada in 2008–2009 produced the equivalent landfill waste of 2000 garbage trucks by volume and that disposable surgical linens consisting of gowns, drapes and table covers contributed disproportionately to the volume of waste. It is worth noting that in Canada they are using an estimated 80% reusables versus the United States (U.S.) using 80% disposables. The RMW in the U.S. is staggering.

Cost Savings and Environmental Impact with Reusables

Reports emerging from facilities who have converted portions of their program to reusables clearly show cost savings and environmental benefits resulting from these changes.

- Winter Haven Hospital in Florida converted to a reusable surgical textile program in 2001 for their surgical pack program. Their analysis disclosed a $37.21 cost per procedure with single-use disposable products compared to $26.45 cost per procedure for reusable textiles. Within five years, the cost savings were found to total $625,000.

- A life cycle analysis of AAMI Level 3 surgical gowns used at the University of Minnesota Medical Center-Fairview found that using reusable gowns instead of disposable gowns would save 254,000 pounds of waste per year and $360,000.

- A Senior Sourcing Director for Kaiser Permanente in San Diego, reported that its “use of reusable surgical gown and basin sets reduced the organization’s regulated medical waste by 30 tons, at a savings of 3.8% in 2010.”

- The University of Maryland Medical Center reported that in 2010, it avoided disposal of 138,748 pounds of waste as a result of using reusable supplies; using the average cost of regulated medical waste (RMW) of $0.28 per pound, this amounts to an approximate savings of $38,800 annually in avoided waste disposal fees.

Evaluation Process

When evaluating the success of any program there are key steps that will help facilities to assure the desired outcomes. They are as follows:
1. **Establish a multidisciplinary team or a Value Analysis Committee.** This committee should include end-users such as periop nurses, surgical tech, surgeons, laundry processor, finance, facility management, infection preventionists, supply chain, and environmental services. All departments who will evaluate and be impacted by the program should have representation in the development and evaluation process.

2. **Gather information from a variety of sources.** Contact vendors for performance characteristics, processing and care or instructions for use (IFU). In-depth discussions with the laundry processor should take place to develop a clearly defined process. Members of the committee should also conduct a literature search for reusables versus disposables to understand and learn from other conversion experiences. Conducting research of local regulatory requirements is key to understanding disposal and environmental issues. And of course, speaking with colleagues in other hospitals who have implemented a reusables program will provide valuable, first-hand experience that can be used in the conversion process.

3. **Establish consistent requirements for product evaluation and establish unique goals for your facility.** Use of a product specific evaluation tool is essential. It should include a baseline of total costs, line item costs, targets for reduction of waste, safety benchmarks, efficiency measures, ease of use, compatibility with other products, financial impact analysis, laundering process, current waste disposal issues, current OR practices and OR perspective on comfort and safety.

4. **Perform a financial impact analysis.** The analysis should reflect direct costs, staff time, acquisition costs, storage, inventory, reprocessing/laundering costs, disposal costs and requirements.

5. **Investigate a plan to standardize products.** This plan should detail steps and communication of how your facility will phase in the new and phase out the old when converting.

6. **Conduct an environmental impact analysis - Environmentally Preferable Purchasing (EPP) Policies and Practices.** To reduce waste, AORN, the Environmental Protection Agency (EPA), and a number of states and organizations recommend adopting environmentally preferable purchasing (EPP) policies and practices. Environmentally preferable means “products or services that have a lesser or reduced effect on human health and the environment when compared with competing products or services that serve the same purpose.” This comparison applies to raw materials, manufacturing, packaging, distribution, use, reuse, operation, maintenance, and disposal. The EPA developed five guiding principles to help federal agencies purchase environmentally preferable products. These broad guiding principles can be applied to the perioperative setting as well. Additional EPP information can be found at following link: [http://www.epa.gov/epp/pubs/about/about.htm](http://www.epa.gov/epp/pubs/about/about.htm)

7. **Arrange a product trial.** This is coordinated with the vendor and all departments that will participate in conducting the trial.

8. **Product selection.** Once the trial is complete, the committee will evaluate the outcomes and determine the preferred choice.

9. **Review and revisit changes after a clearly specified time to improve process.** Collect input/feedback, positive and negative and review the information in committee meetings. Determine, in advance, how you will mitigate drawbacks and improve the process for success!

In summary, the safety of patients and members of the perioperative team is a top priority when choosing surgical gowns and drapes, as the healthcare industry strives to minimize the risk of transmitting
In 2003 regulatory standards were established to assure performance claims, care & handling, labelling and overall safety practices for single-use and disposable OR gowns and drapes. Transition to sterile, disposable items in healthcare in the 1980s served its purpose at that time, however today’s challenges demand that we reconsider the use of reusable items. Since the quality of materials has dramatically improved, cost-benefit analysis now points back in the direction of reusables, and life cycle analyses demonstrate clear benefits to the environment in using reusable surgical textiles. In addition, studies consistently show that perioperative personnel find the gowns more comfortable, particularly for longer cases. By understanding the key characteristics and performance standards for these new textiles, all who participate in the delivery of care in this ever-changing environment can be assured of the benefits and quality of today’s reusable textiles.

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AAMI PB70:2012 Levels of Barrier Protection Chart, Summary provided courtesy of Encompass Group, LLC.


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Contact Information

Janice Larson
Vice President, Clinical Resources - Acute Care
Encompass Group, LLC
Direct: 770-296-7793 | Mobile: 770-296-7793
www.encompassgroup.net