Hippocrates had a definite idea of what physicians should be—“clean in person, well dressed, and anointed with sweet-smelling unguents.”

For generations, that’s been business attire topped off with a white coat and maybe a few squirts of sweet-smelling hand sanitizer.

Gonzalo Bearman, M.D., M.P.H., associate hospital epidemiologist and professor of medicine at the VCU Medical Center, says that traditional physician dress may play a role in transmission of pathogens in the inpatient setting.

Bearman was lead author of an expert guidance paper published earlier this year by the Society for Healthcare Epidemiology of America (SHEA), a professional group whose mission is to prevent and control infections in the medical workplace. In the paper, he talks about the bacteria that can live on clothing, jewelry and everyday objects. These objects are not washed or decontaminated between patient encounters and may serve as vectors of transmission. His work and SHEA’s guidelines for provider clothing have been cited in publications such as The New York Times and USA Today.

Bearman stresses that SHEA’s guidance statement on health care professional attire is for the acute-care or inpatient setting, not necessarily for physicians in lower-risk, ambulatory settings.

And while there’s no concrete proof that losing the white coat will result in increased patient safety, it’s part of myriad measures hospitals are taking to minimize germs.

Bearman and colleagues at the VCU Medical Center often wear sleeveless vests in lieu of white coats. The vests feature many convenient pockets, and as they are sleeveless, they allow for a BBE approach to inpatient care. Also, they look uniform-like and professional. The concept, says Bearman, is gaining traction quickly.

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