Supplementary file 1: Knowledge Of Personal Protective Equipment (PPE) Use During COVID-19:

KNOWLEDGE ITEMS:	Total correct	Healthcare worker		P value ^a †
		midwive doctors		
		S		
		correct	correct	
	N %	N %	N %	
K1. The PPE can be used without removing for up to 6h,	348	120	228	0.017*
when caring for a cohort of COVID-19 patients	(77.0)	(69.8)	(81.4)	
K2. Respirator/mask use for prolonged periods may	228	84	144	0.10
increase the chance of health care workers touching the	(50.4)	(48.8)	(51.4)	
respirator or having inadvertent under-respirator touches;	` ´	, ,	, ,	
if respirator/masks are touched/adjusted, hand hygiene				
must be performed immediately				
K3. Use of the same PPE by a HCW between a patient with	384	152	232	0.064
COVID-19 and a patient who does not have COVID-19 is	(85.0)	(88.4)	(82.9)	
not recommended owing to the risk of transmission to	` ´	, ,	, ,	
another patient who would be susceptible to COVID-19				
K4. Face shield with proper design to cover the sides of	440	160	280	0.001**
the face and below the chin should be used and should be	(97.3)	(93.0)	(100.0)	
used only in the critical emergency situation of lack of	, ,	, ,	, ,	
medical masks				
K5. Face shields are protective against direct exposure of	448	168	280	0.021*
mouth, nose and eyes to droplets; however protection	(99.1)	(97.7)	(100.0)	
depends on the design and on the positioning of HCW in	(0011)	(3131)	(10010)	
relation to the patient				
K6. The extended use of gowns may increase the risk of	408	144	264	0.001**
transmission of other pathogens between patients	(90.3)	(83.7)	(94.3)	0.001
K7. Disposable lab coats or impermeable plastic aprons	256	88	168	0.078
should only be used for brief contact with the patients;	(56.6)	(51.2)	(60.0)	0.0.0
should not be used for prolonged contact or when	(5515)	(0112)	(0010)	
performing aerosol-generating procedures and support				
treatments				
K8. Goggles or safety glasses used by health workers may	448	172	276	0.146
increase the discomfort and fatigue of health care workers	(99.1)	(100.0)	(98.6)	
and skin tissue damage may occur to face with prolonged	(3311)	(10010)	(5515)	
goggle use				
K9.Goggles should be removed if they are contaminated	448	172	276	0.303
by splash of chemicals, infectious substances, or body	(99.1)	(100.0)	(98.6)	0.000
fluids and if goggles obstruct health care worker safety or	(3311)	(10010)	(5515)	
visibility of health care environment or become loose				
K10. Face shield and goggles may be cleaned immediately	424	164	260	0.286
after appropriate doffing and hand hygiene is performed	(93.8)	(95.3)	(92.9)	0.200
OR placed in designated closed container for later	(00.0)	(00.0)	(02.0)	
cleaning and disinfection				
K11. Use of PPE is the most visible control used to prevent	400	156	244	0.25
the spread of infection, it is only one of the IPC measures	(88.5)	(90.7)	(87.1)	0.20
and should not be relied on as a primary prevention	(66.6)	(00)	(0111)	
strategy				
K12. The reuse of any item without a reprocessing/	124	44	80	0.516
decontamination process is considered inadequate and	(27.4)	(25.6)	(28.6)	3.313
unsafe and should be performed by trained staff in the	(,	(20.0)	(_5.5)	
sterile services department of a health care facility or at				
bigger scale under standardized conditions				
K13. Methods for reprocessing masks or respirators are	444	172	272	0.027*
neither well established nor standardized, and therefore	(98.2)	(100.0)	(97.1)	J.J.
should be considered only when there is critical PPE	(55.2)	(100.0)	(5,	
shortage or lack of PPE.	Ī			1

a*p < 0.05; **p < 0.01 †chi square test

© 2021 Izhar R. et al