SUPPLEMENTAL DIGITAL CONTENT #2

Evidence Table of Significant Literature

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| Author(s) Year | Sample | Study Design | Aim(s)/Instruments | Results/Threats to Validity | Level of Scientific Quality |
| Thomas, Ehret, Ellis, Colon-Shoop, Linton, & Metz (2010) | 240 patients: 65 patients, 64 nurses, 75 students, and 36 faculty | Descriptive Comparative Design | Aim: Examine the differences between students,nurses, faculty, and patient group perceptionsof the nurse based on the nurse’s appearanceInstrument: Self developed Perceptions of nurse caring, skill, and knowledge survey | * All participants: solid scrubs reflected more skilled (mean solid = 3.3; mean print =3.0, mean T-shirt = 2.1; P = .05).and knowledge (mean solid = 3.2; mean print = 3.1, mean T-shirt = 2.1; P = .05).than print or T-shirt.
* Students: solid and print scrubs reflected greater skilled & knowledge P<.000.
* Patients: T-shirt attire more skilled than faculty & students (P=.009).
* Nurses: T-shirt attire more caring than faculty (P=0.15)
* Threats to validity: Homogeneous sample limits generalizability, small faculty sample size , no power analysis
 | Level 3 |
| Kaser, Bugle & Jackson (2009) | 100 hospitalized patients 18 years of age and older | Descriptive comparative Design | Aim: Explore the effect of various uniform combinations on nurse patient relationships Instrument: Nurse Image Scale  | * Color preference: most preferred blue (26%) or white (25%); least preferred red (37%)
* 36% of patients preferred caregivers in all white scrubs
* Patient perception of nursing professionalism associated with type of nursing attire: Highest NIS score-solid white scrubs Mean 4.22 SD 1.12; Lowest NIS score solid red scrubs Mean 3.05 SD 1.26
* Threats to validity: homogenous sample limits generalizability, Instrumentation-individual modeling uniform in the NIS also collected data, majority of patients used their own perceptions rather than the NIS to rate uniforms, no power analysis
 | Level 3 |
| Windel, Halbert, Dumont, Tagnesi, & Johnson (2008) | 430 randomly selected, adult inpatients | Prospective descriptive study | Aim: (1) How well can patients identify the nurse, (2) what is the patient perception of nursing professionalism, (3)how do patients prefer to identify nurses (4) What uniform do patients prefer for nursesInstrument: survey | * Patient Responses:
* Able to identify RN (31%); Unable to identify RN (55%); Nurses appear professional (94%); No uniform color preference (64%); Hair back & off shoulders (73%); No long fingernails (91%); Identify RN by a large print “RN” on name badge (80%); Identify RN by uniform color (39%); Nurses should wear all white (28%)
* Threats to validity: Bias, participant loss of anonymity, history (participants assessed professionalism of other healthcare individuals), selection bias, no power analysis
 | Level 1 |
| Albert, Wocial, Meyer, Na, & Trochelman (2008) | 390 adult, 109 pediatric patients  | Prospective Comparative Design | Aim: Determine if nurse uniform style and color affected perceptions of nurse professionalismInstrument: Modified Nurse Image Survey, Nurse Image Scale for Children | * Adults: NIS for white uniforms higher than NIS for small print, bold print, or solid color (p<.001)
* White uniform NIS increased with subject age (p<=.007).
* Pediatric/adult: No congruence between nursing professionalism and uniform
* Threats to validity: History-all staff nurses in the study setting wore white uniforms, alternate selections for uniforms were limited, power analysis not preformed
 | Level 3 |
| Skorupski, & Rea, (2006) | 180 patients  | Descriptive study | Aim: Indentify the image conveyed by 3 different nursing uniforms Instrument: Modified Nursing Image Scale | * Seniors: consistently chose white uniform as competent and professional (78.7%)
* Generations X, Y, Baby-Boomers: chose print uniforms as approachable (72.5%-75.5%)
* White was selected as the nurse you would least like to care for you (22%)
* Threats to validity: Diffusion-nurses informally discussed nursing uniforms and volunteered opinions on units, no power analysis
 | Level 3 |
| Hussein, Hundley, Bell, Abbey, Asare, & Graham (2005) | 354 post partum women | Mixed methods, Exit interviews, focus groups, in-depth interviews, community survey | Aim: How women in Ghana identify health professionals who attend birthsInstrument: Skilled Attendance for Everyone (SAFE) questionnaire  | * Role, prior knowledge and uniform are the most common means by which women identify their attendant.
* Threats to validity: Bias-formation of the survey questionnaire from the findings of the qualitative work, small survey response rate, inaccurate reporting of qualified health attendants
 | Level 3 |
| DeKeyser, Wruble, & Margalith. (2003) | 76 Israeli inpatients | Preliminary Descriptive Study | Aim: Investigate Israeli inpatients’ attitudes toward health care providers dress and address. Instrument: Patient Sensitivity Questionnaire | * Patients preferred that health care providers wear formal dress (56%) and be addressed by their formal titles (76%).
* Threats to validity: Generalizability-culture and ethnic origin may influence attitudes toward dress and address, no power analysis preformed
 | Level 3 |