

# Designing Healthcare Facilities to Maximize the Effectiveness of UV Disinfection

## Using computer simulations to better understand UV-C distribution in hospital rooms

### 1. Problem Statement

Portable UV disinfection devices are gaining acceptance in healthcare facilities. **However, for the following reasons, the effectiveness of these devices may be sub-optimal:**

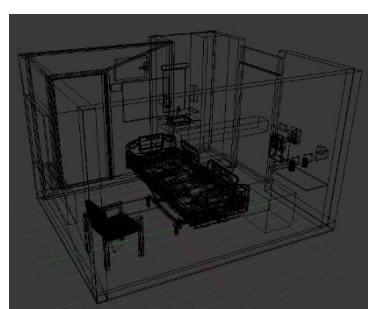
- Poor placement of the device in the room.
- Non-ideal treatment time – either longer than necessary or too short to be effective.
- Insufficient UV-C dose on some surfaces due to the design of the room- size, shape, materials, etc.

#### Objectives of this project

- Understand how UV-C light is distributed in a room, especially to shadowed surfaces, as a function of device location and the design/layout of the room.
- Evaluate a simulation tool based on methods used in computer graphics to predict UV-C intensity throughout any 3-dimensional space.
- Create a set of design rules and operating guidelines that allow healthcare facilities to maximize the effectiveness of their UV-C device. Ultimately, create a tool that can be used by designers of new facilities to optimize patient rooms for UV-C disinfection.

### 2. Approach

1. A 3D Computer-Aided Design (CAD) model of the room to be studied was created.



Often these models already exist as they are used by designers and facilities personnel. Otherwise a new model can be easily created based on measurements of the room's dimensions. 3D models of the objects in the room (patient bed, tables, etc.) are also included.

2. A model of the UV-C device of interest was added to the model to serve as the light source.
3. Software which uses physics-based illumination algorithms was used to simulate the distribution of UV-C light based on the 3D model and known properties of the surfaces in the room.
4. Using radiometric sensors, the UV-C intensity was measured at numerous locations throughout the room and compared to those values predicted by the model.

ILT1700 from International Light Technologies.  
Used with the SED240/NS254/W detector.



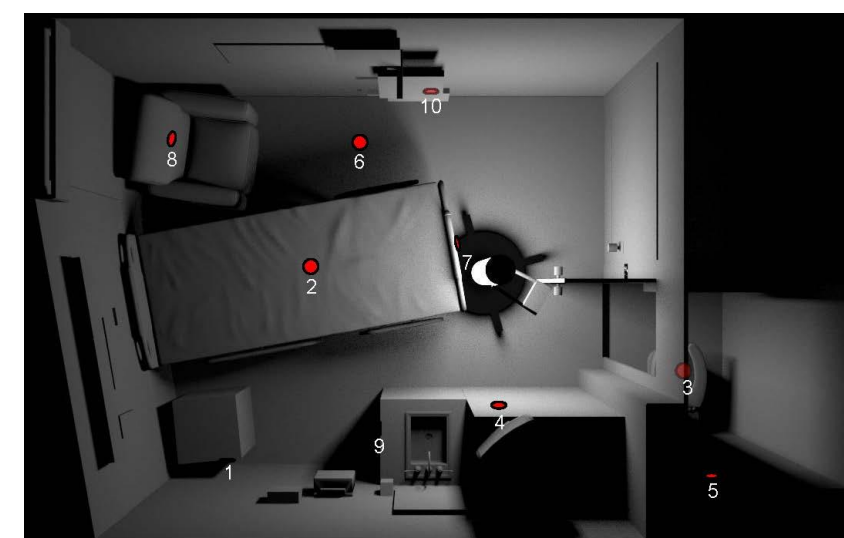
5. Once validated, the simulation tool can be used to study
  1. **Device location**- What is the optimal location(s) of the device?
  2. **Treatment time**- How much time is needed to deliver an effective dose?
  3. **Room design**- How do size, shape, material selection influence UV-C intensity?

### 3. Initial Study

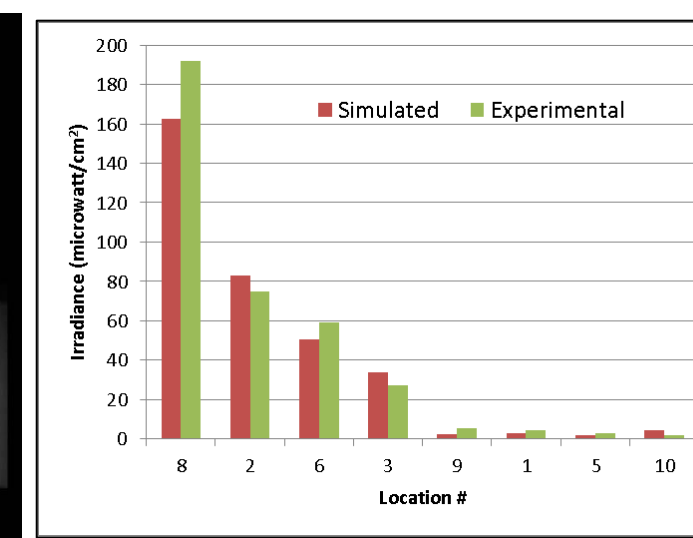


UNC Memorial Hospital  
Chapel Hill, NC  
Site of initial studies

This methodology was used to simulate a standard hospital room at UNC which was also the site of our previous UV-C disinfection research<sup>1</sup>. To validate the method, a series of measurements of UV-C irradiance were taken using a commercially-available portable UV-C disinfection system.

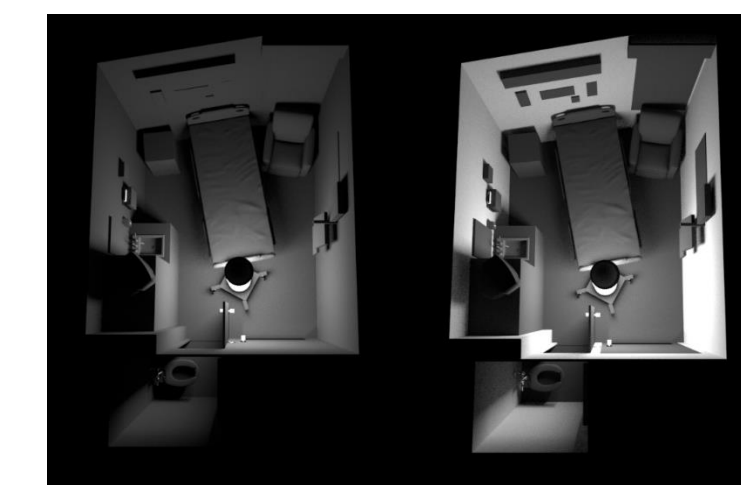


A model of the room indicating the locations where UVC intensity was measured.



A comparison of UV-C intensity predicted by the model with values measured experimentally.

#### Effect of Wall Reflectivity



On the left, a model of the room with UV-C absorbing walls. On the right, the same room with walls reflecting over 50% of the UV-C light.

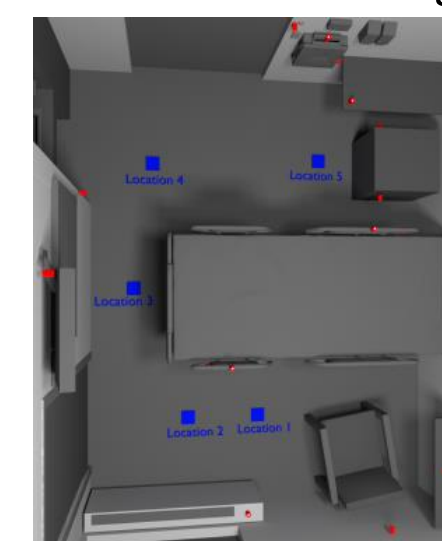
<sup>1</sup> Rutala, W.A., Gergen, M.F., Tande, B.M., Weber, D.J. Rapid hospital room decontamination using ultraviolet (UV) light with a nanostructured UV-reflective wall coating (2013) Infection Control and Hospital Epidemiology, 34 (5 SPL), pp. 527-529.

### 4. Detailed Validation

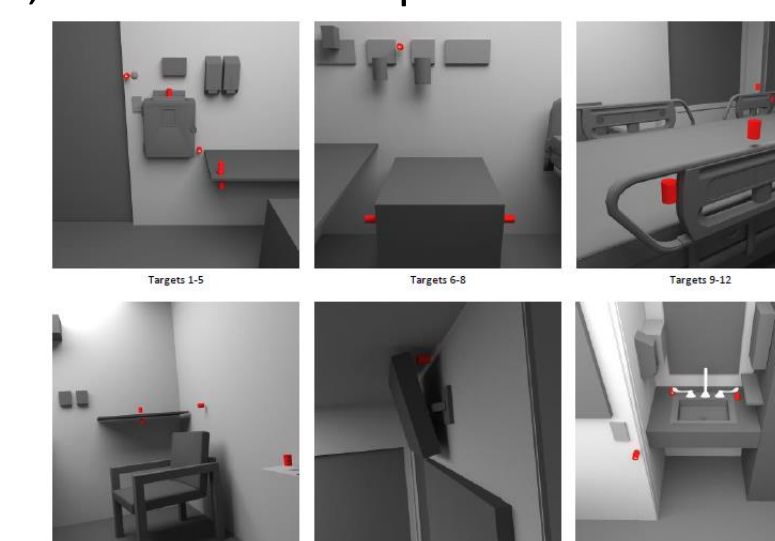


Sanford Hospital – South University  
Fargo, ND  
Site of detailed validation studies

Additional validation experiments were conducted at a second facility. This study consisted of measuring UV-C intensity at 20 locations throughout the room, with the device positioned in 5 separate locations.

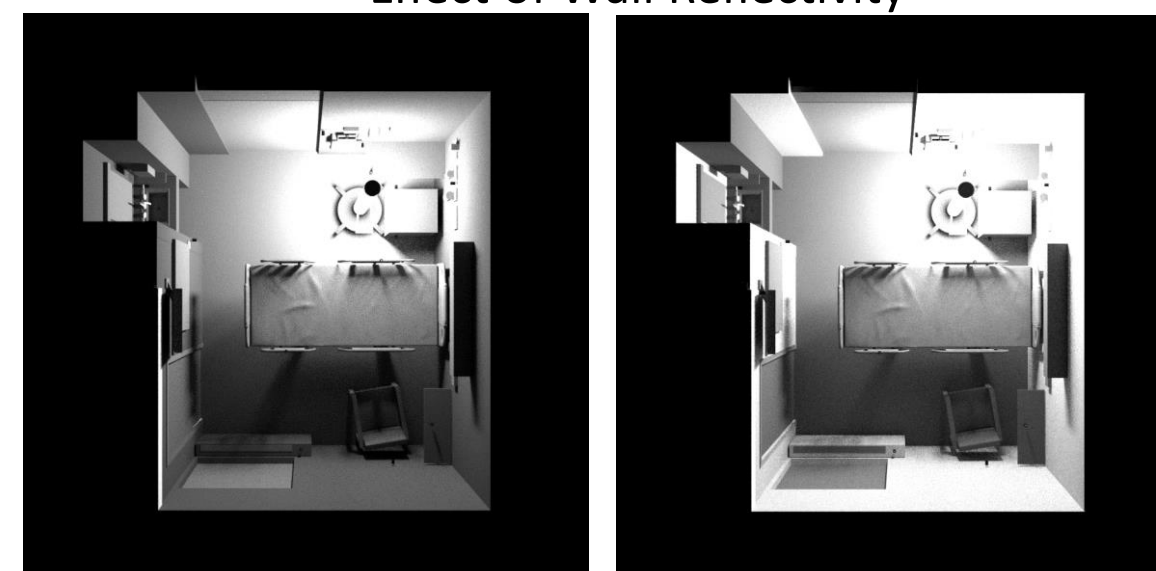


Device Locations

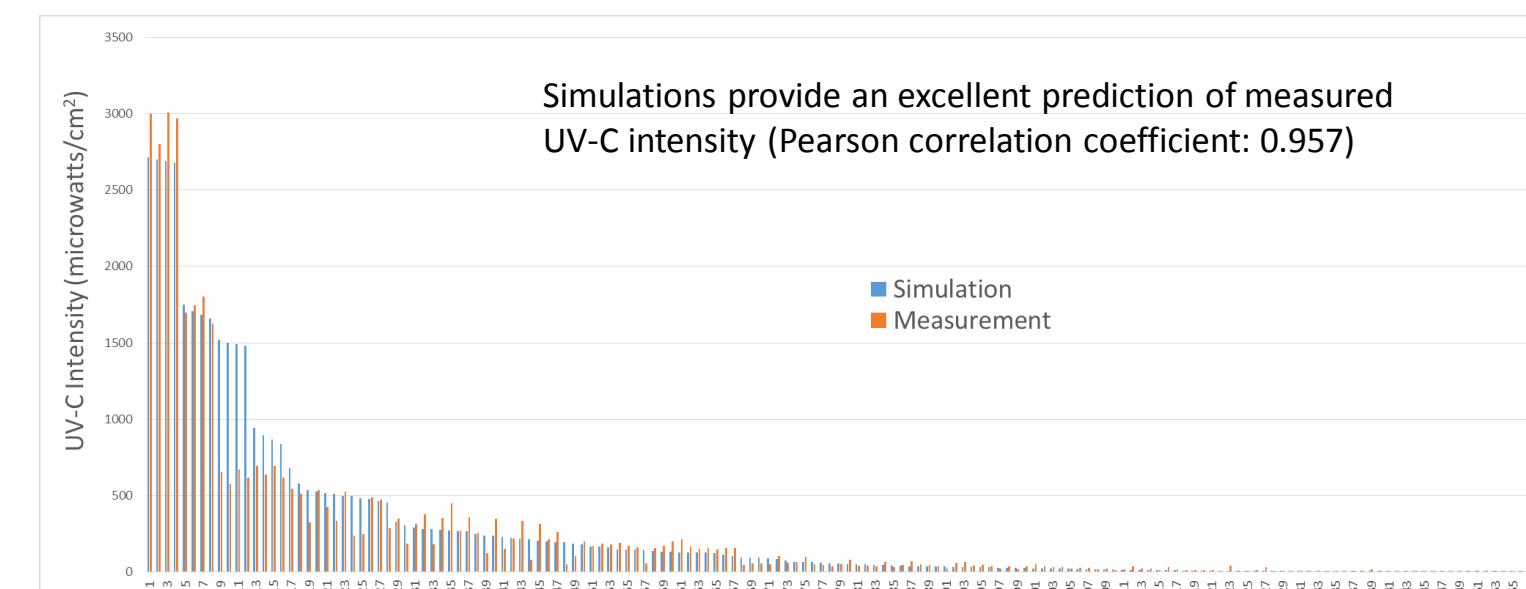


Detailed locations of sensors.

#### Effect of Wall Reflectivity



UV-C absorbing walls (left) compared to UV-C reflecting walls (right) with the device in location #5. Simulations confirmed previously reported results that the reflectivity of the walls has a significant effect on the intensity of UV-C on surfaces not in the line-of-sight of the device.



The data shown above includes locations 1 and 5 with four levels of wall UV reflectivity.

### Authors

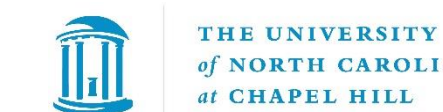
#### Brian M. Tande, PhD

Associate Professor of Chemical Engineering,  
University of North Dakota, Grand Forks, ND  
brian.tande@engr.und.edu



#### William Rutala, MS, MPH, PhD, CIC

Director, Hospital Epidemiology; Professor,  
UNC School of Medicine, Chapel Hill, NC



#### Dubert M. Guerrero, MD

Chair, Infection Prevention and Control  
Sanford Health  
UND School of Medicine and Health Sciences  
Fargo, ND



#### Paul Carson, MD

Director of Infection Prevention  
Sanford Health, Fargo, ND  
Professor, MPH Program  
North Dakota State University, Fargo, ND



### 5. Conclusions

- A novel simulation tool was evaluated to determine how effectively it can model the UV-C intensity on various surfaces of a patient room
- The results of the simulation were validated experimentally using radiometric sensors
- This methodology can be used to optimize the location of a device in a room and to determine the treatment times necessary to achieve a target dose.
- In the future, this approach could help designers maximize the effectiveness of UV-C disinfection for new or remodeled facilities.

### Acknowledgements

The authors acknowledge Tru-D, LLC and Ultraviolet Devices, Inc., who loaned the devices used in this study, and Lumacept, Inc., who provided the UV-C reflective coating.

