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September 24, 2020

Oregon State Legislature
House Interim Committee on Business and Labor
900 Court St. NE
Salem Oregon 97301

Re: Oregon OSHA COVID-19 Workplace Safety Rules and Guidance

Dear Members of the Committee:

I write on behalf of the Association of periOperative Registered Nurses (AORN) to express our support for the Oregon Occupational Safety and Health Administration's (OSHA) dedication to workplace health and safety, particularly during the COVID-19 pandemic. AORN would like to share with the Business and Labor Committee our own COVID-19 safety concerns as previously communicated to Oregon OSHA.

We commend Oregon OSHA for leading on this important health and safety issue for all workers and once again request that the state also consider addressing the unique risk to surgical teams of surgical smoke exposure and potential COVID-19 transmission. AORN has twice raised this COVID-19 transmission risk concern with OSHA: in May 2020 with a joint letter signed by the executives of the Oregon Nurses Association, Oregon Federation of Nurse Health Professionals, and AORN (copy attached), and again during the August 2020 public comment period on the OSHA Draft COVID-19 Temporary Standard (copy attached).

Surgical smoke is the result of human tissue contact with lasers and electrosurgical pencils commonly used for dissection and hemostasis during surgery. Approximately 90% of all surgical procedures generate surgical smoke. In addition to the already known and documented health concerns related to the toxic gases and vapors in surgical smoke – including as benzene, hydrogen cyanide, formaldehyde, bioaerosols, dead and live cellular material, blood fragments, and viruses – surgical teams now have the added concern of inhaling the COVID-19 virus during surgical procedures on COVID-19 positive patients.

Based on this concern, the American College of Surgeons is just one surgical society currently recommending the use of surgical smoke evacuation equipment in its *COVID-19: Considerations for Optimum Surgeon Protection*.¹ Similarly, AORN recommends the evacuation of all surgical smoke as it contains hazardous chemicals, ultra-fine particle, viruses, bacteria, and cancer cells.

¹ https://www.facs.org/-/media/files/covid19/considerations_optimum_surgeon_protection.ashx

Surgical smoke can be safely and effectively evacuated to protect patients and surgical team members, and smoke evacuation does not involve construction costs or changes to a facility's HVAC system or general room ventilation. In fact, surgical smoke can be evacuated by using the operating room suction systems already installed in every operating room or by using a local smoke evacuator that is attached to the electrosurgical pencil to capture the smoke at the source.

The Oregon OSHA draft COVID-19 Temporary Standard published in August would have health care facilities conduct an exposure risk assessment considering (among other things) measures to minimize worker exposure to COVID-19. Healthcare settings are called upon to consider exposure risks related to aerosol-generating procedures, yet are not asked to consider the exposure risks related to inhaling the surgical smoke generated during surgical procedures. It is AORN's position that Oregon OSHA must similarly require healthcare employers to consider both the exposure risks inherent in surgery settings related to surgical smoke and the hazard controls available to protect health care workers, both in connection with the general requirements in Section(3)(a)(A)-(F) and within the infection control plan required in Section (4).

AORN's mission is to promote safety and optimal outcomes for all patients undergoing operative and other invasive procedures. We represent the interests of over 160,000 perioperative registered nurses, including over 740 AORN members in Oregon. It is our hope that Oregon OSHA's permanent rule addresses these ongoing safety concerns of surgical team members related to surgical smoke.

Thank you for your thoughtful consideration. If you have any questions please do not hesitate to reach out to me at ahader@aorn.org.

Sincerely,

A handwritten signature in black ink, appearing to read 'Amy Hader', with a stylized, flowing script.

Amy Hader, JD
AORN General Counsel