

Chair Patterson, Vice-Chair Knopp, and members of the Senate Committee on Health Care:

For the record my name is Deb Carter and I am with OHSU.

I am writing to talk about surgical smoke in the OR - an issue that impacts operating room nurses and surgical technicians, surgeons, patients, and all others who pass through the doors of an operating room.

I am an operating room nurse who has never smoked and strives to live a healthy lifestyle. Working in the operating rooms for over 40 years, I have been forced to inhale surgical smoke for a long time.

Remember the stifling smoke we all struggled with during the terrible forest fires last year? You had to wear a mask to protect yourself from the Covid-19 virus but it wasn't enough of a barrier to protect you from the smell or the irritation to your airway and lungs and certainly not from the burning sensation in your eyes. You did whatever you could to just stay inside, close up your house and avoid that smoke.

Now imagine being stuck outside with no escape and doing this day after day after day.

When you are involved in a surgical procedure there is no moving away from the smoke plume created by some of our most commonly used surgical devices. You can't escape the burning sensation in your eyes and airway much less the strong smell. Even if you aren't standing right at the surgical field where the smoke is created, that smoke fills the entire room. And, unlike the smoke from those forest fires, surgical smoke can bring with it the addition of bloodborne pathogens and live viruses.

HB 2622 would ensure that harmful surgical smoke is evacuated from every operating room in Oregon.

Please support HB 2622 which enacts a simple, accessible solution to a problem faced by everyone in the operating rooms while ensuring flexibility for how hospitals and ASCs administer this solution.

Thank you for considering this important legislation.