Chair Prusak, members of the Committee:

For the record, my name is Haley Sands and I am Registered Nurse with 15 years of Operating Room experience, and for the past 6 years, I have been working as an Operating Room Manager at Oregon Health & Science University.

Surgical smoke awareness and safety is something that I was largely unaware of until a member of my team came to me with a concern about it. I spent a lot of time with this person, learning about surgical smoke and its risks and then took the time to dive into the literature and to educate myself. Since then I have been taking every opportunity to influence policy and change culture around surgical smoke in the operating room.

Two years ago, I set out with another RN (Deb Carter), to reform our internal hospital smoke evacuation policy to REQUIRE smoke evacuation in the OR. We drafted a strong policy that allowed for a few exceptions and largely had good support from the organizational nursing leaders. When the policy went for review with a small group of surgeon leaders, it became clear that the minority of voices in objection to the policy would be given the authority to dictate whether or not surgical smoke evacuation could occur. Ultimately, the language in our policy was downgraded back to a recommendation and at a single person's discretion.

After testifying before the Oregon Senate Healthcare committee a year ago, our group of advocates (the same ones you see today) were told that legislation was not the answer. We were told that Oregon had a state arm of OSHA that regulates and upholds occupational health and safety to workers. They would be the ones that would protect us. In the following three months, OHSU received 3 OSHA complaints regarding unevacuated surgical smoke in the operating room.

I was heartened to see what I thought was a very robust response to the concerns. OHSU partnered with an independent forensic group to try and identify and capture the contents and levels of surgical smoke in the operating room. The process of capturing the smoke included passive monitors on staff scrubbed in at the sterile field as well and surgical lights and ceilings. While well intended, the methods were limited and the results were that no exposures noted that exceeded Occupational Exposure Limits. Though their finding did not indicate a clear risk, the forensic firm went on to issue two recommendations to OHSU, "the use of local exhaust ventilation" at the origin of surgical smoke generation. As well as that additional assessments be performed in other procedure and under other conditions in order to ensure that "likely exposure scenarios and conditions are assessed."

Here we are a year later still working under the same policy which recommends but does not require surgical smoke evacuation, and we are still breathing in the same surgical smoke that we know contains carcinogens and aerosolized tissue, still not protecting our healthcare providers in a time of a global pandemic.

Recommendations are not enough. We already have a policy that *recommends* the use of surgical smoke evacuation and the use of *reasonable* judgement for when to use a smoke evacuation device. It's not enough. The lack of organization support to prioritize the health and safety of the nearly 180 staff members' that report to me is unacceptable. We can no longer accept policies that are based in recommendations that are unenforceable, and ultimately compromise staff member's health and safety. We can no longer allow a single person to make a choice that impacts the long term health of all those that work around them. There is a pattern of apathy emerging here that is avoidant of overall risk and

impact. OHSU has not protected my team. OSHA cannot protect my team without this legislation. I am here now to protect my team and I need your help to do that.

HB 2622 would ensure that harmful surgical smoke is evacuated from every operating room in Oregon and provide me the peace of mind that my health and safety and the health and safety of those 180 team members are protected while at work. Thank you for considering this important legislation.