SIREN NOTIFICATION

For more information contact:

Penny Smalley- pennyis@aol.com-773-988-0499

To: Illinois Hospital / Clinic and Ambulatory Surgical Centers

From: Illinois Department of Public Health

Date: September 26, 2022

Subject: Hospital and ASTC Notification of Required Facility Policy-

Surgical Smoke Plume Evacuation System

Surgical Smoke Plume Evacuation System – P.A. 102-0533 – Under the legislation, hospitals and ambulatory surgical treatment centers are required to adopt a policy to ensure the elimination of surgical smoke plume by use of a surgical smoke plume evacuation system for each procedure that generates surgical smoke plume from the use of energy-based devices. Each facility must submit a notification to the Department in a letter identifying the date of the adoption of the facility's policy.

Hospitals are required to report to the Department that the Hospital has adopted and implemented a policy to meet the Hospital Licensing Requirements at Title 77 III Adm Code 250.1325

Ambulatory Surgical Treatment Centers (ASTC) that the ASTC has adopted and implemented a policy to meet the Ambulatory Surgical Treatment Center Licensing Requirements at Title 77 III Adm Code 205.410.

All providers shall send reports to IDPH email account DPH.HospitalReports@illinois.gov or mail to Illinois Department of Public Health, HCF&P, 525 West Jefferson St, 4th Floor, Springfield, IL 62671.

Please direct any further questions to karen.senger@illinois.gov

Link to regulations Hospital Title 77 III Adm. Code 250 https://www.ilsos.gov/departments/index/register/volume46/register_volume46_issue_38.pdf

Link to regulations Ambulatory Surgical Treatment Center Tile 77 III Adm. Code 205 https://www.ilsos.gov/departments/index/register/volume46/register_volume46_issue_1_2.pdf

Surgical Smoke Plume Evacuation System - P.A. 102-0533

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Background:

- On September 16th, 2022, the Illinois Department of Public Health (IDPH) published the requirements for compliance of *Surgical Smoke Plume Evacuation System P.A.102-*0533.
- Mandates every facility offering surgical services, must document implementation of a
 policy for the evacuation of surgical plume when energy producing surgical instruments
 are used.
- All facilities must comply by December 1, 2022 and report record of compliance to IDPH

Illinois Register Rules for Compliance:

- The rules provide clear direction of the expectations for surgical plume evacuation management and compliance.
- The rules have been published in the Illinois Register and can be found at the following sites:
 - Link to regulations Hospital Title 77 III Adm. Code
 250 https://www.ilsos.gov/departments/index/register/volume46/register_volume46 issue 38.pdf
 - Link to regulations Ambulatory Surgical Treatment Center Tile 77 III Adm. Code 205 https://www.ilsos.gov/departments/index/register/volume46/register_volume46_issue_12.pdf

Reporting Proof of Compliance:

- Hospitals are required to report to the Department that the Hospital has adopted and implemented a policy to meet the Hospital Licensing Requirements at Title 77 III Adm Code 250.1325
- Ambulatory Surgical Treatment Centers (ASTC) required to report that the ASTC has adopted and implemented a policy to meet the Ambulatory Surgical Treatment Center Licensing Requirements at Title 77 Ill Adm Code 205.410.
- All providers shall send reports to IDPH email
 account <u>DPH.HospitalReports@illinois.gov</u> or mail to Illinois Department of Public Health,
 HCF&P, 525 West Jefferson St, 4th Floor, Springfield, IL 62671.

Resources

- This law was passed because every surgical team member, and every patient we care for, deserves Clean Air for Safer Care™. Let's work together towards the goal of 100% Surgical Plume Free Operating Rooms!
- Don't miss the December 1, 2022, compliance deadline If you need help we are available for policy drafting, education, program management, or consultation.

Illinois Register IDPH: SUBPARTA: GENERAL PROVISIONS

Section 250.100 Definitions For more information contact: Penny Smalley – pennyjs@aol.com – 773 – 988 – 0499

Surgical smoke plume – the by-product of the use of energy-based devices on tissue during surgery and containing hazardous materials, including, but not limited to, bioaerosols, smoke, gases, tissue and cellular fragments and particulates, and viruses. (Section 6.32(a) of the Act)

Surgical smoke plume evacuation system – a dedicated device that is designed to capture, transport, and filter surgical smoke plume at the site of origin and before it can diffuse and pose a risk to the occupants of the operating or treatment room. (Section 6.32(a) of the Act)

SUBPART J: SURGICAL AND RECOVERY ROOM SERVICES

Section 250,1210 Surgery 250,1220 Surgery Staff Policies & Procedures 250,1230 250.1240 Surgical Privileges Surgical Emergency Care 250.1250 Operating Room Register and Records 250.1260 Surgical Patients 250.1270 Equipment 250.1280 Safety 250.1290 250.1300 Operating Room Visitors in Operating Room 250.1305 250.1310 Cleaning of Operating Room Postanesthesia Care Units 250.1320 250.1325 Surgical Smoke Plume Evacuation System Equipment and Policies

Smoke Free Illinois Act [410 ILCS 82]

(Source: Amended at 46 Ill. Reg. 15597, effective September 1, 2022)

SUBPART J: SURGICAL AND RECOVERY ROOM SERVICES

Section 250.1325 Surgical Smoke Plume Evacuation System Equipment and Policies

- a. To protect patients and health care workers from the hazards of surgical smoke plume, hospitals shall adopt policies to ensure the elimination of surgical smoke plume by use of a surgical smoke plume evacuation system for each procedure that generates surgical smoke plume from the use of energy-based devices, including, but not limited to, electrosurgery and lasers. (Section 6.32(b) of the Act)
 - The facility's surgical department shall perform a risk assessment to identify all procedures that are performed with energy-based surgical devices (e.g. lasers, electrosurgical instruments, and ultrasonic devices) that generate a surgical smoke plume and will require the use of a surgical smoke plume evacuation system.
 - 2. All surgical team members shall be trained on the methods for mitigating the hazards and minimizing exposure to surgical smoke plume, positioning and operating surgical smoke plume evacuation pursuant to the manufacturer's instructions, and the requirements in facility policies and procedures for management of surgical smoke plume.
 - 3. Staff shall wear appropriate respiratory protection when needed as secondary protection against residual smoke in accordance with the hospital's respiratory protection plan.

- 4. To protect against potential smoke hazards, the facility's policy and procedure shall minimally include:
 - A. During utilization of the smoke evacuator, the suction nozzle inlet shall be positioned as close to the surgical site as possible to maximize capture of airborne contaminants.
 - B. The smoke evacuator shall be "ON" (activated) at all times when airborne particles are produced during all surgical or other procedures
 - C. New tubing shall be used before each procedure and the smoke evacuator filter shall be replaced as recommended by the manufacturer. Consider all tubing, filters and absorbers as infectious waste and dispose of appropriately in accordance with OSHA bloodborne pathogens standards.
 - D. Inspection of smoke evacuator systems regularly, including inspection immediately prior to use, to ensure proper functioning.
- The hospital shall report to the Department that policies required under subsection (a) have been adopted. The hospital shall provide the Department a letter identifying the date of the adoption of the facility's policy for utilization of smoke evacuation system. (Section 6.32(c) of the Act)

(Source: Added at 46 III. Reg. 15597, effective September 1, 2022)