

SENATE BILL REPORT

ESSB 5594

As Passed Senate, March 1, 2011

Title: An act relating to handling of hazardous drugs.

Brief Description: Regulating the handling of hazardous drugs.

Sponsors: Senate Committee on Labor, Commerce & Consumer Protection (originally sponsored by Senators Kohl-Welles, Keiser, Prentice, Conway, Kline and Murray).

Brief History:

Committee Activity: Labor, Commerce & Consumer Protection: 1/31/11, 2/07/11, 2/10/11 [DPS, w/oRec].

Passed Senate: 3/01/11, 49-0.

SENATE COMMITTEE ON LABOR, COMMERCE & CONSUMER PROTECTION

Majority Report: That Substitute Senate Bill No. 5594 be substituted therefor, and the substitute bill do pass.

Signed by Senators Kohl-Welles, Chair; Conway, Vice Chair; Keiser and Kline.

Minority Report: That it be referred without recommendation.

Signed by Senators Holmquist Newbry, Ranking Minority Member; King, Assistant Ranking Minority Member; Hewitt.

Staff: Edith Rice (786-7444)

Background: Antineoplastic drugs are chemotherapy agents that control or kill cancer cells. Drugs used in the treatment of cancer are cytotoxic (destructive to cells within the body) but are generally more damaging to dividing cells than to resting cells.

Workers may be exposed to a hazardous drug at many points during its manufacture, transport, distribution, receipt, storage, preparation, and administration, as well as during waste handling and equipment maintenance and repair. All workers involved in these activities have the potential for contact with an uncontained hazardous drug.

Exposure to these drugs in the workplace has been associated with acute and short-term reactions, as well as long-term effects. Reports range from skin-related and ocular effects to flu-like symptoms, sore throat, chronic cough, infections, dizziness, eye irritation, and

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headaches among nurses, pharmacists, and pharmacy technicians routinely exposed to hazardous drugs in the workplace. Reproductive studies on health care workers have shown an increase in fetal abnormalities, fetal loss, and fertility impairment resulting from occupational exposure to these drugs.

Hazardous drugs enter the body through inhalation, accidental injection, ingestion of contaminated foodstuffs or mouth contact with contaminated hands, dermal absorption, and less commonly through inhalation.

Compounding of these drugs often requires sterile preparation and as such is regulated as pharmaceutical compounding by the United States Pharmacopeia (USP), chapter 797. USP 797 has provided minimal guidance for the handling of hazardous drugs.

A series of articles, published in July 2010 in the Seattle Times, highlighted health care personnel who had worked with hazardous drugs and been subsequently diagnosed with some form of cancer.

Summary of Engrossed Substitute Bill: The Department of Labor and Industries (L&I) will adopt rules for the handling of hazardous drugs in health care facilities. Rule development will consider input from hospitals, organizations which represent health care personnel and other stakeholders. It will take into account reasonable time for facilities to implement new requirements. Rules developed will be consistent with National Institute for Occupational Safety and Health (NIOSH) provisions adopted in the 2004 alert, as updated in 2010, but will not exceed them. Rules adopted can incorporate updates and changes by the Centers for Disease Control and Prevention.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Original Bill: PRO: NIOSH guidelines exist for hazardous drugs but we don't have specific regulations. We have general regulations which are difficult to enforce. Susan Crump, pharmacist, was featured in a Seattle Times series last year. She had worked extensively with hazardous drugs and subsequently developed pancreatic cancer and died. She saw many friends develop cancer; many of them several times. Two recent studies have confirmed chromosomal abnormalities in health care workers. Exposures are still occurring. The bill should be drafted to update as NIOSH updates standards. Guidelines are in place but institutional policies vary, and there should be uniform standards which should include all health care personnel as well as housekeeping and linen staff.

Persons Testifying: PRO: Dr. Michael Silverstein, L&I; Steven Saxe, DOH; Chelsea Crump, Ellie Menzies Service Employees International Union 1199 NW; Sofia Aragon,

Washington State Nurses Assn.; Sharon Ness, United Food, Commercial Workers WA State Council.