

PART R-1—SURGICAL SMOKE

NEW SECTION

WAC 296-62-510 Surgical smoke.

NEW SECTION

WAC 296-62-51010 Scope and application. (1) This section applies to surgical smoke exposures in hospitals, as defined in RCW 70.41.020, and ambulatory surgical facilities, as defined in RCW 70.230.010.

(2) Exposures to surgical smoke in other health care settings and exposures to similar smokes, particulates, vapors, and gases in other settings are covered under chapter 296-841 WAC, Airborne contaminants, and other applicable substance specific standards.

NEW SECTION

WAC 296-62-51020 Definitions. The following definitions apply to this section:

Smoke evacuation system. Equipment designed to capture and neutralize surgical smoke at the point of origin, before the smoke makes contact with the eyes or the respiratory tract of occupants in the room. Smoke evacuation systems may be integrated with the energy generating device or separate from the energy generating device.

Surgical smoke. The by-product that results from contact with tissue by a tool that performs a surgical function using heat, laser, electricity, or other form of energy.

NEW SECTION

WAC 296-62-51030 Surgical smoke program. (1) Employers must have a written surgical evacuation smoke program for any procedure that may generate surgical smoke.

(2) The surgical smoke evacuation program must have the following elements:

(a) Selection of surgical smoke evacuation systems.

(b) Required use of a surgical smoke evacuation system during any planned surgical procedure that is likely to generate surgical smoke

which would otherwise make contact with the eyes or respiratory tract of the occupants of the room.

NEW SECTION

WAC 296-62-51040 Surgical smoke evacuation systems. (1) Employers must control employee exposure to surgical smoke with surgical smoke evacuations systems, as feasible.

(2) Surgical smoke evacuation systems must capture and neutralize surgical smoke before it makes contact with the eyes or respiratory tracts of room occupants.

(a) Surgical smoke should be captured as close to the point of origin or point at which it is released from the body of the patient as feasible.

(b) The system must neutralize the smoke in a manner that protects the safety of room occupants by filtering, safely exhausting outside or to a building exhaust system, or otherwise treating the air in a manner that protects the safety and health of the room occupants and other employees.

Note: Subject to funding being made available by the legislature, between January 2, 2025, and June 30, 2025, hospitals that meet certain criteria may apply for reimbursement of up to \$1,000 per operating room for smoke evacuation systems that were purchased and installed on or before January 1, 2025. See WAC 296-62-51070 Appendix A for details.

NEW SECTION

WAC 296-62-51060 Effective dates. (1) Chapter 296-62 WAC, Part R-1, is effective January 1, 2024.

(2) WAC 296-62-51030 and 296-62-51040 do not apply to the following establishments until January 1, 2025:

(a) Hospitals certified as critical access hospitals under 42 U.S.C. Sec. 1395i-4;

(b) Hospitals with fewer than 25 licensed acute care beds;

(c) Hospitals certified by the centers for medicare and medicaid services as sole community hospitals; and

(d) Hospitals that qualify as a medicare dependent hospital.

NEW SECTION

WAC 296-62-51070 Appendix A—Nonmandatory—Reimbursement for smoke evacuation systems. Equipment cost reimbursement.

(1) Subject to funding being made available by the legislature, the following hospitals may apply for reimbursement of costs for purchase and installation of surgical smoke evacuation equipment:

(a) Hospitals certified as critical access hospitals under 42 U.S.C. Sec. 1395i-4;

(b) Hospitals with fewer than 25 licensed acute care beds;

(c) Hospitals certified by the centers for medicare and medicaid services as sole community hospitals; and

(d) Hospitals that qualify as a medicare dependent hospital.

(2) Costs must be incurred by the hospital on or before January 1, 2025.

(3) Reimbursement is limited to \$1,000 for each operating room in the hospital.

(4) Reimbursement requests may be submitted from January 2, 2025, until April 30, 2025. If moneys in the reimbursement account are exhausted, no further requests will be processed.

(5) To apply for reimbursement, the hospital must follow the directions posted on the department website, <https://www.lni.wa.gov/>.