



Los Angeles County Department of Health Services

Policy & Procedure Title:		Hazardous Drug Medical Surveillance	
Category:	900-999 Safety, Security and Related Programs	Policy No.:	925.350
Originally Issued:	12/1/2017	Update (U)/Revised (R):	
DHS Division/Unit of Origin:	EHS Committee, DHS Pharmacy and DHS Safety		
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Distribution: DHS-wide	<input checked="" type="checkbox"/>	If not DHS-wide, other distribution:	

PURPOSE:

To define Employee Health Services (EHS) Hazardous Drug (HD) Surveillance Program. To comply with the various federal recommendations related to the protection of Department of Health Services (DHS) employees from injury or illness due to HD exposure.¹

SCOPE:

This policy applies only to DHS employees. Surveillance of contract staff, affiliates, volunteers, trainees, students, and other persons whose conduct, in the performance of work for DHS, is under the discretion of the contract, affiliate, volunteer, trainees or student employer, school or agency.

Hazardous Drugs (HDs) may pose an occupation risk to employees who compound, prepare, administer, clean up, or dispose of HDs and waste. Exposure to HDs may result from contact of HD residues present in the work area and/or inhalation of aerosols or dust generated during the handling of HDs. As a result, the EHS HD Surveillance Program shall be initiated as a tool to assess and document exposure to HDs with the goal of minimizing adverse health effects in employees. All employees who are expected to administer or compound HDs for a combined total of 240 hours a year will be referred for enrollment into the medical surveillance program. Employees who sustain a direct exposure to a HD should be evaluated using the HD medical surveillance program. HD included in surveillance are identified by a pharmacy risk

¹ Medical Surveillance is only recommended by NIOSH, OSHA, American Society of Health-System Pharmacists (ASHP), U.S. Pharmacopeial Convention but not mandated. Providing a medical surveillance program for hazardous drug handlers is recognized as the standard of occupational health practice for anti-neoplastic and hazardous drug handlers.

The mission of the Los Angeles County Department of Health Services is to ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

Revision/Review Dates:
Department Head/Designee Approval:

assessment (see appendix A). Employees may decline surveillance by signing the declination of medical surveillance.

Hazardous medications covered by this policy include medications listed in NIOSH List of Antineoplastic and Other Hazardous Drugs in Healthcare Settings, 2016, Table 1. Group 1 and additional medications that warrant surveillance.

DEFINITION(S):

A Hazardous Drug (HD) is defined as a drug that may exhibit one or more of the following characteristics:

- Genotoxicity
- Carcinogenicity
- Teratogenicity or fertility impairment
- Serious organ or other toxic manifestation at low doses in experimental animals or treated patients

POLICY:

It is EHS' policy to comply with all applicable standards and regulations to provide the employees with a safe and healthful work environment and to protect the health and safety of the patients and public.

The elements of this medical surveillance program for HD may include:

- evaluation consisting of a general history with particular attention to the reproductive and urinary systems
- physical examinations, and
- laboratory studies.

Currently, few National Institute of Occupational Safety and Health (NIOSH) recommended exposure limits (RELs), Occupational Safety and Health Administration (OSHA) permissible exposure limits (PELs), or American Conference of Governmental Industrial Hygienist threshold limit values (TLV[®]) have been established for HD in general.

PROCEDURE:

Service Area Managers/Supervisors will identify employees who meet criteria by enrolling them in the HD surveillance program via the supervisor portal. Medical surveillance may be discontinued if the employee no longer works with anti-neoplastic agents.

Medical Surveillance:

Medical surveillance may involve collecting and interpreting data to detect changes in the employee health status. The elements of a medical surveillance program are used to establish

a baseline of workers health and then monitor their future health as it relates to their potential exposure to hazardous agents. This information should be collected and analyzed in a systemic fashion to allow early detection of disease patterns in individual workers and groups of workers.

All medical examinations and procedures are performed by a licensed independent practitioner and provided at a reasonable time and place without cost to the employees. The medical examinations are offered at pre-placement, annually, or more frequently when indicated following acute exposure and at transfer or termination of employment/assignment).

The evaluation may include a medical/exposure history and physical exam when indicated. Assessments consist of an emphasis on potential risk factors, such as past hematopoietic, malignant, or hepatic disorders. In the absence of environmental sampling data, worker exposure can be assessed by using records of drugs and quantities handled; hours spent handling these drugs per week, and number of preparations/administrations per week.

Employee Health Services or designated agency will be provided with:

- A description of the employee duties as they relate to the employee's exposure.
- The employee's exposure levels or anticipated exposure levels.
- A description of any personal protective equipment used or to be used.
- Information from previous medical examinations of the employee, which is not readily available to the examining provider.

Medical Examinations:

- Offered prior, annually, and at termination to assignment where exposure may occur.
- Performed by licensed health provider in Employee Health.
- Hazardous Drug Questionnaire (Form I) to be completed including medical and work history.
- When indicated, a limited physical examination may be conducted with special emphasis on the skin, mucous membranes, cardiopulmonary and lymphatic systems and liver
- For antineoplastic handling, the laboratory assessment may include a complete blood count with differential, liver function tests, blood urea nitrogen, creatinine, reticulocyte count and a urine dipstick.
- For Bacillus Calmette-Guerin (BCG) handling, assessment may include Interferon Gamma Release Assay (IGRA), chest x-ray, tuberculosis and immune suppression questionnaire.
- Any other tests healthcare provider deems necessary with justification.
- Medical evaluation requirements under Title 8 CCR Section 5144(e) shall be followed if a respirator is used.
- Employee must sign a declination form if he or she declines the Medical Surveillance.

- Termination exam offered within thirty (30) calendar days before or after the date of termination of employment/assignment, unless the medical examination was done within the last year.

Post Exposure Examination:

- Post exposure evaluation is tailored to the type of exposure (e.g., spills or needle sticks from syringes containing hazardous drugs).
- An assessment of the extent of exposure with physical examination focuses on the involved area as well as other organ systems commonly affected.
- Treatment and laboratory studies follow as indicated and should be guided by emergency protocols.
- Employee must sign a declination form if he or she declines Post-Exposure Medical Examination.
- Employee is instructed to submit an event report in the Safety Intelligence system.

Recordkeeping:

Hazardous drug medical surveillance records shall be maintained for the duration of employment/assignment plus thirty (30) years, in accordance with Title 8 CCR §3204 of the General Industry Safety Orders.

ATTACHMENTS/FORMS:

Appendix A – List of Hazardous Drugs to be Included in Medical Surveillance
EHS Forms I, J, K

REFERENCE(S)/AUTHORITY:

ASHP Guidelines on Handling Hazardous Drug. American Society of Health-System Pharmacists, 2006;63:1172-93.

OSHA Technical Manual: Controlling Occupational Exposure to Hazardous Drugs, §VI Medical Surveillance, 1999.

NIOSH Alert, Preventing Occupational Exposures to Antineoplastic and Other Hazardous Drugs in Health Care Settings [DHHS (NIOSH) Publication Number 2004-165].

NIOSH List of Antineoplastic and Other Hazardous Drugs in Healthcare Settings, 2016

NIOSH, Medical Surveillance for Health Care Workers Exposed to Hazardous Drugs [DHHS (NIOSH) Publication Number 2007-117].

Merck and Co, Inc., Agent Summary Sheet for Bacillus Calmette-Guerin Vaccine, TICE® BCG

United States Pharmacopeial Convention. General Chapter <800> Hazardous Drugs— Handling in Healthcare Settings. <http://www.usp.org/usp-nf/notices/general-chapter-hazardous-drugs-handling-healthcare-settings>