POLICY NUMBER: A-001

TITLE: WASTE ANESTHESIA GASES AND VAPORS EXPOSURE CONTROL POLICY

1.0 PURPOSE

Waste inhalation anesthetic gases and vapors are those that are released into rooms used for surgical and other procedures utilizing volatile anesthetics. The waste anesthetic gases and vapors of concern are nitrous oxide and halogenated agents (vapors) such as isoflurane, enflurane, and desflurane. Employees working in these surgical areas may be subject to environmental exposure associated with the administration of the anesthetic gases. This document outlines the policies and procedures to be utilized by the VA Pittsburgh Healthcare System (VAPHS) Animal Research Program to control and monitor employee exposure to Waste Anesthetic Gases (WAG) and vapors.

2.0 REVISION HISTORY

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<tr>
<th>R&amp;D Committee Approval Date</th>
<th>Revision #</th>
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<tr>
<td>November 14, 2017</td>
<td>2.6</td>
<td>Addition of Occupational Health responsibilities; rewording of policy; remove title of policy; update to references</td>
<td>Section 4.0; Section 5.0; Sections 6.3 and 6.5; Section 7.0</td>
<td>November 17, 2017</td>
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<td>August 23, 2016</td>
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<td>Update Department responsibilities; revised description of exposure limits; update program information; confirm References</td>
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<td>2.1</td>
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<td>2.0</td>
<td>Updated policy</td>
<td>Formatting standardized; all sections updated/revised</td>
<td>July 15, 2009</td>
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3.0 SCOPE

This policy applies to all VAPHS Animal Research Program employees working with animals within the VAPHS ARF and who may be exposed to waste anesthetic gases and vapors.

4.0 RESPONSIBILITIES

1. **Facilities Management Services** will be responsible for preventative maintenance of affected heating, ventilation, and air conditioning (HVAC) systems and scavenging systems.

2. **Industrial Hygienist** will coordinate all industrial hygiene monitoring, conduct the WAG training sessions, review the procedures used during surgeries when an overexposure occurs, and provide trace gas testing when necessary. If the Industrial Hygienist is not available for an extended period of time, the Biosafety Officer will discuss/review surgical procedures after an overexposure to avoid delays in determining a cause.

3. **Research and Development Department (R&D)** will be responsible for ensuring that all employees within the Animal Research Program have undergone WAG training regarding work practices designed to reduce ambient WAGs during the administration of anesthesia. R&D will keep records on the training dates, topics and attendees. In addition, R&D will be responsible for notifying employees of results from the monitoring badges and ensuring that any exposed employee is identified for baseline and annual medical surveillance through Occupational Health. Exposure records are also forwarded to Occupational Health to be placed in medical records. R&D is responsible for preventative maintenance of anesthesia delivery units (both vaporizer and flow meter). If needed, R&D will coordinate third-party trace gas testing and keep records of the sampling.

4. **Occupational Health** is responsible for providing health assessments for employees enrolled in the Animal Research Program and that utilize WAG. If a Research employee is overexposed, they will provide guidance on health issues that may arise from increased exposure to anesthetic gases and vapors, as well as an offer an optional exam.

5.0 POLICY

The VAPHS Animal Research Program recognizes that anesthetic gases must be utilized in the conduct of animal research. Liquid anesthetic agents are converted into the anesthetic gas or vapor through the use of vaporizers. The vapor is administered and delivered to animals in a volume greater than that required by the animal’s metabolic rate. These non-flammable substances vaporize at room temperature. The VA, Occupational Safety and Health Administration (OSHA), the National Institute for Occupational Safety and Health (NIOSH) and the American Conference of Governmental Industrial Hygienists (ACGIH) concur that there is insufficient data to establish safe occupational exposure levels for halogenated anesthetic gases. NIOSH, however, has established recommended exposure limits. The VAPHS Animal Research Program has developed exposure control methods to reduce or maintain exposure below these recommended limits.

For surgical procedures that utilize anesthesia, most employees use isoflurane (Forane®). Isoflurane is a clear, colorless, stable liquid and has a mildly pungent, musty ethereal odor. There is no specific work exposure limit established for isoflurane by OSHA. However, based on NIOSH and NIH recommendations, the VAPHS will use the occupational exposure limit (OEL) of 2 ppm over the course of one surgical procedure. In order to minimize occupational exposure to isoflurane, all research employees must wear a sampling badge for halogenated agents during every procedure. If an employee is exposed to a concentration above the OEL of 2 ppm, then the employee must contact the Industrial Hygienist who will then review the proper operating procedures for using the equipment and observe the use of the instruments, if necessary. The employee will not be permitted to continue conducting these procedures until after discussions with the
Industrial Hygienist (or Biosafety Officer if the Industrial Hygienist is on leave). In addition, the employee is required to contact Occupational Health to undergo counseling and an optional exam.

A carrier gas must be used when converting liquid anesthetic agents into a gas or vapor. Most employees use oxygen as the only carrier gas, however, several investigators use a combination of nitrous oxide and oxygen. Nitrous oxide is a colorless gas at room temperature with a slightly sweet odor and taste. Like halogenated gases, there is no specific work exposure limit established for nitrous oxide by OSHA. However, the ACGIH states that the exposure limit for nitrous oxide is 50 ppm as a Time Weighted Average (TWA). All research employees must wear a sampling badge for nitrous oxide for every procedure. At the VAPHS, an action limit will be set at 25 ppm (concentration during course of nitrous oxide use). If an employee is exposed to a concentration above the action limit (25 ppm) but below the exposure limit (50 ppm), the employee will meet with the Industrial Hygienist to discuss ways to ensure the concentration remains under the action limit. The nitrous oxide system will be checked for leaks by the Industrial Hygienist. If an employee is exposed to a concentration above the exposure limit over the 8 hour TWA (50 ppm), then the employee must contact the Industrial Hygienist who will then observe the use of the instruments and review the proper operating procedures for using the equipment. The employee will not be permitted to continue conducting these procedures until after meeting with the Industrial Hygienist (or the Biosafety Officer if the Industrial Hygienist is on leave). In addition, the employee is required to contact Occupational Health to undergo counseling and an optional exam. The nitrous oxide system may have to be shut down until the problem is identified.

6.0 PROCEDURES

The VAPHS Animal Research Program has developed the following procedures to minimize employee exposure to WAG.

1. Equipment Certification & Monitoring Requirements
2. Employee Information and Training
3. Medical Surveillance
4. Labels and Posting
5. Record keeping

6.1. Equipment Certification & Monitoring Requirements

A. Equipment Certification:
   All anesthesia equipment used in conjunction with the Animal Research Program must be maintained in good working condition. The primary standard for vaporizing recalibration/certification is to be governed by manufacturer’s recommendations. Certification consists of the inspection and approval of all mechanics associated with the vaporizer and flow meter. Calibration consists of the scientific analysis of the emitted gas and insuring the accuracy of the concentration settings and any subsequent correction, if needed.

1. Procedures within the VAPHS:
   All vaporizers and flow meters must be shipped out to the manufacture and calibrated on an annual basis. All anesthesia equipment must be serviced by qualified personnel or by an authorized service center. Qualified personnel must be experienced in clinical equipment maintenance, service and certification.

2. Procedures within VA Leased Space Locations:
   Facilities from which the VA leases space are expected to adhere to their own local policy
regarding certification of anesthesia equipment.

B. Exposure Monitoring:
Potential effects of exposure to WAGs are nausea, dizziness, headaches, fatigue, and irritability, as well as sterility, birth defects, miscarriages, cancer, and liver and kidney disease. In order to ensure that the concentrations of WAGs are maintained below the NIOSH and ACGIH recommended limits, the following environmental monitoring procedures will be utilized. The purpose of these procedures is to determine the airborne concentration of WAG and verify that all equipment is safe to use.

1. Personal Monitoring Badges. R&D provides personal monitoring badges for employees who perform surgeries for the Animal Research Program. This requirement applies to those employees working on VAPHS property. Monitoring badges are available for both halogenated gases (i.e., isoflurane) and for nitrous oxide. Employees who work in rooms in which WAGs are utilized are required to monitor their exposure during each procedure involving WAG. In addition, for employees that utilize nitrous oxide as a carrier gas, a nitrous oxide badge must be worn during every surgical procedure. The badges, both for halogenated gases and nitrous oxide, are used to monitor a single procedure or timeframe not to exceed 8 hours. The badges are located in a box outside of the procedure room GA119 in the Animal Research Facility. Within 24 hours after procedure completion, the badges are to be returned to the Animal Research Facility Supervisor (or Acting Supervisor) or designee when the Animal Facility Supervisor is not available. The Animal Facility Supervisor (or designee) then sends the monitoring badge to an accredited laboratory for determination of acceptable NIOSH limits. Procedures related to employee notification of monitoring results are described in section 6.5.

2. Trace Gas Tests. Within the VAPHS, trace gas tests had previously been performed quarterly by an outside consulting firm. Since the Research Service now requires badges to be worn during every procedure that utilizes isoflurane and/or nitrous oxide, the trace gas testing is not necessary. However, trace gas testing can be performed by the VAPHS Industrial Hygienist using a Miran SaphIRe if results from the badges come back with elevated results. In addition, if continual problems arise with the equipment, reinstitution of quarterly trace gas testing by a third party will occur.

3. Environmental (room air) Monitoring. The VAPHS has an outside consulting firm perform air flow testing in the ARF. The VA requires that there be a minimum of 10 to 15 air changes per hour for the rooms. If any changes to the rooms must be made, including changing the air pressure (negative or positive), VAPHS Facilities Management Services assist in getting the proper airflow rate and proper amount of air changes.

6.2. Employee Information and Training

Each employee, prior to being permitted to work in a WAG area, will receive instructions and training from the Industrial Hygienist on the following:

- The details of the Hazard Communication Policy developed by the VAPHS and how employees can obtain and use the appropriate hazard information.
- The nature of the hazards and toxicity of WAG, including recognition of the signs and symptoms of over exposure, and the importance of reporting these immediately to Occupational Health personnel.
VA Pittsburgh Healthcare System Research and Development

- The specific nature of the procedure involving WAG that could result in exposure.
- The VAPHS Animal Exposure Preventive Medicine Program (AEPMP) and the importance of medical surveillance.
- Sampling methods and observations that may be used to detect the presence or release of WAG in the work area.
- The measures employees can take to protect themselves from hazards associated with WAG exposure, including specific procedures such as engineering and work practices to reduce exposure levels.
- The location and availability of the written WAG policy.

Once an employee has received the training outlined above, the Industrial Hygienist must provide written verification (in the form of a sign-in sheet) to R&D, which will maintain the information per record keeping requirements.

In addition, the VAPHS ARF has developed Standard Operating Procedures (SOP) which govern the use of anesthetic gases within the ARF. These procedures have been excluded from this policy but may be reviewed in the ARF SOP Manual. The procedures outline the methods to be employed to ensure proper use of the anesthesia and scavenging systems within each operating/procedure room. Each employee must be familiar with and be properly trained in the use of these systems prior to being permitted to work in a surgery area.

6.3. Medical Surveillance

As part of the AEPMP at VAPHS, the Animal Research Program employees who may potentially be exposed to WAGs will be offered participation in this surveillance program. The details of this program are described in the VAPHS R&D Policy #A-002.

6.4. Labels and Posting

The section on labels (Section IIIB) of the VAPHS Hazard Communication Program will be implemented to inform employees of the possible health hazards associated with use of each anesthesia unit.

The ARF staff will be responsible for labeling the unit in accordance with the requirements of the Hazardous Material Identification System (HMIS), an integral part of the VAPHS Hazard Communication Program.

A Safety Data Sheet (SDS) for each anesthetic gas must be made available to Animal Research Program employees. Binders containing SDSs are maintained in the ARF. The location of SDS in other facilities (VA leased space) must be visibly displayed in rooms in which anesthetic gases may be utilized. Each SDS communicates detailed hazard/safety information for each anesthetic gas.

The vaporizers and flow meters are sent to be calibrated and certified annually. Vaporizer unit certification labels will be affixed at the time of inspection/verification.
6.5. Record Keeping

A. Trace Gas Test and Environmental Monitoring: For quarterly trace gas testing, the consulting firm provided records of all environmental exposure measurements for each of the ARF’s anesthesia units and copies of the survey results are retained by R&D in accordance with the VA Records Control Schedule. For Environmental Monitoring of the airflow, results are provided to R&D from VAPHS Facilities Maintenance Services.

B. Personal Monitoring: The laboratory that analyzes the monitoring badges will provide employee results to R&D. R&D will be responsible for notifying the employee, as well as the study Principal Investigator and Industrial Hygienist of acceptable results within 1 business day of receipt. A copy of the results will be maintained by R&D. In addition, in the case of a WAG overexposure, R&D will be responsible for notifying the affected employee, as well as the study Principal Investigator, Industrial Hygienist, ACOS for Research, Safety Manager, Chair of IBC and IACUC Committees, Occupational Health, and Research Compliance Officer within 1 business day of receipt of the results. The affected employee will be required to undergo counseling with Occupational Health (see VAPHS R&D Policy #A-002 for additional information). Prior to continuing work with WAG, the Industrial Hygienist must also observe the employee working with the anesthetic gas equipment in order to ensure that the individual is properly using the equipment. Information in regards to a WAG overexposure is presented at the next fully convened IBC and IACUC Committee meeting for review.

C. Medical Surveillance: The VAPHS will provide for retention of the results of the medical surveillance program and tests conducted by Occupational Health. All medical examination results will be maintained in the employee’s medical file.

D. Employees: R&D will maintain a list of all individuals working with and thus potentially exposed to WAGs. This record will contain notations as to dates of training and any subsequent incidents of note.

Although NIOSH recommends keeping records of air sampling, leak tests and medical surveillance for at least 20 years, Federal Regulations require them to be maintained for the duration of employment, plus 30 years, or for as long as the Official Personnel Folder is maintained, whichever is longer. The same Federal Regulation requires relevant exposure records to be kept in the medical records of exposed employees. Therefore, copies of the reports of quarterly trace gas tests on equipment, environmental monitoring and personnel monitoring/air sampling results are maintained in the R&D.

7.0 REFERENCES

-The National Institute for Occupational Safety and Health (NIOSH) - Criteria for a Recommended Standard: Occupational Exposure to Waste Anesthetic Gases and Vapors. The Department of Health, Education, and Welfare (DHEW) [NIOSH] Publication No. 77-140


-VAPHS Medical Center Memorandum EC-001 Hazard Communication Program

-VAPHS R&D Policy #A-002
FOLLOW-UP RESPONSIBILITY
This policy will be reviewed annually and revised as needed.

//signed copy on file //

Gretchen L. Haas, PhD
Research and Development Committee Chair

//signed copy on file //

Steven H. Graham, MD, PhD
Associate Chief of Staff for Research and Development