


**Memorandum of Understanding (MOU) for the
VA Puget Sound Health Care System between
Department of Veterans Affairs, Puget Sound Healthcare System (VAPSHCS) and
American Federation of Government Employees (AFGE), AFL-CIO
National VA Council 53, AFGE Locals 3197 & 498,**

The following constitutes an agreement between The VAPSHCS within VISN 20, and the American Federation of Government Employees (AFGE), AFL-CIO, National VA Council #53 (NVAC), AFGE Local 3197 & AFGE Local 498, the parties have reviewed and agreed upon the appropriate arrangements and procedures regarding, Hazardous Drug Medical Surveillance Program.

- The *parties* met on April 24, 2023 and agreed to the Hazardous in the VAPSHCS. The agreed upon document will be attached to this MOU.

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Hazardous Drug Employee Information Sheet

Hazardous drugs include many common medications found in most healthcare settings

- The hazardous drug list can be found in SOP T-002 Handling of Hazardous Medications

A drug is considered hazardous if it demonstrates one or more of these characteristics:

Characteristic	Description
Carcinogenicity	Causes cancer
Teratogenicity	Causes birth defects or developmental toxicity
Reproductive toxicity	Impairs male and/or female fertility, harmful to fetuses
Organ toxicity at low doses	Damages organs
Genotoxicity	Causes DNA or chromosomal damage

Exposures can happen if you prepare or administer hazardous drugs, or dispose of hazardous drug waste, handle bodily fluids containing hazardous drugs, or clean up spills without proper protection or controls.

Exposure to hazardous drugs can occur through:

- Absorption - Skin contact
- Injection - Needlestick
- Inhalation - Breathing in drug vapors
- Ingestion - Usually accidental through environmental contamination on surfaces

Hazardous drug exposures can cause serious health problems:

Short-term Effects

- Headaches
- Nausea
- Skin rashes
- Hair loss
- Allergic type reactions
- Hearing loss

Long-term Effects

- Cancer
- Heart or Kidney damage
- Reproductive problems
 - Infertility
 - Miscarriage
 - Birth defects

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How can I protect myself from exposure to hazardous drugs?

To protect yourself, personal protective equipment (PPE) should be worn when:

- Preparing
- Handling
- Administering
- Disposing
- Handling bodily fluids containing hazardous drugs
- Cleaning spills (drug & body fluid spills)

If you have an exposure, contact Employee Occupational Health, and file an OWCP claim

- [ECOMP - U.S. Department of Labor \(dol.gov\)](https://www.dol.gov)

Use the following control methods and work practices:

- Prepare these agents in a centralized area restricted to authorized personnel only.
- Prepare these agents in a biological safety cabinet.
- Use syringes and IV sets with luer-lock type fittings for preparing and administering these agents. Place these syringes and needles in chemotherapy waste containers designed to protect workers from injuries.
- Use closed system drug transfer devices and needleless systems.
- Avoid skin contact. Use a disposable gown made of lint-free, low permeability fabric. The gown should have a closed front, long sleeves, and elastic and knit closed cuffs.
- Use good quality, powder-free, disposable gloves that are tested for use with chemotherapy agents and that cover the gown cuff.
- Use two pairs of chemotherapy-tested gloves.
- Change gloves periodically, every 30 minutes or immediately when contaminated or torn.
- Wear a mask with plastic face shield or splash goggles to avoid contact of eyes, nose, or mouth with these agents whenever splashes are possible.
- Wear an approved respirator when mixing/crushing hazardous drugs or cleaning up spills.
- Remove protective clothing carefully to avoid spreading contamination.
- Attend training classes about the use of and exposure to hazardous drugs.

Safety Tips

Protect yourself with the following safety tips:

- Do not eat or drink in areas where hazardous drugs are prepared or administered.
- Become familiar with and be able to recognize sources of exposure to hazardous drugs.
- Wash hands with soap and water before using and after removing personal protective clothing.
- Handle wastes related to hazardous drugs separately from other hospital trash. Treat them as hazardous waste.
- Clean up spills immediately using appropriate precautions and the facility spill procedure.
- Learn what written policies the facility has for the safe handling of hazardous drugs.



To learn more about the hazardous drugs used at this facility and the hazardous drug safe handling procedures, read [SOP T-002 Handling of Hazardous Medications](#) and go to the [Nursing Hazardous Drug SharePoint page](#).



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Background and Directives

The National Institute for Occupational Safety and Health (NIOSH)

- Issued a safety alert about the dangers of hazardous drugs (HD) in 2004
- Publishes a hazardous drug list and best practices for hazardous drug safety
- Most recent list published in 2016 greatly expanded the list of drugs that are hazardous

The United States Pharmacopeial Convention (USP)

- Sets standards to ensure quality and safety in drug manufacturing and compounding

USP General Chapter <800>

- Describes the standards for handling hazardous drugs by all healthcare workers
- Enforceable by State Pharmacy Boards and the Joint Commission

VHA Directives 7705 & 1108.12

- Requires hazardous drug education & training

VHA Directives 7702 & 1108.12

- Requires medical surveillance program

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Hazardous Drug Medical Surveillance Program

Purpose

- Detect markers of exposure or actual harmful effects of hazards as early as possible
- Verify the adequacy of control strategies
- Document the health of employees exposed to workplace hazards
- Drive workplace modifications
- Identify trends
- Fulfill regulatory requirements

Recommended annually by NIOSH, USP-800, OSHA, and VHA

Voluntary program through Employee Occupational Health (EOH)

- Declination letter if you choose not to participate

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HD Medical Surveillance Program

Baseline assessment

- Initial questionnaire
- Baseline labs
- EOH evaluation in clinic as needed

Periodic assessments

- Annual questionnaire
- EOH evaluation in clinic for any health changes from baseline as needed
- Lab testing when appropriate/as needed

Post-exposure evaluation

- Evaluation in EOH Clinic
- Lab testing when appropriate/as needed

Exit/separation evaluations

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Role Delineation

EOH

6.6.2.e. Standards, Regulations and Related Information

USP 800 and NIOSH recommend that employers establish a Medical Surveillance Program as part of a comprehensive program to minimize worker exposure to hazardous drugs. OSHA subsumes hazardous drug medical surveillance under several individual standards but does provide guidance (Controlling Occupational Exposure to Hazardous Drugs). The program should be sensitive to both individual outcomes and population changes. The program should focus on the known toxicological target systems of hazardous drugs, e.g., bone marrow, liver, kidney and reproductive system. The program frequency should include baseline, annual, exposure situational, exit assessments.

Safety

- **Exposure surveillance.** In general, although OSHA recommends medical testing as part of a surveillance program, the value of such programs has never been established. Far more important than medical testing is the assessment of exposure. Exposure surveillance relies primarily on process evaluation, documenting adequate training, work practices and engineering controls through industrial hygiene assessments (qualitative exposure assessment). Actual measurement of surface samples of pharmaceutical agents is discouraged, as there are no criteria levels with which to compare and results may be misleading.

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EOH Guidebook

EOH Guidebook: [*EOH2023.pdf \(va.gov\)](#)

Walter Tol

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