GUIDELINES FOR PROTECTING THE SAFETY AND HEALTH OF HEALTH CARE WORKERS

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Centers for Disease Control
National Institute for Occupational Safety and Health
Division of Standards Development and Technology Transfer

September 1988

DISCLAIMER

Mention of the name of any company or product does not constitute endorsement by the National Institute for Occupational Safety and Health.

DHHS (NIOSH) Publication No. 88-119

PREFACE

The purpose of the Occupational Safety and Health Act of 1970 (Public Law 91-596) is to ensure safe and healthful working conditions for every working man and woman in the Nation and to preserve our human resources by providing medical and other criteria that will ensure, insofar as practicable, that no workers will suffer diminished health, functional capacity, or life expectancy as a result of their work experience. The Act authorizes the National Institute for Occupational Safety and Health (NIOSH) to develop and establish recommended occupational safety and health standards, and to conduct the necessary research and experimental programs to develop criteria for new and improved occupational safety and health standards. Although this document does not recommend a new standard, it does present guidelines for reducing the incidence of injury and disease among health care workers. Every effort was made to address all major health and safety hazards that might be encountered in hospitals or other health care centers. The document is not intended to affect patients directly, but implementing the guidelines will generally benefit patient care.

The present document is a major revision of an earlier draft and incorporates the most recent NIOSH recommended standards, the Occupational Safety and Health Administration regulations, and Centers for Disease Control guidelines. Also included is specific information from the Joint Commission on Accreditation of Healthcare Organizations (formerly the Joint Commission on Accreditation of Hospitals), the National Fire Protection Association, the U.S. Environmental Protection Agency, and other agencies. State and local regulations are not addressed, however, and should be consulted where applicable.

ABSTRACT

These guidelines provide information needed to protect the health and safety of health care workers in hospitals and other health care facilities. The document includes an overview of hospital hazards; methods for developing hospital safety and health programs; discussions of safety hazards, infectious diseases, and noninfectious health hazards; methods for disposing of hazardous wastes; and a list of occupational safety and health agencies and resource organizations. Because no single set of health and safety regulations applies to all aspects of hospital work or health care delivery, the guidelines presented here were compiled from many sources, including the National Institute for Occupational Safety and Health, the Centers for Disease Control, the Occupational Safety and Health Administration, the U.S. Environmental Protection Agency, the Joint Commission on Accreditation of Healthcare Organizations, and others. Adherence to these guidelines should reduce the risk of injury and disease among health care workers.

CONTENTS

Abstract	ii	v
Abbreviations Acknowledgments	xi	ii vii
1. Overview of h		-1
		-1
1.1 Occupati	ional Injury and Illness Among Hospital Workers 1-	-
1.1.1 1		-2
1.1.2	Annothic Conditions	-3
1.1.3 /	• · · · · · · · · · · · · · · · · · · ·	-3
1.2 Growth (Ampensable injury and bisease	-3
1.2 Growth (of Occupational Safety and Health Programs for	
1 2 1 E		-4
1.2.1 [-4
1.2.2 1	Development of Worker Health Programs 1-	-
1.2.3	The NIOSH Hospital Survey	-7
1.3 Health S		-8
1.4 Reference	ces	-10
1.5 Addition	nal Resources	-11
2. Developing Ho	ospital Safety and Health Programs 2-	-1
2.1 Addressi	ing Diverse Needs	-1
2.1.1 E	Enlisting Administrative Support 2-	-1
2.1.2	ldentifying Hazards 2-	-3
2	2.1.2.1 Walk-Through Inspections 2-	-3
2	2.1.2.2 Published Sources of Information 2-	-4
2	2.1.2.3 Material Safety Data Sheets 2-	-4
2	2.1.2.4 NIOSH Policy Documents 2-	-6
2	2.1.2.5 Occupational Health Organizations 2-	_
2.2 Evaluati	ing Hazards	_
2.2.1 F	Periodic Inspection and Monitoring of Safety and	_
	Industrial Hygiene 2-	-7
2.2.2	Informal Interviews of Workers 2-	
2.2.3 N	Medical Evaluations2-	
2.2.4 E	invironmental Evaluations	-
2	2.2.4.1 Area Samples	-
2	2.2.4.2 Personal Samples 2-	-
2	2.2.4.3 Wipe Samples	-
2.2.5	Occupational Safety and Health Standards 2-	_
		-3 -1∩

	2.3	Contro	lling Hazards 2-11
		2.3.1	Warning Systems
		2.3.2	Substitution
		2.3.3	Engineering Controls
		2.3.4	Work Practices
		2.3.5	Personal Protective Equipment
			2.3.5.1 Eye and Face Protection
			2.3.5.2 Head Protection
			2.3.5.3 Foot Protection
			2.3.5.4 Gloves, Aprons, and Leggings
			2.3.5.6 Respiratory Protection 2-15
		2.3.6	
		2.3.7	Medical Monitoring Programs 2-17
			2.3.7.1 Designing the Program 2-17
			2.3.7.1 Designing the Program
			2.3.7.3 Recordkeeping
			2.3.7.4 Preplacement Evaluation 2-19
	2.4	0ccupa	tional Safety and Health Agencies and Organizations . 2-20
		2.4.1	Occupational Safety and Health Administration 2-20
		2.4.2	
			Health
		2.4.3	-
		2.4.4	
		2.4.5	
		2.4.6	
		2.4.7	
			Organizations
		2.4.8	
		2.4.9	
	2.5		nces
	2.6	Additi	onal Resources
3.	Reco	mmended	Guidelines for Controlling Safety Hazards
	in	Hospit	als
	3.1	Types	als
		3.1.1	
			3.1.1.1 Hernias
			3.1.1.2 Back Injuries
		3.1.2	Fires and Natural Disasters
		J.1.2	3.1.2.1 Fires
			3.1.2.2 Natural Disasters
		2 1 2	
		3.1.3	
		3.1.4	the state of the s
			3.1.4.1 Storage Cabinets
			3.1.4.2 Inside Storage Areas
			3.1.4.3 Outside Storage Areas
			3.1.4.4 Liquid Propane Gas Storage Areas 3-10

	3.1.5	Electrical Equipment	3-11
		3.1.5.1 Food Preparation Areas	3-11
		3.1.5.2 Unsafe Equipment and Appliances	3-12
		3.1.5.3 National Electrical Code	3-12
	3.1.6	Assault	3-15
3.2	Specifi	ic Safety Hazards by Hospital Department	3-17
	3.2.1	Central Supply	3-17
	• • • • • • • • • • • • • • • • • • • •	3.2.1.1 Sterilization Equipment	3-17
		3.2.1.2 Sharp Objects	3-18
		3.2.1.3 Material Handling	3-18
		3.2.1.4 Soaps, Detergents, and Cleaning Solutions.	3-18
	3.2.2		
	3.2.2	Food Service	3-18
			3-19
		3.2.2.2 Electrical Equipment	3-19
		3.2.2.3 Stove Hoods	3-19
		3.2.2.4 Fire Extinguisher Systems	3-19
		3.2.2.5 General Kitchen Equipment	3-20
		3.2.2.6 Knives	3-20
		3.2.2.7 Hot Utensils and Equipment	3-21
		3.2.2.8 Chemical and Physical Agents	3-21
	3.2.3	Housekeeping	3-23
		3.2.3.1 Health and Safety Guidelines for	
		Housekeeping Workers	3-23
		3.2.3.2 Chemical and Physical Agents	3-24
		3.2.3.3 Bacteria and Viruses	3-24
	3.2.4	Laundry	3-25
	3.2.5	Maintenance Engineering	3-26
		3.2.5.1 General Rules for Maintenance Areas	3-26
		3.2.5.2 Chemical and Physical Agents	3-28
	3.2.6	Office Areas	3-31
	3.2.7	Print Shops	3-32
	3.2.8	Patient Care Areas (Nursing Service)	3-32
	3.2.0	3.2.8.1 Physical Exertion	
			3-32
		3.2.8.2 Needles and Sharp Instruments	3-33
		3.2.8.3 Obstacles and Broken Objects	3-33
		3.2.8.4 Electrical Hazards	3-34
		3.2.8.5 Other Hazards	3-34
	3.2.9	Pharmacy	3-35
	3.2.10	Laboratories	3-36
		3.2.10.1 Types of Laboratory Hazards	3-36
		3.2.10.2 Standards and Recommendations	3-41
		3.2.10.3 Methods for Controlling Exposure	3-41
	3.2.11	Surgical Services	3-44
		3.2.11.1 Anesthetic Gases	3-44
		3.2.11.2 Flammable Anesthetics	3-45
		3.2.11.3 Compressed Gases	3-45
		3.2.11.4 Scavenging	3-46
		3.2.11.5 General Guidelines	3-46
	3 2 12	Temporary Personnel (Floaters)	3-40

	3.3 3.4				
4.				es for Controlling Infectious Disease	
	Ha	zards i	n Hospita	ls	4–1
5.	Dooo		Cuidalia	on for Controlling Nominfontious Houlth	
Э.				es for Controlling Noninfectious Health ls	5-1
	na E 1	Chamin	n nosprta	15	5-1 5-1
	ə. I				
		3.1. 1	Introduc	tion	J-1 5 1
			5.1.1.1	Extent of Exposure	5-1 E-0
			5.1.1.2	Route of Entry into the Body	5-2
			5.1.1.3	Physical and Chemical Properties	5-2
				Warning Properties	5-2
		- 40	5.1.1.5	-, - , - ,	
		5.1.2	Aspestos		5-3
				Hazard Location	
				Potential Health Effects	
				Standards and Recommendations	
			5.1.2.4	Environmental Monitoring	5-5
			5.1.2.5	Exposure Control Methods	5-6
		5.1.3	Chemical	Disinfectants	5–6
			5.1.3.1	Isopropyl Alcohol	5-7
			5.1.3.2	Sodium Hypochlorite (Chlorine)	5–8
				lodine	
				Phenolics	
				Quaternary Ammonium Compounds	
			5.1.3.6	Glutaraldehyde	
			5.1.3.7	Formaldehyde	5-13
		5.1.4	Antineop	lastic Drugs	5-13
			5.1.4.1	Effects of Antineoplastic Drugs	5-14
			5.1.4.2	Methods for Estimating Exposure to	
				Antineoplastic Drugs	5-16
			5.1.4.3	Methods for Preventing Exposure to	
				Antineoplastic Drugs	5-17
			5.1.4.4	Medical Monitoring	5-17
		5.1.5	Ethylene	Oxide	5-17
		• • • • • • • • • • • • • • • • • • • •		Hazard Location	
			5.1.5.2	Potential Health Effects	
			5.1.5.3	Standards and Recommendations	
			5.1.5.4	Environmental Monitoring	5-19
			5.1.5.5	Exposure Control Methods	
			5.1.5.6	Medical Monitoring	5-22
		5.1.6	Formalde		5-23
		3.1.0	5.1.6.1	Hazard Location	5-23 5-23
			5.1.6.2	Potential Health Effects	
			5.1.6.2	Standards and Recommendations	
			5.1.6.4		-
				Environmental Monitoring	
			5.1.6.5	Exposure Control Methods	5-20 5-26

	5.1.7	Freon® .							5-26
		5.1.7.1	Hazard Location	_					5-26
		5.1.7.2	Potential Health Effects	_	_			-	5-26
		5.1.7.3	Standards and Recommendations.	-	_			•	5-26
		5.1.7.4	Environmental Monitoring	•	•	•	: :	•	5-27
		5.1.7.5	Exposure Control Methods	•	•	•	• •	•	5-27
		5.1.7.6	Medical Monitoring	٠	•	•	• •	•	5-27
	5.1.8	Mercury.							5-27
		5.1.8.1	Hazard Location						5-28
		5.1.8.2	Potential Health Effects	•	•	•	• •	•	5-28
		5.1.8.3	Standards and Recommendations.	•	•	•		•	5-28
		5.1.8.4	Environmental Monitoring	•	•	•	• •	•	5-28
		5.1.8.5	Exposure Control Methods	•	•	•	• •	•	5-20 5-29
		5.1.8.6	Medical Manitorina	•	•	•	• •	•	
	5.1.9		Medical Monitoring	٠	•	•		•	5-29
	5.1.9	5.1.9.1	thacrylate	•	٠	•	• •	•	5-30
		5.1.9.1	Hazard Location	•	٠	•	• •	•	5-30
			Potential Health Effects						5-30
		5.1.9.3	Standards and Recommendations.						5-30
		5.1.9.4	Environmental Monitoring						5–30
		5.1.9.5	Exposure Control Methods						5-31
	- 4 40	5.1.9.6	Medical Monitoring	•		•			5–31
	5.1.10		Acid (PAA)						5–31
		5.1.10.1	Hazard Location		•				5-31
		5.1.10.2	Potential Health Effects						5-31
		5.1.10.3	Standards and Recommendations.						5-32
		5.1.10.4	Exposure Control Methods						5-32
	5.1.11								5-32
		5.1.11.1	Hazard Location						5-32
		5.1.11.2							5-32
		5.1.11.3	Standards and Recommendations.						5-32
		5.1.11.4	Environmental Monitoring						5-33
		5.1.11.5	Exposure Control Methods						5-34
		5.1.11.6	Medical Monitoring						5-34
	5.1.12	Waste Ane	sthetic Gases						5-34
		5.1.12.1	Hazard Location			_			5-35
		5.1.12.2	Potential Health Effects		_				5-35
		5.1.12.3	Standards and Recommendations.		-			Ī	5-36
		5.1.12.4	Environmental Monitoring	•	•	•	• •	•	5-37
		5.1.12.5	Exposure Control Methods	•	•	•	•	•	5-37
		5.1.12.6	Medical Monitoring						5-38
5.2	Physical	Hazards	· · · · · · · · · · · · · · · · · · ·						5-39
	5.2.1	Heat							5-39
		5.2.1.1	Hazard Location	•	•	•	• •	•	5-39
		5.2.1.2	Potential Health Effects	•	•	•		•	5-39
		5.2.1.3	Standards and Recommendations.	•	•	•	• •	•	5-40
		5.2.1.4	Environmental Monitoring						5-44
		5.2.1.5	Exposure Control Methods	•	•	•	• •	•	5-44
	5.2.2	Noise.							
	y.£.£	5.2.2.1	Hazard Location	•	•	•		•	5-45
		5.2.2.2	Potential Health Effects	•	•	•	• •	•	5-45
		J. Z. Z. Z	FUTCHILIAI HEALTH EFFECTS	•	٠	•		•	5-45

		5.2.2.3 Standards and Recommendations	5-46
			5-46
		5.2.2.5 Exposure Control Methods	5-47
			5-49
	5.2.3	Ionizing Radiation	5-49
	0.2.0		5-49
		5.2.3.2 Sources of Radiation Exposure	5-50
			5-51
			5-51
			5-52
			5-53
			5-55
		OICIOIL EMPONEIO CONTINUE MICHIGARE I FINE FOR THE PROPERTY OF	5-64
			5-64
	E 0 4		5-64
	5.2.4	trontening tractation to the second	5-65
			5-66
		CILITIE VICIOIO CERTALIONI CONTRACTOR CONTRA	5-69
			5–69
		O'E' ''O O'E' GOOGLE ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	5-71
		O.L. 110 11000 Diopiny 10 minutes	5-72
5.3	Mutage	nio dila ratataganat i i i i i i i i i i i i i i i i i i i	5-73
	5.3.1		5-73
	5.3.2		5-74
5.4		Ologiogi ilazardo i i i i i i i i i i i i i i i i i i i	5-74
	5.4.1	III COUNTY I I I I I I I I I I I I I I I I I I I	5-74
	5.4.2	TRAZETO ESSECTION I I I I I I I I I I I I I I I I I I	5-74
	5.4.3	10tolitial modition envolution in the second second	5-75
		Oldioli Elitoria di antimidani ilgania	5-75
		0.4.0.2 Entoots of thyonous agents to the second	5-77
		0.4.0.0 Oktil Odiloot. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5-77
		0.4.0.4 E110010 01 E1010g.0 iig	5-77
	5.4.4	Offiliation find the contract the contract to	5-78
	5.4.5	Expodulo control methodol	5–78
5.5	Stress		5-78
	5.5.1		5-78
	5.5.2	10001 (C) LOCALIONO NOCOCIATOS MILLON CONTROL	5-80
		C.C.L.	5-80
		O'O'E'E HOUSE THE CONTROL OF THE CON	5-80
			5-80
	5.5.3		5-81
	5.5.4		5-81
			5-82
			5-82
		5.5.4.3 Concerns about Money	5-82
		5.5.4.4 Lack of Autonomy	5-83
		5.5.4.5 Work Schedule	5-83
			5-83
			5-83
	5.5.5	Methods for Coping with Stress	5-83
	~ · · · ·	and the second of the company of the contract	

	5.6 5.7		5–8 6 5–101
6.	Haza	rdous Waste Disposal	S-1
			3–1
			5–1
			3–2
		6.1.3 Treatment and Disposal Methods 6)_3
			5-3
			6-6
			6–6
			6-6
			6− 6
			S-7
		6.1.4 Separation of Infectious and Noninfectious Wastes . 6	3-7
			8-6
			8-8
			5-10
			5-10
			5-10 5-11
		+ · · · · · · · · · · · · · · · · · · ·)- 1 1 3-11
	~ ~		
	6.2		5-11
			3-11
			5-11
		6.2.3 Radioactive Wastes 6	5-11
		6.2.4 Flammable Wastes 6	5-12
	6.3	References	5-13
	6.4	Additional Resources	3-14
	•		
7.		ectory of Occupational Safety and Health Information or Hospitals	7 _1
	_		
Append			
1.		· · · · · · · · · · · · · · · · · · ·	\1-1
2.	NIOS	H Guidelines for Evaluation of Hospital Occupational	
	He		12-1
3.	Осси	pational Hazards by Location in the Hospital	\3-1
4.	Chem	icals Encountered in Selected Hospital Occupations A	4-1
5.		it Advisory Notice: Protection Against Occupational	, ,
J.	JUIII	resours to Hangtitie D. Vieus (UDV) and Human	
	EX	posure to Hepatitis B Virus (HBV) and Human	F 4
_	I M		15-1
6.	Morb		\6-1
7.		Work-Practice Guidelines for Personnel Dealing with	_
			17–1
8.		ints of Guidelines for the Prevention and Control of	
	No	socomial Infections	\8-1

ABBREVIATIONS

AAMI Association for the Advancement of Medical Instrumentation

ACGIH American Conference of Governmental Industrial Hygienists

ACIP Immunization Practices Advisory Committee of the U.S. Public

Health Service

ADA American Dental Association

AHA American Hospital Association

AIDS acquired immunodeficiency syndrome

AIHA American Industrial Hygiene Association

AMA American Medical Association

ANSI American National Standards Institute

BCG bacille Calmette-Guerin

BLS Bureau of Labor Statistics

CAP College of American Pathologists

CAT computerized axial tomography

cc cubic centimeter

CDC Centers for Disease Control

CFR Code of Federal Regulations

CMV cytomegalovirus

CPC chemical protective clothing

CPR cardiopulmonary resuscitation

dB decibe!

DNA deoxyribonucleic acid

EDTA ethylene diaminetetraacetic acid

EEG electroencephalogram

EPA U.S. Environmental Protection Agency

f fiber

FA fluorescent antibody

FDA Food and Drug Administration

GFCI ground fault circuit interrupter

HAV Hepatitis A virus

HBIG Hepatitis B immune globulin

HBV Hepatitis B virus

HBeAg Hepatitis B "e" antigen

HBsAg Hepatitis B surface antigen

HHE health hazard evaluation

HI hemagglutination-inhibition

hr hour

HRA Health Resources Administration

HRSA Health Resources and Services Administration

HSV herpes simplex virus

HTLV-III/LAV human T-lymphotropic virus type III

lymphadenopathy-associated virus

Hz hertz

IAHS International Association of Healthcare Security

IARC International Agency for Research on Cancer

ICU intensive care unit

IDLH immediately dangerous to life or health

IG immune globulin

IHSSF International Healthcare Safety and Security Foundation

in inch

IR infrared

ISG immune serum globulin

JCAH Joint Commission on Accreditation of Hospitals

kHz kilohertz

LCM lymphocytic choriomeningitis

LPG liquid propane gas

LPN licensed practical nurse

LVN licensed vocational nurse

m meter

MeV million electron volts

mg/m³ milligram per cubic meter

min minute

mm millimeter

MMWR Morbidity and Mortality Weekly Report

M-M-R measles, mumps, and rubella vaccine

mrem millirem

MSDS Material Safety Data Sheet

MSHA Mine Safety and Health Administration

mW milliwatt

NANB non-A, non-B viral hepatitis

NCRP National Council on Radiation Protection and Measurements

NEC National Electrical Code

NFPA National Fire Protection Association

NICU neonatal intensive care unit

NIH National Institutes of Health

NIOSH National Institute for Occupational Safety and Health

nm nanometer

NMR nuclear magnetic resonance

NOHS National Occupational Health Survey

NRC Nuclear Regulatory Commission

NSC National Safety Council

NTP National Toxicology Program

OSHA Occupational Safety and Health Administration

pa posterior and anterior view

μPa micropascal

PAA peracetic acid

PEL permissible exposure limit

PMR proportionate mortality ratio

PPD purified protein derivative

PPD-S purified protein derivative-standard

ppm part per million

psi(a) pound per square inch (absolute)

ptAP para-tertiary amylphenol

ptBP para-tertiary butylphenol

QNFT quantitative fit testing

RAD radiation absorbed dose

RDL respirator decision logic

REL recommended exposure limit

rem roentgen equivalent man

RF radiofrequency

RN registered nurse

RSV respiratory syncytial virus

RTECS Registry of Toxic Effects of Chemical Substances

SCE sister chromatid exchange

SI Systeme International d'Unites

STEL short-term exposure limit

TB tuberculosis

TLD thermoluminescent dosimeter

TLV® threshold limit value

TLV-C threshold limit value - ceiling

TLV-skin threshold limit value - skin adsorption

TLV-STEL threshold limit value - short-term exposure limit

TU tuberculin unit

TWA time-weighted average

UV ultraviolet

V volt

VDT video display terminal

VZV varicella zoster virus

μW microwatt

WBGT wet bulb globe temperature

ACKNOWLEDGMENTS

The material in this report was originally prepared by:

Molly Joel Coye*, M.D., M.P.H., and Stephen B. Mooser[†]
Division of Surveillance, Hazard Evaluations and Field Studies (DSHEFS)
National Institute for Occupational Safety and Health (NIOSH)

Sandra E. Bonzo§

Division of Standards Development and Technology Transfer (DSDTT)

Subsequently, the following DSDTT staff members were primarily responsible for completing this document:

Anne C. Hamilton Writer/Editor

Diane M. Manning
Docket Office Coordinator

Lawrence F. Mazzuckelli Associate Director for Policy Development

Contributions by other NIOSH staff members are also gratefully acknowledged:

Bryan D. Hardin, Ph.D., Chief

Kern Anderson
Public Health Advisor
Vanessa L. Becks
Editorial Assistant
Michael A. Brown
Industrial Hygienist
Carolyn A. Browning
Writer/Editor
Crystal L. Ellison
Industrial Hygienist

Ruth E. Grubbs
Writer/Editor
Denise Hill
Secretary
Howard A. Ludwig
Industrial Hygienist
Dannie C. Middleton, M.D.
Medical Officer
Mary A. Newman, Ph.D.
Industrial Hygienist

*Currently Commissioner of Health, State of New Jersey.

*Currently with the Association of Occupational and Environmental Clinics.

SCurrently with the Agency for Toxic Substances and Disease Registry.

Technical Information Branch, DSDTT Vivian K. Morgan, Chief

Madonna Allen
Library Technician
Lawrence Q. Foster
Librarian
Mattie Frei
Secretary
Leslie Karlin, R.N.
Special Assignment from DSHEFS
Lisa Kingery

Tammy K. Lykins
Clerk-Typist
Lucy Schoolfield
Library Technician
Linda Smith
Library Aide
Suzette Yeager
Secretary
Thomas Ziegler
Library Technician

Office of the Director, DSDTT Richard A. Lemen, Director Richard W. Niemeier, Ph.D., Deputy Director

Sandra L. Clark
Secretary
B. JoAnne Hamons
Secretary

Secretary

Jennifer A. Huxford
Clerk-Typist
Laurence D. Reed
Senior Reviewer, Engineering

Office of the Director, NIOSH Donald Millar, M.D., D.T.P.H., Director

David Bayse, Ph.D.
Chief Science Advisor
Jeanne A. Bucsela
Writer/Editor

Hugh Hansen, Ph.D.
Assistant Science Advisor

Thanks are due to the following reviewers:

Pierre Belanger, National Institute for Occupational Safety and Health Linda H. Brooks, American Hospital Association Marianne Brown, M.P.H., American Cancer Society Kate Christiansen, M.D., Kaiser Hospital, Los Angeles David E. Clapp, Ph.D., National Institute for Occupational Safety and Health Linda Hawes Clever, M.D., Pacific Medical Center, San Francisco Julia Garner, Centers for Disease Control Gail Grynbaum, R.N., M.P.H., San Francisco General Hospital Bobby J. Gunter, Ph.D., National Institute for Occupational Safety and Health Douglas Kenyon, Pacific Medical Center, San Francisco Richard A. Lemen, National Institute for Occupational Safety and Health Frank Mitchell, D.O., Agency for Toxic Substances and Disease Registry Melvin T. Okawa, National Institute for Occupational Safety and Health Sharon Morris, University of Washington, Seattle Linda Morse, M.D., San Francisco General Hospital Lloyd B. Tepper, M.D., Air Products and Chemicals, Inc. Walter W. Williams, M.D., M.P.H., Centers for Disease Control

We also appreciate the contributions of the following individuals and organizations, who provided the final review of this document:

The American Federation of Government Employees
The Association of Hospital Employee Health Professionals
Molly Coye, M.D., M.P.H., Commissioner of Health, State of New Jersey
The Joint Commission on Accreditation of Healthcare Organizations
Donna Richardson, American Nurses Association
Charles Whitcher, M.D., Professor of Anesthesia, Department of Anesthesia,
Stanford University School of Medicine

*				
				· <u></u>
				•

INTRODUCTION

Health care facilities present workers with a myriad of potential health and safety hazards. Compared with the total civilian workforce, hospital workers have a greater percentage of workers' compensation claims for sprains and strains, infectious and parasitic diseases, dermatitis, hepatitis, mental disorders, eye diseases, influenza, and toxic hepatitis.

This document contains guidelines for reducing the incidence of injury and disease among health care workers. Although much of the information here was obtained from studies conducted in hospitals, it can also be applied to health care workers in other settings, including outpatient clinics, nursing homes, acute care centers, physicians' and dentists' offices, blood banks, and private residences. Workers who provide emergency medical services outside health care facilities have not been addressed because of the unique nature of their work, but medical technicians and others who occasionally provide emergency medical treatment (first aid) may benefit from these guidelines.

Hospitals are regulated and guided in their operations by a wide variety of local, State, and Federal agencies and organizations. As a consequence, no single set of health and safety regulations applies to all aspects of hospital work or health care delivery. The health and safety guidelines in this document were compiled from many sources, including the National Institute for Occupational Safety and Health, the Centers for Disease Control (CDC), the Occupational Safety and Health Administration, the Joint Commission on Accreditation of Healthcare Organizations, the National Fire Protection Association, and the U.S. Environmental Protection Agency.

The document has seven sections. Section 1 is an overview of hospital hazards, and Section 2 contains methods for developing hospital safety and health programs. These sections are organized so that the user can follow a logical progression of recognition, evaluation, and control of hazards. Section 3 focuses on safety hazards such as fires, flammable and explosive materials, electricity, and assaults. Section 4 refers readers to CDC guidelines for protecting workers from selected infectious diseases, including acquired immunodeficiency syndrome (AIDS). The applicable CDC guidelines are reprinted in the Appendices. Section 5 contains discussions of noninfectious health hazards, including chemical agents and dusts, physical agents, mutagenic and teratogenic agents, skin irritants, and stress. Section 6 outlines procedures for hazardous waste disposal, and Section 7 contains a directory of occupational safety and health agencies and resource organizations.

		 _