

JAN

Job Accommodation Network

Practical Solutions • Workplace Success

Accommodation and Compliance Series

Employees with Latex Allergy

Job Accommodation Network
PO Box 6080
Morgantown, WV 26506-6080
(800)526-7234 (V)
(877)781-9403 (TTY)
jan@askjan.org
askjan.org



A service of the U.S. Department of Labor's Office of Disability Employment Policy

Preface

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JAN'S ACCOMMODATION AND COMPLIANCE SERIES

Introduction

JAN's Accommodation and Compliance Series is designed to help employers determine effective accommodations and comply with Title I of the Americans with Disabilities Act (ADA). Each publication in the series addresses a specific medical condition and provides information about the condition, ADA information, accommodation ideas, and resources for additional information.

The Accommodation and Compliance Series is a starting point in the accommodation process and may not address every situation. Accommodations should be made on a case by case basis, considering each employee's individual limitations and accommodation needs. Employers are encouraged to contact JAN to discuss specific situations in more detail.

For information on assistive technology and other accommodation ideas, visit JAN's Searchable Online Accommodation Resource (SOAR) at <http://AskJAN.org/soar>.

Information about Latex Allergy

What is latex allergy?

Latex allergy is a reaction to proteins present in latex derived from natural rubber latex (NRL). NRL is manufactured from a variety of plants, but mainly the rubber tree, *Hevea brasiliensis* (OSHA, 2008).

Latex allergy can result from repeated exposures to proteins in NRL through skin contact or inhalation. Reactions usually begin within minutes of exposure to latex, but they can occur hours later and can produce various symptoms. These include skin rash and inflammation, respiratory irritation, asthma, and in rare cases shock. In some instances, sensitized employees have experienced reactions so severe that they impeded the worker's ability to continue working in their current job (NIOSH, 2008).

How prevalent is latex allergy?

Reports of work-related allergic reactions to latex have increased in recent years, especially among employees in the growing health-care industry, where latex gloves are widely used to prevent exposure to infectious agents. At least 7.7 million people are employed in the health-care industry in the U.S. Once sensitized, workers may go on to experience the effects of latex allergy. Studies indicate that 8-12% of health-care workers regularly exposed to latex are sensitized, compared with 1-6% of the general population, although total numbers of exposed workers are not known. In the health-care industry, workers at risk of latex allergy from ongoing latex exposure include physicians, nurses, aides, dentists, dental hygienists, operating room employees, laboratory technicians, and housekeeping personnel (NIOSH, 2008).

Who gets latex allergy?

People at increased risk for developing latex allergy include workers with ongoing latex exposure, persons with a tendency to have multiple allergic conditions, and persons with spina bifida. Latex allergy is also associated with allergies to certain foods such as avocados, potatoes, bananas, tomatoes, chestnuts, kiwi fruit, and papaya. Workers who use gloves less frequently, such as law enforcement personnel, ambulance attendants, fire fighters, food service employees, painters, gardeners, housekeeping personnel outside the health-care industry, and funeral home employees, also may develop latex allergy. Workers in factories where natural rubber latex products are manufactured or used also may be affected (NIOSH, 2008).

Can latex allergy be prevented?

The National Institute on Occupational Safety and Health (NIOSH) suggests taking the following steps to prevent latex allergy (NIOSH, 2008):

- Use non-latex gloves for activities that are not likely to involve contact with infectious materials.
- If latex gloves are chosen for barrier protection when handling infectious materials, use powder-free gloves with reduced protein content.
- Use appropriate work practices to reduce the chance of reactions to latex:
- Do not use oil based hand creams or lotions under gloves.
- Wash hands with mild soap and dry thoroughly after removing gloves.
- Frequently clean areas and equipment that may be contaminated with latex-containing dust.
- Become familiar with procedures for preventing latex allergy.
- Learn to recognize the symptoms of latex allergy: skin rash; hives; flushing; itching; nasal, eye or sinus symptoms; asthma and shock.

Latex Allergy and the Americans with Disabilities Act

Is a latex allergy a disability under the ADA?

The ADA does not contain a list of medical conditions that constitute disabilities. Instead, the ADA has a general definition of disability that each person must meet (EEOC Regulations . . . , 2011). Therefore, some people with latex allergy will have a disability under the ADA and some will not.

A person has a disability if he/she has a physical or mental impairment that substantially limits one or more major life activities, a record of such an impairment, or is regarded as having an impairment (EEOC Regulations . . . , 2011). For more information about how to determine whether a person has a disability under the ADA, visit <http://AskJAN.org/corner/vol05iss04.htm>.

Accommodating Employees with Latex Allergy

(Note: People with latex allergy may develop some of the limitations discussed below, but seldom develop all of them. Also, the degree of limitation will vary among individuals. Be aware that not all people with latex allergy will need accommodations to perform their jobs and many others may only need a few accommodations. The following is only a sample of the possibilities available. Numerous other accommodation solutions may exist.)

Questions to Consider:

1. What limitations is the employee with latex allergy experiencing?
2. How do these limitations affect the employee and the employee's job performance?
3. What specific job tasks are problematic as a result of these limitations?
4. What accommodations are available to reduce or eliminate these problems? Are all possible resources being used to determine possible accommodations?
5. Has the employee with latex allergy been consulted regarding possible accommodations?
6. Once accommodations are in place, would it be useful to meet with the employee with latex allergy to evaluate the effectiveness of the accommodations and to determine whether additional accommodations are needed?
7. Do supervisory personnel and employees need training regarding latex allergy?

Accommodation Ideas:

- Discontinue the use of latex gloves. Purchase alternative glove products such as vinyl or nitrile. The feasibility of using alternatives will likely depend upon the infection control needed to perform job tasks.
- If latex gloves must be used, switch to non-powdered latex with reduced protein content. Provide all employees within the individual's working environment with non-powdered gloves as well. If other employees continue to wear powdered latex gloves, the latex proteins can become airborne and create the potential for an allergic reaction.
- If powdered latex gloves are used, thoroughly clean the environment to remove powder residue from walls, equipment and HVAC vents.
- Implement a latex-safe department, clinic or facility. Eliminate the use of latex gloves and, when possible, switch to non-latex medical supplies. If the entire facility cannot be latex-safe, safeguard specific locations by creating latex-safe zones.
- Place the individual in the least latex-intensive environment possible.

- If the individual cannot be accommodated in the original position because of the need to eliminate exposure to latex, investigate reassignment as an accommodation. When possible, place the individual in a position that continues to take advantage of the employee's clinical or technical skills. For example, if a nurse can no longer perform duties involving direct patient care, consider positions that still require nursing skills. Opportunities may exist in case management, occupational health nursing, health hotlines, poison control, the insurance industry, medical mal-practice or teaching.

Situations and Solutions:

An office worker with latex allergy had to take rubber bands off bundles of papers and was having a reaction to the latex in the bands. The employer switched to non-latex bands.

A registered nurse with latex allergies was having difficulty wearing latex gloves. The employer provided her with non-latex gloves and started using non-powdered latex gloves for other staff to reduce the amount of latex in the environment.

A nurse aide with latex allergy was reassigned to an area of the hospital where few latex products were used, but the aide was still having problems with latex exposure. The employer realized that the latex was being carried through the ventilation system so the employer worked with a heating, ventilation, and air-conditioning (HVAC) specialist to prevent the circulation of latex in the employee's work area.

An ER nurse with latex allergies was reassigned to a nurse-consultant job that did not involve direct patient care or direct contact with latex products.

Products:

There are numerous products that can be used to accommodate people with limitations. JAN's Searchable Online Accommodation Resource at <http://AskJAN.org/soar> is designed to let users explore various accommodation options. Many product vendor lists are accessible through this system; however, JAN provides these lists and many more that are not available on the Web site upon request. Contact JAN directly if you have specific accommodation situations, are looking for products, need vendor information, or are seeking a referral.

Resources

Job Accommodation Network

West Virginia University
PO Box 6080
Morgantown, WV 26506-6080
Toll Free: (800)526-7234
TTY: (877)781-9403
Fax: (304)293-5407
jan@AskJAN.org
<http://AskJAN.org>

The Job Accommodation Network (JAN) is a free consulting service that provides information about job accommodations, the Americans with Disabilities Act (ADA), and the employability of people with disabilities.

Office of Disability Employment Policy

200 Constitution Avenue, NW, Room S-1303
Washington, DC 20210
Toll Free: (866)633-7365
TTY: (877)889-5627
Fax: (202)693-7888
<http://www.dol.gov/odep/>

The Office of Disability Employment Policy (ODEP) is an agency within the U.S. Department of Labor. ODEP provides national leadership to increase employment opportunities for adults and youth with disabilities while striving to eliminate barriers to employment.

American Latex Allergy Association

PO Box 198
Slinger, WI 53086
Toll Free: (888)972-5378
Direct: (262)677-9707
alert@latexallergyresources.org
<http://www.latexallergyresources.org/>

The American Latex Allergy Association is a national non-profit, tax exempt organization that has designed this website to help connect you with educational materials, support groups, publications and product information to assist you with your understanding of natural rubber latex allergy.

American Nurses Association

8515 Georgia Avenue Suite 400
Silver Spring, MD 20910
Toll Free: (800)274-4262

Fax: (301)628-5001
info@ana.org
<http://www.nursingworld.org/>

ANA advances the nursing profession by fostering high standards of nursing practice, promoting the economic and general welfare of nurses in the workplace, projecting a positive and realistic view of nursing, and by lobbying the Congress and regulatory agencies on health care issues affecting nurses and the public.

Envision Inc.

644 West Iris Drive
Nashville, TN 37204
Toll Free: (866)321-5066
Direct: (615)321-5066
Fax: (615)321-5119
education@envisioninc.net
<http://www.envisioninc.net>

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National Institute for Occupational Safety and Health

Education and Information Division
4676 Columbia Parkway
Mailstop C14
Cincinnati, OH 45226
Toll Free: (800)232-4636
Direct: (513)533-8302
Fax: (513)533-8347
cdcinfo@cdc.gov
TTY: (888)232-6348
[http:// www.cdc.gov/niosh/](http://www.cdc.gov/niosh/)

The National Institute for Occupational Safety and Health (NIOSH) was established by the Occupational Safety and Health Act of 1970. NIOSH is part of the Centers for Disease Control and Prevention (CDC) and is the only federal Institute responsible for conducting research and making recommendations for the prevention of work-related illnesses and injuries.

Occupational Safety & Health Administration

200 Constitution Avenue, NW

Washington, DC 20210

Toll Free: (800)321-OSHA

TTY: (877)889-5627

<http://www.osha.gov>

The mission of the Occupational Safety and Health Administration (OSHA) is to save lives, prevent injuries, and protect the health of America's workers. To accomplish this, federal and state governments must work in partnership with the more than 100 million working men and women and their six and a half million employers who are covered by the Occupational Safety and Health Act of 1970.

References

EEOC Regulations To Implement the Equal Employment Provisions of the Americans

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