

Regulation of Surgical Smoke
Passed in House Bill 33 (State Biennial Budget Bill)
Effective October 3, 2024

The act requires ambulatory surgical facilities and hospitals offering surgical services to adopt and implement policies designed to prevent human exposure to surgical smoke during planned surgical procedures likely to generate such smoke. "Surgical smoke" is defined as the airborne byproduct of an energy-generating device used in a surgical procedure, including smoke plume, bioaerosols, gases, laser-generated contaminants, and dust.

The policy, which must be in place by October 3, 2024, must include the use of a surgical smoke evacuation system. The system required by the act is described as equipment designed to capture, filter, and eliminate surgical smoke at the point of origin, before the smoke makes contact with the eyes or respiratory tract of an individual.

Effected Sections of the Ohio Revised Code 3702.3012 and 3727.25.

Ohio Revised Code 3702.3012

- (A) As used in this section, "surgical smoke" and "surgical smoke evacuation system" have the same meanings as in section 3727.25 of the Revised Code.
- (B) Not later than one year after the effective date of this section, each ambulatory surgical facility shall adopt and implement a policy designed to prevent human exposure to surgical smoke during any planned surgical procedure that is likely to generate surgical smoke. The policy shall include the use of a surgical smoke evacuation system.
- (C) The director of health may adopt any rules the director considers necessary to implement this section. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.

Ohio Revised Code 3727.25

- (A) As used in this section:
 - (1) "Surgical smoke" means the airborne byproduct of an energy-generating device used in a surgical procedure, including smoke plume, bioaerosols, gases, laser-generated contaminants, and dust.

- (2) "Surgical smoke evacuation system" means equipment designed to capture, filter, and eliminate surgical smoke at the point of origin, before the smoke makes contact with the eyes or respiratory tract of individuals.

- (B) Not later than one year after the effective date of this section, each hospital that offers surgical services shall adopt and implement a policy designed to prevent human exposure to surgical smoke during any planned surgical procedure that is likely to generate surgical smoke. The policy shall include the use of a surgical smoke evacuation system.

- (C) The director of health may adopt any rules the director considers necessary to implement this section. The rules shall be adopted in accordance with Chapter 119. of the Revised Code.