About the Bill:
SF XXXX (Eaton)/HF XXXX (Murphy, E.) asks the Department of Labor and Industry, along with the Department of Health, to convene a working group to study the issue of Chemotherapy Drug Safety and how to provide the safest working environments possible. The bill is an effort to address the protection of healthcare workers through the safe handling of chemotherapy drugs. While chemotherapy can be necessary to treat cancer in patients, unnecessary exposure can lead to negative acute effects such as nausea and skin rashes. Chronic effects can include consequences like infertility and cancer. Studies have found unsafe levels of chemotherapy on surfaces such as counters and floors in pharmacy, nursing and patient care areas and barriers used for worker safety.¹ The working group will be charged with studying the prevalence of this problem in Minnesota healthcare facilities and reporting recommendations for improving the safe handling of chemotherapy drugs to the legislative committees with jurisdiction over health and labor and industry no later than January 1, 2017.

Talking Points for the Bill:
- There are 5.5 million U.S. health care workers who are potentially exposed to hazardous drugs including pharmacy and nursing personnel, physicians, environmental services workers, janitorial services etc.²
- In 2011, according to the American Cancer Society, there were 25,080 new cases of cancer diagnosed in Minnesota.³
- Nurses who work with cytotoxic drugs have the highest rates of chromosomal aberrations compared to control groups. A 2005 report discovered that nurses who handle chemotherapy have greater risk of offspring with learning disabilities.⁴
- The National Institute for Occupational Safety and Health (NIOSH) updates guidelines for chemotherapy safe handling, however these are not universal or mandatory, leading to inconsistencies in safety.
- Surface contamination has been found at some Minnesota hospitals and clinics, as well as lower than recommended use of Personal Protective Equipment and other gaps in safety.
- Minnesota, with many cancer centers and well-respected hospitals, needs clear and consistent guidelines to prevent and reduce illness and injury due to exposure of health care workers.
- This bill doesn’t set out what the solutions are, it asks a group of stakeholders to look at the issue and figure out solutions that will work for everyone involved.
- Washington was the first state in the nation to pass laws to protect their workers in 2011; California and North Carolina followed suit in 2013 and 2014. New Jersey, Michigan and Massachusetts have legislation pending.

² CDC. Hazardous drugs in health care. http://www.cdc.gov/niosh/topics/hazdrug/