

**OCCUPATIONAL SAFETY
AND HEALTH STANDARDS BOARD**

2520 Venture Oaks Way, Suite 350
Sacramento, CA 95833
(916) 274-5721
www.dir.ca.gov/oshsb

**PROPOSED PETITION DECISION OF THE
OCCUPATIONAL SAFETY AND HEALTH STANDARDS BOARD
(PETITION FILE NO. 611)****I. INTRODUCTION**

On January 17, 2026, the Occupational Safety and Health Standards Board (Board or OSHSB) received a petition from California Nurses for Environmental Health & Justice (Petitioner) requesting the Board amend title 8 to require the use of fume hoods when crushing pharmaceuticals in health care facility settings. The petitioner seeks to address the potential exposure to various medications that may occur when nurses crush pills to administer medications to patients.

Labor Code section 142.2 permits interested persons to propose new or revised regulations concerning occupational safety and health and requires the Board to consider such proposals and render a decision no later than six months following receipt. Further, as required by Labor Code section 147, any proposed occupational safety or health standard received by the Board from a source other than the Division of Occupational Safety and Health (Cal/OSHA) must be referred to the Cal/OSHA for evaluation. Cal/OSHA has 60 days after receipt to submit an evaluation regarding the proposal.

II. SUMMARY

Petitioner requests rulemaking to implement a healthcare facility workplace requirement for the use of fume hoods where the crushing of pharmaceuticals occurs.

III. RELEVANT STANDARDS

Assembly Bill AB 1202, Occupational and health standards: hazardous drugs was signed by the Governor and filed with the Secretary of State on October 9, 2013. The act added the following provision to the Labor Code, section 144.8:

- (a) As used in this section the following definitions shall apply:
(1) "Antineoplastic drug" means a chemotherapeutic agent that controls or kills cancer cells.

(2) “NIOSH” means the National Institute for Occupational Safety and Health.

(b)The board shall adopt an occupational safety and health standard for the handling of antineoplastic drugs in health care facilities regardless of the setting. In developing the standard, the board shall consider input from hospitals, practicing physicians from impacted specialties, including oncology, organizations representing health care personnel, including registered nurses and pharmacists, and other stakeholders, and shall determine a reasonable time for facilities to implement new requirements imposed by the adopted standard. The standard, to the extent feasible, shall be consistent with and not exceed recommendations in the NIOSH 2004 alert entitled “Preventing Occupational Exposures to Antineoplastic and Other Hazardous Drugs in Health Care Settings,” as updated in 2010. The standard may incorporate applicable updates and changes to NIOSH guidelines.

All employers, including employers in the health care field, are also required to identify and evaluate workplace hazards, and provide methods and procedures for correction of unsafe or unhealthy conditions. (Title 8, section 3203.)

Other relevant standards include title 8, section 3384 which establishes requirements for the use of hand protection, and section 5141 which requires harmful exposures be prevented by engineering controls whenever feasible. Section 5141 also allows for the use of administrative controls and control by respiratory protective equipment when engineering controls are not feasible or do not achieve full compliance. Section 5155 requires employee exposure to specifically listed airborne contaminants to be kept below specified concentration limits, referred to as permissible exposure limits (PELs). Finally, section 5144 establishes requirements for the use of respiratory protection.

IV. CAL/OSHA EVALUATION

The Cal/OSHA evaluation discusses advisory committee efforts that have taken place in 2014 and 2015 to create a draft regulation for safe handling of antineoplastic drugs in health care. Since those meetings, Cal/OSHA has been working to expand the scope of the drafted proposal to address all hazardous drugs as defined by the National Institute of Occupational Safety and Health (NIOSH). The recommendations from NIOSH under consideration by Cal/OSHA include:

- Regulations to address workplace exposures for all healthcare employees (including nurses) with occupational exposure to hazardous drugs in healthcare settings.
- Engineering controls (e.g. biological safety cabinets), administrative controls, personal protective equipment, and other strategies (e.g. medical surveillance, training, etc.) to minimize workers’ exposures to hazardous drugs in healthcare settings.

- Convening a future advisory meeting to discuss a new draft regulation to include occupational exposures to hazardous drugs in healthcare settings. (Cal/OSHA Evaluation, p. 4.)

Accordingly, Cal/OSHA is largely in agreement with the Petitioner's request and recommends that petition 611 be granted to the extent that exposures to drugs classified as hazardous by NIOSH be considered in Cal/OSHA rulemaking already in development. Cal/OSHA also encourages the Petitioner to participate in the ongoing rulemaking process, as their input would be valuable.

V. BOARD STAFF EVALUATION

Board staff agrees with Petitioner's assertion that occupational exposure to pharmaceuticals is a recognized hazard that must be addressed by health care employers. However, Board staff does not recommend a blanket use of fume hoods when crushing medications or pharmaceuticals and suggests that written procedures and controls to manage exposure may be sufficient in some instances. Such procedures and controls should include a risk assessment (toxicity of the drug, duration, frequency, etc.) and hierarchy of controls (elimination, substitution, engineering controls, administrative controls, housekeeping, and personal protective equipment).

The recommendation of Board staff is to grant the Petition and convene an advisory committee meeting, which will determine the scope and appropriate methods and means to mitigate occupational exposure to pharmaceutical drugs. In addition, Board staff recommends that rulemaking on handling of hazardous drugs as defined by NIOSH (including anti-neoplastic drugs) be prioritized over potential rulemaking for general handling of other drugs.

VI. DISCUSSION

Nurses must sometimes crush pills and add them to foods to allow for consumption by various patient populations, such as pediatric patients and others who have difficulty with swallowing pills. When pills are crushed, fine and ultrafine particulate matter can be created and released into the air, creating a risk of exposure to these medications for healthcare workers. The crushing and pouring of medications also creates a risk of cumulative exposure for those healthcare workers who must consistently engage in this task for their patients. There are many unknowns regarding the potentially adverse risks of cumulative exposure to this ultrafine particulate matter.

Both Cal/OSHA and Board staff are in agreement with Petitioner that occupational exposure to pharmaceutical drugs is a workplace hazard; the legislature has also recognized that a hazard exists, and has directed the Board to take steps to protect workers who handle anti-neoplastic drugs.

VII. CONCLUSION AND ORDER

The Board has considered the petition Petitioner, as well as the reports of Cal/OSHA and Board staff. Petition File No. 611 is hereby GRANTED to the extent the Board requests Cal/OSHA to expand the scope of its current advisory committee and rulemaking effort to include issues raised by Petition 611.