

- “Can cause invitro mutations and be a contributing factor to higher rates of pregnancy complications for female surgeons.”

But, like OSHA, TJC does not mandate that surgical smoke be evacuated.

Evacuating surgical smoke at its origin is the most effective method of safeguarding all individuals in the operating room, as mandated by the 2024 National Fire Protection Agency (NFPA) standard. It states that “all medical plumes (i.e., surgical smoke) generated by the use of energy devices (e.g. electrosurgical units, lasers) during medical and surgical procedures shall be captured as close as possible to the point of generation (i.e., point where the energy device contacts the tissue)...”

Who Supports Smoke Evacuation in the OR?

The American College of Surgeons (ACS), The Society of American Gastrointestinal and Endoscopic Surgeons (SAGES), and The American Association of Gynecologic Laparoscopists (JMIG) all recognize the hazards of surgical smoke and recommend smoke evacuation.

Dr. Anthony Hedley, a brilliant and healthy orthopedic surgeon from Phoenix,

Arizona, developed idiopathic pulmonary fibrosis that he attributed to the effects of surgical smoke in an article entitled, “Surgical Smoke Nearly Killed Me.”

Julie Greenhalgh, BSN, RN, CNOR, developed chronic lung disease, which she attributes to being an OR nurse for over 40 years. In 2005, she began advocating for laws requiring surgical smoke evacuation. While testifying on her condition, she displayed a plastic bag containing the three inhalers she required daily for chronic coughing, bronchitis, and asthma. She was instrumental in championing the nation’s first surgical smoke evacuation bill in Rhode Island in 2018.

Georgia was the eighth state to enact legislation in 2022, but it was too late for Angela Hohn, RN, BSN, BS, CNOR, FCN, who dedicated 43 years to working in the OR. Angela was an avid runner who embraced a healthy lifestyle. After being diagnosed with Stage 4, non-small cell lung cancer, she joined the fight for smoke evacuation legislation. Even with Angela’s testimony, it took three years for Georgia to pass surgical smoke evacuation legislation.

Surgical smoke poses a serious health risk, and organizations such as TJC, NIOSH,

and OSHA recommend evacuation. However, because no national directive exists, we must lobby for state legislation. Currently, only eighteen states have enacted laws mandating surgical smoke evacuation.

As nurses, our duty to our patients is intrinsic to our identity as healthcare professionals. Moreover, Provision 5 of the Code of Ethics for Nurses emphasizes the importance of self-responsibility, stating that “nurses owe the same duties to themselves as to others, including the responsibility to promote health and safety.” With this understanding, we must stand together to advocate for our patients’ safety and support state legislation promoting a safe work environment.

Let’s unite as South Carolina nurses to champion this essential issue in our state. Your support is crucial to protecting everyone in our ORs. Join forces with your fellow nurses and promote health and safety by sharing your information in this brief survey. Together, we wield the power to enact positive change. <https://www.scnurses.org/page/SurgicalSmokeSurveySeptember2024>, www.jd-rn.com ■

South Carolina Board of Nursing 2024 Licensure Renewal Facts

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The mission of the State Board of Nursing for South Carolina is the protection of public health, safety and welfare by assuring the safe and competent practice of nursing.

This mission is accomplished by assuring safe initial practice as well as continuing competency in the practice of nursing and by promoting nursing excellence in the areas of education and practice. The Board licenses qualified individuals as licensed practical nurses, registered nurses

or advanced practice registered nurses. Complaints against nurses are investigated and disciplinary action taken when necessary. Schools of nursing (pre-licensure programs) are surveyed and approved to ensure quality education for future nurses.

The South Carolina (SC) Board of Nursing oversees licensure renewal for all active LPN, RN and APRN licenses across SC every other year in even years. Prior to launching the 2024 renewal cycle in

February 2024, SC had over 96,500 active licensees. Since the renewal period has closed, the total number of active licensees dropped to 90,375, fewer than those lost in prior renewal cycles.

The number of APRNs, particularly, Family Nurse Practitioners (FNPs) are the fastest growing segment of our total licensees with almost 11,000 active licensees across the state at present. Note that five (5) years ago, we had 6262 APRNs per *(continued on page 13)*