

SENATE . . . . . No. 1332

The Commonwealth of Massachusetts

PRESENTED BY:

Joanne M. Comerford

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act protecting patients and health care workers from exposure to surgical smoke.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
Joanne M. Comerford	Hampshire, Franklin and Worcester	
Paul R. Feeney	Bristol and Norfolk	1/27/2023
Lindsay N. Sabadosa	1st Hampshire	1/27/2023
Jack Patrick Lewis	7th Middlesex	1/27/2023
Michael O. Moore	Second Worcester	2/2/2023
Walter F. Timilty	Norfolk, Plymouth and Bristol	2/15/2023
Sal N. DiDomenico	Middlesex and Suffolk	2/15/2023
Bruce E. Tarr	First Essex and Middlesex	2/21/2023
Susan L. Moran	Plymouth and Barnstable	3/29/2023
Pavel M. Payano	First Essex	10/18/2023
John F. Keenan	Norfolk and Plymouth	1/8/2024

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By Ms. Comerford, a petition (accompanied by bill, Senate, No. 1332) of Joanne M. Comerford, Paul R. Feeney, Lindsay N. Sabadosa, Jack Patrick Lewis and other members of the General Court for legislation to protect patients and health care workers from exposure to surgical smoke. Public Health.

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**The Commonwealth of Massachusetts**

**In the One Hundred and Ninety-Third General Court  
(2023-2024)**

An Act protecting patients and health care workers from exposure to surgical smoke.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1 SECTION 1. Chapter 111 of the General Laws, as appearing in the 2020 Official Edition,  
2 is hereby amended by inserting after section 243 the following section:-

3 Section 244. (a) As used in this section, the following words shall, unless the context  
4 clearly requires otherwise, have the following meanings:-

5 “Smoke evacuation system”, smoke evacuators, laser plume evacuators, or local exhaust  
6 ventilators that effectively capture and neutralize surgical smoke at the site of origin and before  
7 the smoke can make ocular contact or contact with the respiratory tract of the occupants of the  
8 room.

9 “Surgical smoke”, the by-product, including surgical plume, smoke plume, bio-aerosols,  
10 laser-generated airborne contaminants, and other lung-damaging dust, that results from contact  
11 with tissue by an energy generating device.

12 (b) All hospitals and freestanding ambulatory surgical facilities licensed in the  
13 commonwealth under this chapter shall adopt policies to ensure the elimination of surgical  
14 smoke by use of a smoke evacuation system for any procedure that generates surgical smoke  
15 from the use of energy-based devices including, but not limited to, electrosurgery and lasers.

16 (c) Any hospital or freestanding ambulatory surgical facility that violates subsection (b)  
17 shall be punished by a fine of not less than \$500 for each violation.

18 SECTION 2. (a) Section 244 of chapter 111 of the General Laws shall take effect as of  
19 January 1, 2024.

20 (b) Every hospital and freestanding ambulatory surgical center shall report to the  
21 department of public health by April 1, 2024 of the policies they have adopted to comply with  
22 said section 244 of said chapter 111.