

AN ACT concerning health.

**Be it enacted by the People of the State of Illinois,  
represented in the General Assembly:**

Section 5. The University of Illinois Hospital Act is amended by adding Section 8d as follows:

(110 ILCS 330/8d new)

Sec. 8d. Surgical smoke plume evacuation.

(a) In this Section:

"Department" means the Department of Public Health.

"Surgical smoke plume" means the by-product of the use of energy-based devices on tissue during surgery and containing hazardous materials, including, but not limited to, bio-aerosols, smoke, gases, tissue and cellular fragments and particulates, and viruses.

"Surgical smoke plume evacuation system" means a dedicated device that is designed to capture, transport, filter, and neutralize surgical smoke plume at the site of origin and before surgical smoke plume can make ocular contact, or contact with the respiratory tract, of an employee.

(b) To protect patients and health care workers from the hazards of surgical smoke plume, the University of Illinois Hospital shall adopt policies to ensure the elimination of surgical smoke plume by use of a surgical smoke plume

evacuation system for each procedure that generates surgical smoke plume from the use of energy-based devices, including, but not limited to, electrosurgery and lasers.

(c) The University of Illinois Hospital shall report to the Department within 90 days after the effective date of this amendatory Act of the 102nd General Assembly that policies under subsection (b) of this Section have been adopted.

Section 10. The Ambulatory Surgical Treatment Center Act is amended by adding Section 6.9 as follows:

(210 ILCS 5/6.9 new)

Sec. 6.9. Surgical smoke plume evacuation.

(a) In this Section:

"Surgical smoke plume" means the by-product of the use of energy-based devices on tissue during surgery and containing hazardous materials, including, but not limited to, bio-aerosols, smoke, gases, tissue and cellular fragments and particulates, and viruses.

"Surgical smoke plume evacuation system" means a dedicated device that is designed to capture, transport, filter, and neutralize surgical smoke plume at the site of origin and before surgical smoke plume can make ocular contact, or contact with the respiratory tract, of an employee.

(b) To protect patients and health care workers from the hazards of surgical smoke plume, an ambulatory surgical

treatment center licensed under this Act shall adopt policies to ensure the elimination of surgical smoke plume by use of a surgical smoke plume evacuation system for each procedure that generates surgical smoke plume from the use of energy-based devices, including, but not limited to, electrosurgery and lasers.

(c) An ambulatory surgical treatment center licensed under this Act shall report to the Department within 90 days after the effective date of this amendatory Act of the 102nd General Assembly that policies under subsection (b) of this Section have been adopted.

Section 15. The Hospital Licensing Act is amended by adding Section 6.28 as follows:

(210 ILCS 85/6.28 new)

Sec. 6.28. Surgical smoke plume evacuation.

(a) In this Section:

"Surgical smoke plume" means the by-product of the use of energy-based devices on tissue during surgery and containing hazardous materials, including, but not limited to, bio-aerosols, smoke, gases, tissue and cellular fragments and particulates, and viruses.

"Surgical smoke plume evacuation system" means a dedicated device that is designed to capture, transport, filter, and neutralize surgical smoke plume at the site of origin and

before surgical smoke plume can make ocular contact, or contact with the respiratory tract, of an employee.

(b) To protect patients and health care workers from the hazards of surgical smoke plume, a hospital licensed under this Act shall adopt policies to ensure the elimination of surgical smoke plume by use of a surgical smoke plume evacuation system for each procedure that generates surgical smoke plume from the use of energy-based devices, including, but not limited to, electrosurgery and lasers.

(c) A hospital licensed under this Act shall report to the Department within 90 days after the effective date of this amendatory Act of the 102nd General Assembly that policies under subsection (b) of this Section have been adopted.