



***Alert
on
Reducing
Occupational
Exposures
to Hazardous Drugs
in Healthcare:
Converting Theory
to Practice***



October 3-5, 2004
Crowne Plaza San Antonio Riverwalk
(formerly the Adams Mark Hotel)
San Antonio, Texas



Conference Purpose

The purpose of this workshop is to familiarize healthcare professionals with the recently published *NIOSH Alert on Hazardous Drugs* and to discuss implementation of the recommendations contained in that Alert.

The target audience includes pharmacy and nursing personnel, health and safety personnel, home healthcare managers, housekeeping personnel, and hospital administration.

If you have questions, please contact Ms. Barbara MacKenzie, 513-533-8132 or BMacKenzie@cdc.gov.

Registration Information

- ◆ Early Registration - \$225.00 (Payment received by August 31, 2004)
- ◆ General Registration - \$275.00 (September 1, 2004 through October 1, 2004)

All registrations include:

Continental breakfast and boxed lunch on Monday and Tuesday,
as well as workshop hand-out materials.

You may register online, by fax, or by mail. All registrations must be accompanied by payment. Registration fees may be paid by VISA, Mastercard, Government Credit Card, check or money order.

Attendance will be limited to the first 400 registrants. Professional education and certification credits have been applied for.

For online information, please visit the NIOSH hazardous drug topic page at:

<http://www.cdc.gov/niosh/topics/hazdrug/>

A pre-publication copy of the *Alert on Hazardous Drugs* may also be accessed from this site.

Conference Location & Hotel Information

Crowne Plaza San Antonio Riverwalk

(formerly the Adams Mark Hotel)

111 East Pecan Street

San Antonio, TX 78205

Phone for reservations: 1-800-227-6963

Fax: 210-354-2700

A block of rooms has been reserved for a discounted rate of: Single: \$91.00 - Double: \$110.00. To be eligible for this rate, reservations must be made by **September 17, 2004**. To make reservations by phone, you may call the hotel toll free at 1-800-227-6963 and mention that you are attending the **NIOSH Alert Conference**. To make reservations on-line, visit www.crowneplaza.com/sariverwalk input the Group Code: **ALE**.

Preliminary Agenda

Sunday, October 3, 2004

5:00 p.m.– 8:00 p.m. Registration
6:00 p.m.– 8:00 p.m. Opening Reception

Monday, October 4, 2004

7:00 a.m.– 3:00 p.m. Registration
7:30 a.m.– 8:30 p.m. Continental Breakfast
8:30 a.m.– 4:30 p.m. Plenary Session

8:30 a.m. ***Introduction / Housekeeping***

8:45 a.m. ***Welcome*** – John Howard, MD, Director NIOSH
John Henshaw, Assistant Secretary of Labor, OSHA
Paul M. Schyve, MD, Senior VP, Joint Commission on Accreditation of Healthcare Organizations

9:45 a.m. ***Background / History of Alert*** – Larry Reed, Chief, Engineering and Physical Hazards Branch, NIOSH
Recap of working group, definition of “an Alert” and other NIOSH document formats, development of the hazardous drug alert, the function of NIOSH

10:30 a.m. Break

11:00*a.m. ***Health & Safety Issues Related to Hazardous Drugs, Toxic Effects, Definition of Hazardous Drugs, Drug Classifications, Case Studies*** – Melissa McDiarmid, MD, MPH, University of Maryland

12:00 p.m.– 1:00 p.m. Lunch *provided at Hotel*

1:00* p.m. ***Control of Exposures to Hazardous Drugs: Engineering Controls, Ventilation, Biological Safety Cabinets, Personal Protective Equipment, Gloves, and Work Practices*** – Duane Hammond, NIOSH; Thomas Connor, PhD, NIOSH; and Luci Power, MS, RPh, University of California

2:00 * p.m. ***Life Cycle of Drugs: Distribution to Disposal, Hazards Associated With Each Step*** – CAPT Robert DeChristoforo, Clinical Center Pharmacy Department, NIH and CDR Martha O’Lone, Center for Devices and Radiological Health, FDA

3:00 p.m. Break

3:30* p.m. ***“ABC’s of the Alert”*** –
Group Leaders, headed by Thomas Connor, PhD, NIOSH

* *Schedule allows for 45 minute presentation followed by 15 minutes Q&A*

Tuesday, October 5, 2004

7:00 a.m.– 2:00 p.m. Registration
7:30 a.m.–8:30 a.m. Continental Breakfast
8:30 a.m.–12:00 p.m. Break-out Sessions (*see schedule and targeted audience next page*)

9:00 a.m.– 3:00 p.m.	Exhibit Area (Vendors) Open
12:00 p.m.–1:00 p.m.	Boxed Lunches <i>provided near Exhibit Area</i>
1:00 p.m.– 3:00 p.m.	Break-out Sessions (<i>see schedule and targeted audience below</i>)
3:00 p.m.– 4:30 p.m.	Panel Discussion, Q&A

Presentation Schedule

8:30 a.m.– 9:15 a.m.	<i>Engineering Controls in the Preparation of Hazardous Drugs</i> Target Audience: Pharmacists <i>Work Practice Controls in the Administration of Hazardous Drugs</i> Target Audience: Nursing Staff <i>How to Develop a Hazardous Drug Training Program</i> Target Audience: HS&E Staff, Administrators
9:30 a.m. – 10:15 a.m.	<i>Work Practice Controls in the Preparation of Hazardous Drugs</i> Target Audience: Pharmacists <i>Engineering Controls in the Administration of Hazardous Drugs</i> Target Audience: Nursing Staff <i>In-Home Administration of Hazardous Drugs</i> Target Audience: Home Health Care Personnel, Administrators, HS&E Staff
10:30 a.m.– 11:15 a.m.	<i>“Pharmaceutical Industry Approach to Handling Hazardous Drugs”</i> Target Audience: All <i>Waste Handling</i> Target Audience: All <i>Medical Surveillance and Alternative Duty</i> Target Audience: HS&E Staff, Administrators
12:00 p.m.– 1:00 p.m.	Lunch
1:00 p.m.– 1:45 p.m.	<i>USP 797</i> Target Audience: Pharmacists, Administrators <i>JCAHO Implications</i> Target Audience: Administrators <i>Post-Administration Exposure</i> Target Audience: Houskeeping staff, HS&E staff, Administrators
2:00 p.m.– 2:45 p.m.	<i>Receipt and Distribution of Hazardous Drugs</i> Target Audience: Pharmacists, Administrators <i>Personal Protective Equipment</i> Target Audience: All <i>Contamination Studies</i> Target Audience: All

Registration Form

Register online at: <http://66.148.43.142>

Mail or fax registration form to:

DESA, Inc.

ATTN: NIOSH Alert Registration

P.O. Box 6805, Columbia, SC 29260-6805

Phone: (803) 743-1135 * Fax: (803) 782-6741

You may register by fax, or by mail. All registrations must be accompanied by payment.

First Name: _____

Last Name: _____

Degree(s): _____ Title: _____

Please select area of primary involvement: Pharmacist Nurse Home Health Care

Administrator Housekeeping Health, Safety & Environment Physician

Company/Organization: _____

Address: _____

City: _____ State: _____ Postal Code: _____

Work Phone #: _____ Fax Phone #: _____

Email Address: _____

Special Meal Requests: _____

Special Needs: _____

Payment Information

Early Registration Fee: \$225.00 (Payment received by August 31, 2004)

General Registration Fee: \$275.00 (September 1, 2004 - October 1, 2004)

Method of Payment: _____

Card Number/Purchase Order Number: _____

Expiration Date: _____

Gov't Customer Code/Card Security ID: _____

Name on Card: _____

Company Name: _____

Billing Address: _____

City: _____ State: _____ Postal Code: _____

Signature: _____

NIOSH
4676 Columbia Parkway
Cincinnati, OH 45226

NIOSH Permit #
Information

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