Biohazardous Waste and Sharps Disposal

**Federal**
OSHA Occupational Exposure to Bloodborne Pathogens Standard 29 CFR 1910.1030

**State**
California Code of Regulations (CCR), Medical Waste Management Act, Chapter 6.1 §117600-118360
California Medical Waste Management Manual January 2015
CCR Title 22 sections 75067-75069
Cal/OSHA Occupational Exposure to Bloodborne Pathogens Standard, CCR Title 8 section 5193

**Centers for Disease Control and Prevention (CDC)**
Recommendations for Prevention of HIV Transmission in Health Care Settings, 2006
Guidelines for Infection Control in Dental Health Settings, 2003
Hand hygiene in Healthcare Settings, 2002

**Policy Statement:** It is the policy of WesternU to preserve the health and safety of its faculty, staff, students and patients through the proper identification and disposal of biohazardous waste and sharps products.

**Policy Purpose:** To ensure compliance with local, state and federal regulations related to biohazardous waste handling and disposal.

The most practical approach to the management of biohazardous waste is to identify those wastes with the potential for causing infection during the handling and disposal process. There is no epidemiological evidence to suggest that most healthcare waste is any more infectious than residential waste. Moreover, there is no epidemiological evidence that healthcare waste has caused disease in the community as a result of improper disposal.

**Biohazardous Waste Disposal Procedure:** Observing standard precautions, as defined by the CDC, discard biohazardous wastes in an impervious to moisture red biowaste bag at site of origin.

1. Place biohazardous waste in identified puncture resistant covered trash containers. These containers shall be located in the used utility rooms and in select patient/exam room. Each bag must display the word "BIOHAZARDOUS WASTE" on the bag or place in a bag that has the international symbol and the word “BIOHAZARD”. The bags shall be tied to prevent leakage or expulsion of contents during all future storage and handling.

2. Medical waste may be placed into a biohazard bag not to exceed three pounds or one gallon and tied in a patient treatment area/room and shall be immediately transported upon completion of the procedure directly from the point of generation and placed into a biohazard container stored
in a soiled utility room or other biohazardous waste storage without having first been placed into a secondary container in the patient room.

3. Medical waste may be placed into a biohazard bag hung on a hamper stand in a surgery suite and the bag removed from the hamper stand after completion of the procedure, taken out of the surgery suite, and placed into a biohazard container stored in a soiled utility room or other biohazard waste storage area.

4. Double bagging is necessary only when waste has contaminated the outside of the bag or when the integrity of the bag is questionable.

5. Biohazardous waste include: dressings or items that are soggy, dripping, caked or flaking with blood or bloody body fluids'; containers of blood; blood products or spinal, amniotic, peritoneal, pleural, pericardial or synovial fluids, lab specimens and cultures.

**Disposal/Treatment:**

For containers that contain only sharps waste or only pharmaceutical waste, the storage time clock begins when the contents are at the container fill line. Containers with combined waste must be disposed within the shorter storage time allowed. For example, a container with both sharps and biohazardous waste must be disposed within 30 days of placing the biohazardous waste in the container; if the container held only sharps, WesternU has 30 days after the container is filled to dispose of the waste.

1. Biohazardous waste shall be bagged and placed for storage, handling, or transport in a rigid container which may be disposable, reusable, or recyclable. Containers shall be leak resistant, have tight-fitting covers, and be kept clean and in good repair. Containers may be recycled with the approval of the enforcement agency.

2. Containers may be of any color and shall be labeled with the words “Biohazardous Waste” or with the international biohazard symbol and the word “BIOHAZARD” on the lid and on the sides so as to be visible from any lateral direction.

3. Liquids that are known to contain blood or body fluids can be poured down the sewer drain with caution, using Standard Precautions and protective apparel as is appropriate to avoid contamination of one's clothing. Bulk blood, suction fluids, excreta and secretions are included. However, if the blood or body fluids contain even trace chemotherapy agents or radioisotopes, they must be disposed of in accordance with state/federal laws.

2. Handle all other university waste (not biohazardous, chemotherapy or radioactive) with care, observing Standard Precautions before placing in regular trash, which has a plastic liner. Examples of regular waste include the following:
• Paper, wrappers
• Gloves
• Dressings that are not wet or soggy
• Empty IV bags (with no prior additives) and tubing (except liquid blood)
• Empty suction canisters
• Dry chux (absorbent pads)
• Any waste which contains non-fluid blood and other medical solid waste

3. Biohazardous waste is picked up from each department by a licensed Waste Hauler. The university’s, or Samaritan Health Systems Environmental Health & Safety (EHS) Department is responsible for arranging these pickups on a regular schedule. Storage of the Biologic/Biohazard receptacles is provided within a covered and locked area. Storage of biohazardous waste in California:

• 7 days (>20 lbs. biohazardous waste generated/month)
• 30 days (<20 lbs. biohazardous waste generated/month, stored above 0°)
• 90 days (<20 lbs. biohazardous waste generated/month, stored below 0°)

EHS maintains a service contract for the disposal of the following wastes: biohazardous material, RCRA and pharmaceutical waste.

**Sharps Waste:** A sharp means any device having acute rigid corners, edges, or protuberances capable of cutting or piercing the skin.

1. Personnel handling sharps will properly and safely dispose of needles, syringes intact with uncapped needles, blades, and needles with attached tubing, and any other item considered a sharp, in an approved rigid sharps container with the Biohazardous label affixed to the container.

2. Needles shall not be bent after use, but shall be promptly placed in a puncture resistant container used solely for such disposal. Needles should not be recapped before discarding.

3. Wall mounted or counter-top containers must be replaced when they become ¾ full. Full sharps containers must be picked up by the waste hauler within 30-days.

4. Broken glass items such as blood vials that are contaminated with other medical waste will be put into the sharps containers using non-touch method.

**Waste hauling in private/university vehicle**

Designated university staff may transport medical waste in their own vehicle to a permitted medical waste treatment facility, a transfer station, or other health care facility for the purpose of consolidation before treatment and disposal, without a permit or registration under the following conditions:

• Combination packaging must consist of one or more inner packaging’s, each of which may not contain more than 4 kg (8.8 lbs.) or 4 L (1 gallon), and an outer packaging containing not more than 16 kg (35.2 lbs.).
lbs.) or 16 L (4.2 gallons). The entire package must be secured in the vehicle as to prevent shifting during the motor vehicle’s operation.

Spills of Medical Waste

If biohazardous waste is dropped or spilled onto the floor or counter, trained personnel wearing personnel protective equipment will place waste in biohazardous container and will disinfect the area of the spill. If spill is large, EHS should be called to arrange for more comprehensive clean up.

Definitions:

Biohazardous Waste as defined in the California Health and Safety Code, Division 20, Chapter 6.1 (§117600-118360), is identified as follows: laboratory waste; specimens containing recognizable fluid blood, fluid blood products or fluid of blood known to be highly infectious to humans; waste containing any microbiologic specimens; human tissue or surgery specimens (unfixed); sharps and needles; isolation waste of highly contagious communicable disease requiring isolation precautions; tissue and specimens which have been fixed with Formalin or such items having been contaminated with trace amounts of chemotherapeutic agents: including but limited to: gloves, gowns, towels, empty IV bags and tubing, or any waste material or article which harbors or may reasonably be considered to harbor viable etiologic agents.

Medical Waste

(a) “Medical waste” means any biohazardous, pathology, pharmaceutical, or trace chemotherapy waste not regulated by the federal Resource Conservation and Recovery Act of 1976 (Public Law 94-580), as amended; sharps and trace chemotherapy wastes generated in a health care setting in the diagnosis, treatment, immunization, or care of humans or animals; waste generated in autopsy or necropsy; waste generated during preparation of a body for final disposition such as cremation or interment; waste generated in research pertaining to the production or testing of microbiologials; waste generated in research using human or animal pathogens; sharps and laboratory waste that poses a potential risk of infection to humans generated in the inoculation of animals in commercial farming operations; waste generated from the consolidation of home-generated sharps; and waste generated in the cleanup of trauma scenes. Biohazardous, pathology, pharmaceutical, sharps, and trace chemotherapy wastes that meet the conditions of this section are not subject to any of the hazardous waste requirements

Sharps Containers: Sharps waste will be contained in an approved sharps container (a rigid, puncture resistant container, when sealed, is leak resistant and cannot be reopened without great difficulty) and has the words: "Sharps Waste"; "Biohazard"; or, the international biohazard symbol on all sides.