### AG.903 BIO-HAZARDOUS WASTE MANAGEMENT



Approved By:	Board of Directors	Adopted Date: 2/13/18
Distribution:	Clinical Staff	Revision Date(s):
Category:	Administration & Governance	Reviewed Date(s):

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#### **PURPOSE:**

Bio-hazardous waste represents a significant source of infectious hazard and exposure risk to staff and patients. This policy outlines safe practices for bio-hazardous waste management in order to mitigate this risk.

### **DEFINITIONS:**

The following materials are to be considered medical waste for the purposes of disposal:

**Regulated Medical Waste**: Contaminated bloody objects (fluids pourable and dripping), body parts removed during procedure not sent to Pathology, and microbiological wastes containing potentially infectious materials.

**Sharps**: Needles, all syringes, razors, razor blades, scalpels, suture needles, ampules, and broken contaminated glass

**Small Quantity Generator:** A medical waste generator that produces medical waste in small quantities (less than 200 pounds per month).

### **POLICY:**

Open Door Community Health Centers follows the Medical Waste Management Act (MWMA) as outlined in the California Health and Safety Code sections 1177600 through 118360 to ensure safe bio-hazardous waste practices.

Open Door Community Health Centers does not treat medical or pharmaceutical waste, nor does it store waste for any other medical waste generator.

Each health center stores its own medical waste.

A Small Quantity Generator Certificate (SQG) is maintained for each health center. Any waste transported by employees will be done in accordance with the Materials Trade Exemption under the SQG certificate.

Each health center maintains a medical waste management compliance binder which includes the Medical Waste Management Plan, waste hauler information, and transportation tracking sheet when applicable.

#### Sharps Containers:

- Will be located throughout the Health Center in areas where contaminated sharps will be generated.
- Will be closable, puncture resistant, leak proof on sides and bottom, and labeled with the appropriate bio-hazardous label.
- During use, will be maintained upright, be incapable of having staff reach into the container to retrieve discarded sharps, and will not be more than 75% full.
- When the container is no more than 75% full, it shall be securely closed and transported to the bio-hazardous waste storage area. If leaking, first place in a bio-hazardous bag, then transport to the bio-hazardous waste storage area.

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Will never be reused.

# Regulated waste disposal (see Exposure Control Plan):

- Bio-hazardous waste, consisting of recognizable wet human blood or fluids, is placed in red bio-hazardous bags, and labeled "Bio-Hazardous Waste".
- Before transportation of the red bag it shall be tied or zip tied closed.
- If the bio-hazardous material is in anything other than a red bag it shall be securely closed, placed into a red bag, and the red bag shall be securely closed prior to transportation.

# Storage of Bio-Hazardous Waste:

- All bio-hazardous medical waste shall be stored in a room labeled Bio-Hazardous.
- The Bio-Hazardous Room will either be observable by staff or locked.
- The Bio-Hazardous Materials shall be held until the contracted medical waste hauler removes them for proper destruction.
- It is the responsibility of the contractor to sanitize the containers as necessary.

For Pharmaceutical Waste see MM\_Medication Takeback Policy

## **REFERENCES:**

California Medical Waste Management Plan, California Health and Safety Code 117930-117950 John Hopkins University Medical Waste Disposal Policy, 9-2016 UCLA Health Systems, Medical Waste Management Plan, 1-2013 UC Davis Medical Waste Management Plan, 12-2016

## **ASSOCIATED DOCUMENTS:**

Contract – Eco Medical Waste Disposal Exposure Control Plan MM\_Medication Takeback

### **KEYWORD TAGS:**

Bio, hazardous, Bio-hazardous, waste, trash, disposal, sharps