



CHAROTAR UNIVERSITY OF SCIENCE AND TECHNOLOGY

DEVANG PATEL INSTITUTE OF ADVANCE TECHNOLOGY AND RESEARCH

CL144A: ENVIRONMENTAL SCIENCES

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HOSPITAL WASTE MANAGEMENT







Bio-medical waste management



OBJECTIVES

Definition

Source of health care waste

Classification of waste (WHO)

Bio-medical waste in India during COVID-19

Problems associated with health care waste

Magnitude of problem in developing and developed countries

Generation/Segregation/Storage/Transportation/Treatment & Disposal of waste

Treatment technique & categorical treatment.



WHAT IS HOSPITAL WASTE?

- Hospital waste are the waste produced in the course of health are activities during treating, diagnosing and immunizing human being or animals or while doing study/ research activities.
- 75-90% non-hazardous/general waste
- 10-15% hazardous



SOURCE OF HEALTH CARE WASTE

- Government hospital
- Private hospital
- Nursing homes
- Physician's office
- Dentist office
- Dispensaries
- Mortuaries
- Blood bank and collection center
- Animal house
- Laboratories
- Research organization



W.H.O. CLASSIFICATION

| Waste categories | Description and examples |
|-----------------------|---|
| 1. General waste | No risk to human health E.G.: Office paper, wrapper, kitchen, waste, general sweeping etc. |
| 2. Pathological waste | Human tissue or fluid E.G.: Body parts, blood, body fluids etc. |
| 3. Sharps | Sharp waste E.G.: Needle, scalpel, knives, blades etc. |
| 4. Infectious waste | Which may transmit bacterial, viral or parasitic disease to human being, waste suspected to contain pathogen E.G.: Laboratory culture, tissue (swab) bandage etc. |
| 5. Chemical waste | E.G.: Laboratory reagent, disinfectants, film developer |
| 6. Radio-active waste | E.G.: Unused liquid from radiotherapy or lab research, contaminated glassware etc. |

Swab stick decontaminated Dressing Bandages YELLOW BIN

WASTE DISPOSAL BLACK BIN KITCHEN WASTE/FOOD

GENERAL WASTE CATEGORIES





| Waste categories | Description with examples |
|--------------------------|---|
| 1. Pharmaceutical waste | Expired outdated drugs/chemicals |
| 2. Pressurized container | Gas cylinder, aerosol cans etc. |
| 3. Genotoxic waste | Waste containing cytotoxic drugs (often used in cancer therapy) |

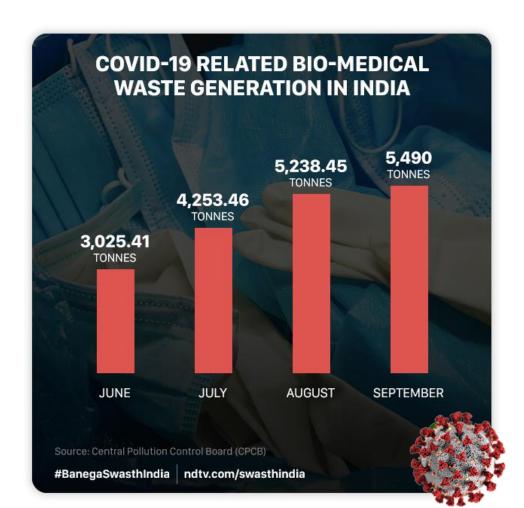
As propagated by CAD, Atlanta under US classification, pathological waste, and sharp waste also come under 'INFECTIOUS WASTE'

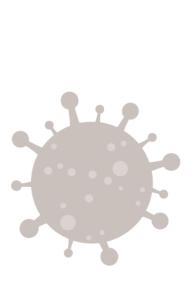
** Types and nature of hospital waste depends upon the service available in hospital and nature of hospital.



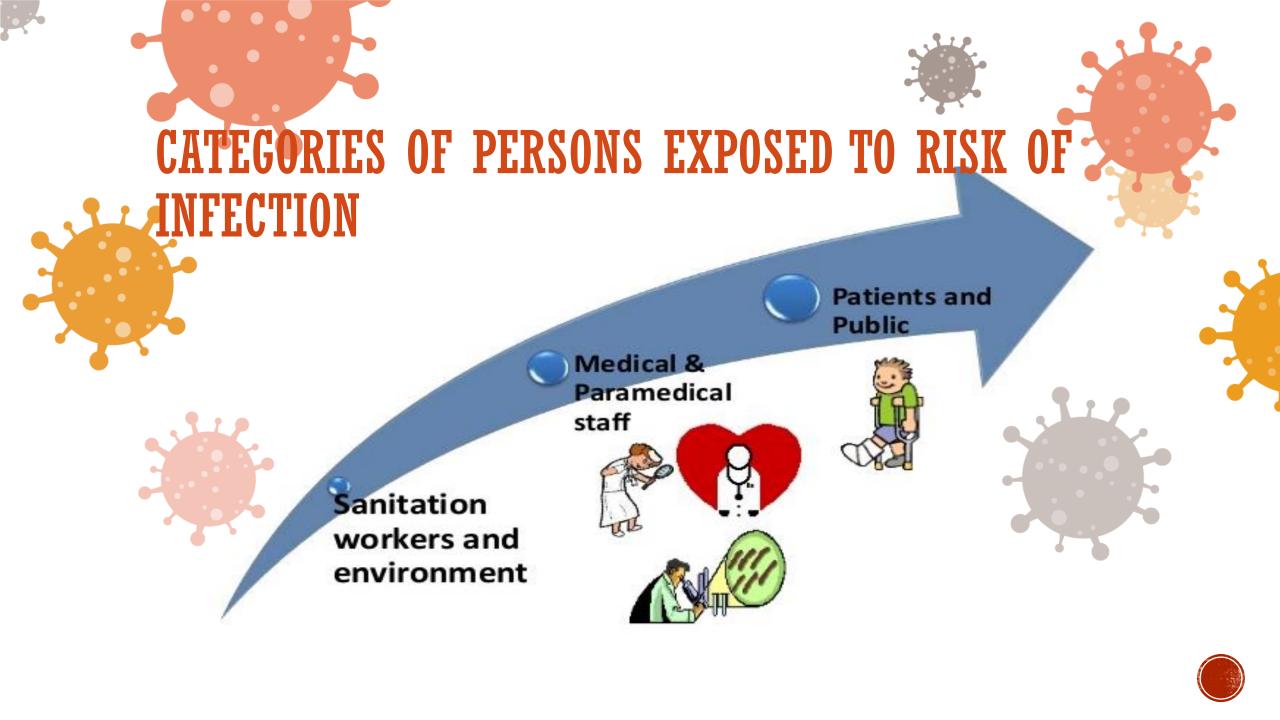
BIO MEDICAL WASTE IN INDIA DURING COVID-19

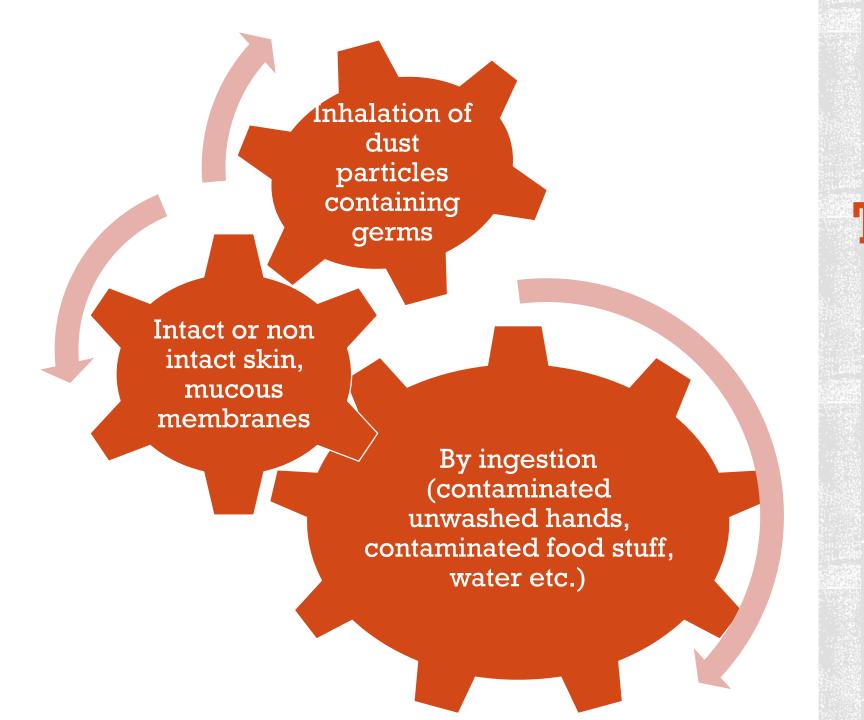












ROUTES OF TRANSMISSION



LET THE WASTE OF THE "SICK" NOT CONTAMINATE THE LIVES OF "THE HEALTHY"

PROBLEMS ASSOCIATED WITH BIOMEDICAL WASTE

| Organism | Diseases caused | Related waste item |
|--|---|---|
| Viruses HIV, hepatitis B, hepatitis A, C, arboviruses, enteroviruses, herpes virus | AIDS, infection hepatitis, dengue, japanese encephalitis, ocular infection, genital infection | Infection needles, body fluids, human excreta, blood fluid, eye secretion, genital secretion |
| Bacteria Salmonella typhi, vibrio cholerae, clostridium tetani, pseudomonas, Streptococcus | Typhoid, cholera, tetanus wound infections, septicemia, rheumatic fever, endocarditis, skin and soft tissue infection | Human excreta and body fluid in landfills and hospital wards, sharps such needles, surgical blades in hospital |
| Parasites Wuchereria bancrofti, Plasmodium | Cutaneous leishmaniasis, Filariasis kala azar, malaria | Human excreta, blood and body fluid in poorly managed sewage system |

MAGNITUDE OF THE PROBLEM

GLOBALLY- developed countries generate 1 to 5 kg/bed/day developing countries: meager data, but figures are lower. 1-2 kg/pt./Day

WHO report: 85% non hazardous waste: 10% infective waste: 5% non-infectious but hazardous. (Chemical, pharmaceutical and radioactive)

GENERATION, SEGREGATION, COLLECTION, STORAGE, TRANSPORTATION AND TREATMENT OF WASTE

1. GENERATION

| Type | Site of generation | Disposal by |
|--------------------------------------|---|----------------------------|
| Non- hazardous waste/ general waste | Office, kitchen, administration, hostels, stores, rooms etc. | Municipal/public authority |
| Hazardous (infections & toxic waste) | Wards, treatment room, dressing room, OT, ICU, labour room, laboratory, dialysis room, CT scan, radio- imaging etc. | Hospital itself |



2. SEGREGATION

Segregation of waste in color coded bags

YELLOW BAGS

Infectious
waste,bandage
s,gauzes,cotton
or any oter
things in
contact with
body fluids,
human body
parts,placenta

RED BAGS

Plastic waste such as catheters, inject ions, syringes, tubings i.v.

BLUE BAGS

All types of glass bottels and broken glass articles, outdated & discarded medicines

BLACK CARBOY

Needles without syringes, blades, sharps and all metal articals Done at point of generation of waste and put in separation colored bags. Color coding varies from nation to nation.

For e.g. in AIIMS hospital, New Delhi, color code bags are practiced.



3. COLLECTION OF WASTE

- Centralized sanitation staffs or any other sanitation staff should collect the waste during morning afternoon or evening under the supervision of nursing staff and sanitation supervisor; documentation should be done in register.
- Garbage bin should be cleaned and disinfected regularly.



4. STORAGE OF WASTE

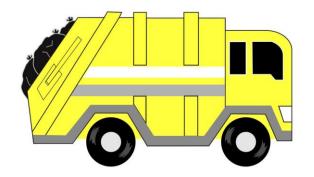
- Waste should not be stored in the generation area for more than a period of 4-6 hours.
- It is responsibility of paramedic/sanitation staff to check for segregation.
- Waste collected in various areas should be transported for disposal/treatment.





5. TRANSPORTATION

- There should be separate corridor and lift in hospital to carry and transport waste. General waste are deposited at municipal dumps.
 Waste for autoclaving and incineration are dumped at separate site for external transport (should have separate colored plastic bag for these waste).
- Transportation should be done in sealed container/sanitation supervisor should ensure for leakage.





CONSIDERING THE ROUTE IS IMPORTANT !!!



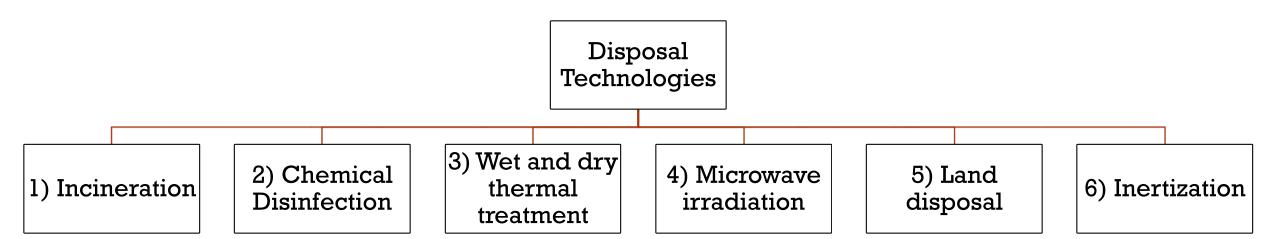
6. TREATMENT AND DISPOSAL

- General waste should be dumped at municipal dumping site.
- Sanitation officer should be responsible for proper coordination between municipal and hospital.
- Use of label/symbols is useful in identifying waste for treatment example: Risk of corrosion, Danger of Infection, Toxic hazards, Glass Hazards, Radioactive materials etc.



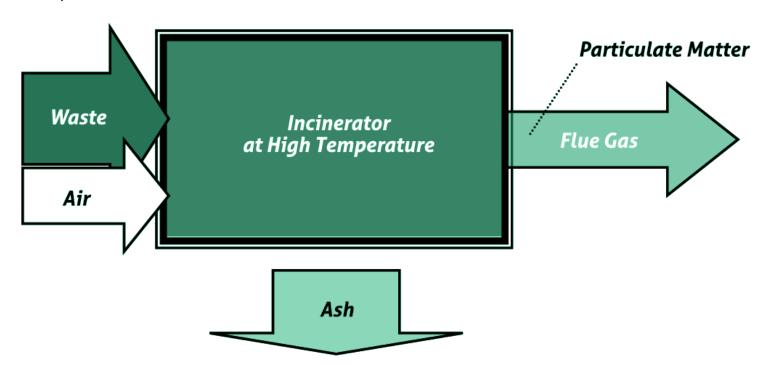


DISPOSAL TECHNOLOGIES





1) INCINERATION



TYPES OF INCINERATORS:

- I. Double chambered (for infectious waste)
- II. Single chambered (if double chamber not affordable)
- III. Rotatory Kilns (for genotoxic waste)

- High temperature dry oxidation process that reduce organic and combustible waste into inorganic incombustible matter. Resulting in significant reduction in waste volume and weight.
- Process is selected to treat waste that cannot be recycled, reused or can be disposed in land

2) CHEMICAL DISINFECTION



- Commonly Used for treatment of liquid infectious waste example: blood, urine, stool and hospital sewage.
- Chemicals are added to waste to kill or inactivate the pathogen it contains.



3) WET AND DRY THERMAL TREATMENT

Wet thermal treatment(steam disinfection):

- •Shredded infectious waste-high temperature- high pressure steam
- This process is similar to autoclaving

Off-site wet thermal (or "steam autoclave") treatment facility



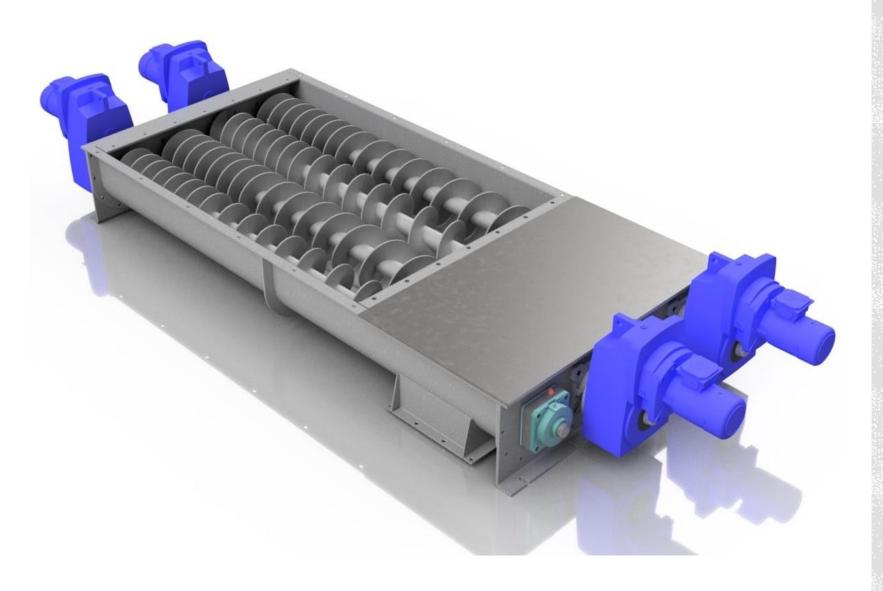
Screw-feed technology:

- Dry thermal disinfection process
- Waste shredded- rotating auger-heated



 Wet thermal treatment/steam disinfection is based on exposure if infectious waste to high temperature and high pressure steam similar to process of autoclaving, inappropriate for treating anatomical waste, chemical and pharmaceutical waste.

SCREW FEED TECHNOLOGY

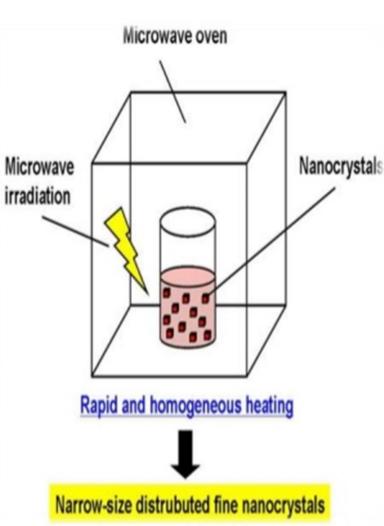


- Dry thermal treatment in which waste is shredded and heated in rotating auger.
- 80% volume and 20-35 weight is reduced.
- This method is suitable for infectious waste and sharps.
- Not used to process pathological, cytotoxic or radioactive waste.



4) MICROWAVE IRRADIAION





- Microwave of frequency 2450MHZ and wave length 12.24cm used to destroy the microorganism.
- Water contained in the waste is rapidly heated by microwave and infectious components are destroyed by heat conduction.



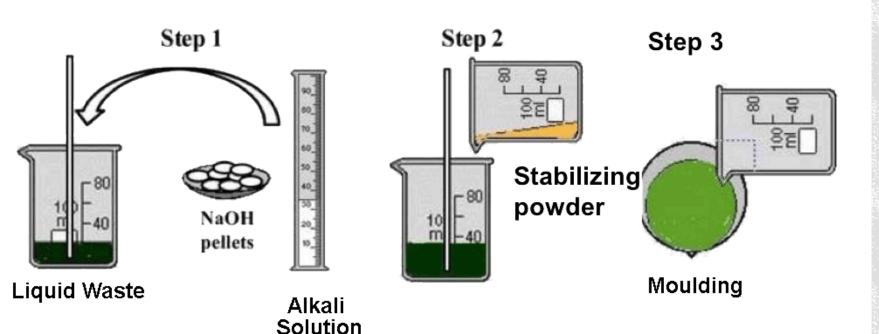
5) LAND DISPOSAL



- Open dumps: risk for public health
- Sanitary landfills:
 designed and
 constructed to
 prevent
 contamination of soil,
 surface, ground
 water and direct
 contact with public.



6) INERTIZATION



- Process of mixing waste with cement and other substances before disposal in order to minimize the risk of toxic substance migration into surface water or ground water and prevent scavenging.
- Proportion of water 65% waste 15% lime 15% cement and 5% water is used.

CATEGORIES OF BIOMEDICAL WASTE SCHEDULE

| Waste Category | Type of waste | Treatment and disposal option |
|-------------------|--|-------------------------------|
| 1) | Human Anatomical waste | Incineration Deep Burial |
| 2) | Animal waste (Animal tissues, organs, body parts, carcasses, bleeding parts, fluid, waste generated by burial veterinary hospitals and colleges, discharge from hospitals and animal houses) | Incineration Deep Burial |



| Waste Category | Type of waste | Treatment and disposal option |
|-------------------|---|---|
| 3) | Microbiology & Biotechnology Waste (Wastes from laboratory cultures, stocks or specimen of live micro organisms or attenuated vaccines, animal cell cultures used in research and infectious agents from research and industrial laboratories, wastes from production of biologicals, toxins and devices used for transfer of cultures) | Local autoclaving Microwaving Incineration |
| 4) | Waste sharps (Needles, syringes, scalpels, blades, glass, etc. that may Cause puncture and cuts. It includes both used and unused sharps) | Disinfecting Chemical Treatment Autoclaving Microwaving |



| Waste Category | Type of waste | Treatment and disposal option |
|-------------------|--|--|
| 5) | Discarded medicine and cytotoxic drugs (Wastes comprising of outdated, contaminated and discarded medicines) | Incineration Destruction and drugs disposal in secured landfills |
| 6) | Soiled waste (Items contaminated with body fluids including cotton, dressings, soiled plaster casts, lines, bedding and other materials contaminated with blood) | Incineration Autoclaving Microwaving |
| 7) | Solid waste (Waste generated from disposable items other than the waste sharps such as tubing, catheters, intravenous sets, etc.) | Disinfecting chemical treatment Autoclaving Microwaving |



| Waste Category | Type of waste | Treatment and disposal option |
|-------------------|---|--|
| 8) | Liquid waste (Waste generated from the laboratory and washing, cleaning, house keeping and disinfecting activities) | Disinfecting chemical treatment Discharge into drains |
| 9) | Incineration Ash (Ash generated by incineration process) | Disposal in municipal landfills |
| 10) | Chemical waste (Chemicals used in production of biologicals, chemicals used in disinfecting and as insecticides) | Chemical treatment Discharge into drains for liquids Secured landfills for solid |



Sources:

- World Health Organization : https://www.who.int/
- Central Pollution Control Board : https://cpcb.nic.in/covid-waste-management/
- Biomedical waste services: https://bwaste.com/resources/the-knowledge-center/articles-insights-and-updates/types-biomedical-waste-disposal
- Celitron : https://celitron.com/en/biomedical-waste-management-disposal-methods

THANK YOU! HAVE A NICE DAY...