**MEDICAL WASTE**

**Are there regulations which govern the disposal of medical waste/biomedical waste?**

Yes. There are specific state[[1]](#footnote-1) and federal[[2]](#footnote-2) regulations governing the disposal of biomedical waste. State rules require that biomedical waste be disposed according to applicable state and county regulations.[[3]](#footnote-3) Each county in Washington has regulations that require specific management and disposal of biomedical waste. Please check with your county health department for rules specific to your area.

**What is biomedical waste**?

Biomedical waste includes:[[4]](#footnote-4)

* Animal waste, including animal carcasses, body parts or bedding of animals known to have been infected with human pathogenic microorganisms.
* Biosafety Level 4 disease waste which includes waste contaminated with blood, excretions, exudates, or secretions from humans or animals which are isolated to prevent contact with highly communicable infectious diseases designated as Biosafety Level 4 under CDC standards.
* Cultures and stocks, which include cultures and stocks of microbiological agents, human serums, live and attenuated vaccines, human blood specimens, including culture dishes, blood specimen tubes and devices to transfer, inoculate and mix cultures.
* Human blood and blood products, meaning discarded human blood and blood components, and materials containing these fluids.
* Pathological waste, including human biopsy material, tissue and anatomical parts that emanate from surgery, obstetrical procedures, autopsy and laboratory procedures (this does not include teeth or remains intended for internment or cremation).
* “Sharps waste” which includes hypodermic needles, syringes with needles attached, IV tubing with needles attached, scalpel blades and lancets that have been removed from their original sterile packages.

**How must biomedical waste be disposed of?**

All biomedical waste must be contained in a manner which complies with federal[[5]](#footnote-5) and state[[6]](#footnote-6) regulations. Contaminated sharps must be disposed of immediately or as soon as possible in an appropriate container.[[7]](#footnote-7) Containers for contaminated sharps waste must be closable, puncture resistant, leakproof on the sides and bottom, and labeled with the word “Biohazard” and display the federally mandated biohazard symbol, or color-coded according to OSHA guidelines.[[8]](#footnote-8) Other biomedical waste must be placed in containers which are closable, constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping, labeled or color-coded according to OSHA guidelines, and closed prior to removal to prevent spillage or protrusion of the contents.[[9]](#footnote-9) If outside contamination of the container occurs, the container must be placed in a second container that prevents leakage and is color-coded.[[10]](#footnote-10)

Biomedical waste or any material in a container labeled as containing biomedical waste must not be compacted.[[11]](#footnote-11)

Biomedical waste may only be disposed of at a treatment and disposal site that meets all applicable regulations.[[12]](#footnote-12) Prior to shipping biomedical waste to a disposal site, the generator must sign a shipping paper which contains the following information:[[13]](#footnote-13)

* Name and address of generator of the biomedical waste.
* Name of the generator representative signing the shipping papers.
* Name of the carrier transporting the waste.
* Date and time of collection.
* Destination and final treatment, storage and disposal of the biomedical waste.
* The general type and quantity of biomedical waste collected.
* Signature by an authorized representative of the biomedical waste generator acknowledging delivery and compliance with all applicable federal, state and local rules regarding packaging and containment.
* Signature by a representative of the company transporting the biomedical waste, acknowledging receipt.

There are more detailed requirements for the safe handling of sharps and bloodborne pathogens as governed by the Department of Labor and Industries.[[14]](#footnote-14) Also see **HYPODERMIC NEEDLES AND SYRINGES.**

**Are there special regulations governing the disposal of hypodermic needles and syringes used at home?**

Yes. State law prohibits intentionally placing unprotected sharps or a sharps waste container in a recycling container provided by a city, county, or solid waste collection company unless it is specifically designated as a drop-off for sharps waste, or in trash cans or bins if there is a separate collection service available for residential sharps waste.[[15]](#footnote-15) Residential sharps waste must be disposed of in accordance with procedures adopted by local solid waste utilities. These regulations vary from region to region, and the local solid waste utility should be consulted before disposing of residential sharps.

**Must a physician employer who has employees who may come in contact with bloodborne pathogens take special precautions with respect to the working environment?**

Yes. Employers whose employees may come into contact with blood-borne pathogens must prepare and implement exposure control plans to eliminate or minimize the risk of occupational exposure to bloodborne pathogens and needlestick or sharps injuries.[[16]](#footnote-16) See **HYPODERMIC NEEDLES AND SYRINGES**.

Note that the Department of Labor & Industries provides a free consultation service, which is available to all employers. Assistance may include advice on health and safety matters, an analysis of health and safety issues in the work place, or help with a particular problem or question related to employee safety and health. Assistance may be obtained by contacting the Department of Labor & Industries Safety and Health Information Line at: 1-800-423-7233.

**Must a physician employer meet certain requirements for their employees to dispose of medical waste?**

Yes. Employers whose employees may come into contact with bloodborne pathogens must prepare and implement exposure control plans to eliminate or minimize the risk of occupational exposure to bloodborne and needlestick or sharps injuries.[[17]](#footnote-17)

1. See Chapter 296-843 WAC; WAC 480-70-426 through -476; Title 70.95k RCW; RCW 70.95.710. [↑](#footnote-ref-1)
2. See 29 C.F.R. § 1910.1030. See also 42 U.S.C. § 6992 *et seq*.(Medical Waste Tracking Act of 1988) and associated regulations, 40 C.F.R. Parts 22 and 259. [↑](#footnote-ref-2)
3. WAC 296-823-14060. [↑](#footnote-ref-3)
4. RCW 70.95k.010(1); WAC 480-70-041. [↑](#footnote-ref-4)
5. 29 C.F.R. § 1910.1030(d)(4)(iii). [↑](#footnote-ref-5)
6. WAC 296-823-14045. [↑](#footnote-ref-6)
7. 29 C.F.R. § 1910.1030(d)(4)(iii)(A)(1); WAC 296-823-14060. [↑](#footnote-ref-7)
8. 29 C.F.R. § 1910.1030(d)(4)(iii)(A)(1); 29 C.F.R. § 1910.1030(g); WAC 296-823-14025. [↑](#footnote-ref-8)
9. 29 C.F.R. § 1910.1030(d)(4)(iii)(B)(1). See also WAC 296-823-14025. [↑](#footnote-ref-9)
10. 29 C.F.R. § 1910.1030(d)(4)(iii)(B)(2); WAC 296-823-14045. [↑](#footnote-ref-10)
11. WAC 296-823-461. [↑](#footnote-ref-11)
12. RCW 70.95.165(1). See also WAC 480-70-431(2). [↑](#footnote-ref-12)
13. WAC 480-70-471(1). [↑](#footnote-ref-13)
14. <http://www.lni.wa.gov/wisha/rules/bbpathogens/html/296-823-150.htm> (Current as of August 16, 2012). [↑](#footnote-ref-14)
15. RCW 70.95k.030(1). [↑](#footnote-ref-15)
16. 29 C.F.R. 1910.1030(c); WAC 296-823-11010. [↑](#footnote-ref-16)
17. WAC 296-823-14000 through -14065. [↑](#footnote-ref-17)