

VETERANS ADMINISTRATION MARYLAND HEALTH CARE SYSTEM **BALTIMORE DIVISION** 10 NORTH GREENE STREET

BALTIMORE, MD 21201

GEN00025.2

PATHOLOGY & LABORATORY MEDICINE SERVICE

Disposal of Hazardous Waste Version 2

General Procedure Manual # GEN00025

Purpose:

To establish guidelines for appropriate disposal of hazardous waste within Pathology and Laboratory Medicine Service.

Routine & Glass Waste, Hazardous Sharps, Biohazardous Waste:

- (1) Routine Waste (non-RMW) is placed in White/clear trash bags:
- (a) Paper Towels, Empty Reagent Bottles, Shipping Containers & Packing Material, etc.
 - (b) Paperwork that does NOT contain a patient's full name & SSN-9.
- (c) Glass Slides (stained and unstained), glass bottles or jars, and other noncontaminated glass waste including broken glass are placed into designated cardboard discard boxes. These boxes will be taped shut when full and discarded with the Routine Waste (not the RMW trash).

Note: Broken glass must be handled carefully with forceps or dustpan.

(2) Hazardous Sharps (contaminated glass pipets and transfer devices, needles, scalpels, etc.) are placed into red hard-sided sharps disposal boxes.

Note: Sharps disposal boxes must not be over-filled nor used for anything other than these intended sharps materiel.

- (3) Bio-Hazardous Regulated Medical Waste (RMW):
- (a) Red Bio-Hazard Waste Bags are used for the discard of all blood and body fluid specimens, and any potentially infectious waste (see previous Definition for RMW). These bags must meet the California Standard for tear and puncture resistance.

Note: Do not allow these red bio-hazard bags to overflow.



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- (b) All specimen transport bags with a bio-hazard label are discarded as RMW, regardless of contamination.
- (c) Paperwork/labels with a patient's full name & SSN-9 are discarded as RMW, but only if a SHRED-IT box is not available.
- (d) Red Bio-Hazard Waste Bags are tied shut and double-bagged if leaking. They are placed in rigid leak-proof 'bio-hazard labeled' bins that have solid tight-fitting covers. The bins are moved to the soiled terminal room outside the laboratory for storage until final disposal.

(e) Hazardous Waste Disposal Table:

| Department | Waste Type | Handling | Final Disposal |
|--------------------------|--|---|--|
| Chemistry | Blood / Body Fluid Specimens | Discard into RMW bags. | Autoclaved & shredded. |
| Cytology | Body Fluid Specimens | Discard into RMW bags. | Autoclaved & shredded. |
| Hematolog y | Blood / Body Fluid Specimens | Discard into RMW bags. | Autoclaved & shredded. |
| Histology | Tissue Specimens | Discard into RMW bags, double-bagged; placed in RMW discard boxes. | Incinerated. |
| Histology | Formalin Waste | Chemically neutralized & solidified. | Non-hazardous waste stream. |
| Microbiolog y | Specimens / Cultures | Discard into RMW bags. | Autoclaved & shredded. |
| Microbiolog y | Blood Culture glass bottles & Thio tubes | Discard into RMW bags, double-bagged; placed in RMW discard boxes. | Autoclaved & shredded. |
| Molecular Diagnostics | GeneXpert RT- PCR cartridges (mixed waste) | Large, tall, black, plastic labeled "Hazardous Waste" Can in 40-148. | Sealed and Labeled in Storeroom for Pick-up by Industrial Hygienist. |
| Morgue Morgue | Body Parts Formalin Waste | Discard into RMW bags, double-bagged; placed in RMW discard boxes. Chemically neutralized & solidified. | Incinerated Non- hazardous waste stream. |

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References:

- 1. Pathology and Laboratory Medicine Service- Infection Control Policy 512-113/PL-002, March 2016
- 2. VAMHCS Policy 512-138/ENG-007, subject: Utility Systems Management Plan, August, 2013
- 3. Centers for Disease Control and Prevention, subject: Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings 2007.
- 4. SOP No. 113/PL-006, subject: Laboratory Safety Plan State of Maryland Regulations, COMAR 26.13.11, subject: Special Medical Waste
- 5. VAMHCS Policy 512-11/COS-IC-002, subject: Blood borne Pathogen Exposure Control Plan



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| ADOPTE | D , | Author of Procedure/Policy | Chief of Service |
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| 06/05/200 |)7 | Paul D. Gruver, MT | Signature: Dong H. Lee M.D. |
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REVISION HISTORY

| Date revised | Revision # | Changes made | Signature |
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| 11/12/17 | 2 | Reformatted, changed document control number from GEN00026 and tittle name from Glove Disposal Policy, updated waste disposal requirements | LLR |
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