



Medical Center

Department of Clinical Laboratory & Anatomic Pathology

DIRECTIVE MEMORANDUM

To: All Laboratory Staff

From: Cedric Bol, Director of Clinical Laboratory Services; Stacie Kahyai, Assistant Director of Clinical Laboratory Services; Dr. Ronaldo Gnass, MD – Chief Pathologist

Date: 02/15/25

Subject: Proper Disposal of Biohazard and Pharmaceutical Waste

Ensuring the proper disposal of biohazard waste is critical to maintaining a safe and compliant laboratory environment. It has come to my attention that there are inconsistencies in the handling and disposal of biohazard materials. Effective immediately, all laboratory staff are required to adhere strictly to the following biohazard waste disposal procedures.

SBAR (Situation, Background, Assessment, Recommendation):

Situation: Biohazard and pharmaceutical waste from RUHS was found in regular trash bags at the county waste yard.

Background: RUHS will face penalties for inappropriately disposing of waste. Regulatory agencies such as OSHA and the CDC have strict guidelines on handling biohazardous materials. Failure to comply with these guidelines poses significant health risks and regulatory consequences.

Assessment: An immediate mitigation plan must be implemented to prevent any further biohazard or pharmaceutical waste from entering landfills. Non-compliance with biohazard disposal procedures has been observed, increasing the risk of exposure, contamination, and potential violations.

Recommendation: All units need to re-educate staff on the proper disposal and bins for sharps, pharmaceuticals, and biohazard waste at each huddle immediately. For this weekend, to mitigate risk in high-risk areas, the ICU and the ED will have all trashcans changed to biohazard red bags. Sharps and pharmaceuticals should still be disposed of in the normal sharps/pharmaceutical waste bin.

Directive for Biohazard Waste Disposal:

1. **Sharps Disposal:** All sharps (e.g., needles, scalpels, broken glass) must be disposed of in designated puncture-resistant sharps containers. These containers must not be



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overfilled and should be replaced when they reach the designated fill line. Please contact EVS immediately for replacement.

2. **Solid Biohazard Waste:** Contaminated gloves, paper towels, gauze, and any other solid biohazard waste must be placed in appropriately labeled biohazard waste bags. These bags should be securely sealed before disposal.
3. **Liquid Biohazard Waste:** Any liquid biohazard waste must be decontaminated following approved protocols before disposal in designated biohazard liquid waste containers.
4. **Specimen Disposal:** Expired or unused specimens must be disposed of in accordance with laboratory policy and regulatory guidelines to prevent contamination or exposure.
5. **Labeling and Segregation:** All biohazard waste must be properly labeled and segregated according to type to ensure compliance with safety protocols and regulations.
6. **Regulatory Compliance:** All staff must comply with OSHA, CDC, and institutional policies regarding biohazard waste handling and disposal. Additionally, all staff must be familiar with the Housewide Policy HW 1105 Blood Borne Pathogen (BBP) Exposure Prevention Plan and the Environmental Services Policy EVS 011 Infection Waste Handling. These policies can be found on the RUHS Intranet.

Expectations and Compliance:

Failure to follow these procedures will result in corrective actions, including retraining, formal warnings, or further disciplinary measures as necessary. Compliance with these guidelines ensures the safety of all laboratory personnel and helps us meet regulatory requirements.

Your cooperation and diligence in this matter are essential. Please direct any questions or concerns to your immediate supervisor or the Laboratory Directors.

For Reference a Quick Guide to proper Waste Management is posted on the wall in front of Cedric's office.

Thank you for your attention to this important directive.