

## Clinical Process Instruction Manual

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### Hazardous Waste Disposal Process Instruction

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#### Policy:

Trillium Gift of Life Network (TGLN) ensures hazardous waste, including biohazardous waste is disposed of in accordance with *Ontario Regulation 347, General – Waste Management*, the *Occupational Health and Safety Act*, *Ontario Regulation 67/93, Healthcare and Residential Facilities Regulation*, and *Ontario Regulation 833, Control of Exposure to Biological and Chemical Agents*. TGLN contracts this activity to an approved third party which assists with completing the waste manifests and destruction of the hazardous waste.

#### Process:

1. Staff shall ensure biohazardous waste, including anatomical waste, fluid waste, and sharps waste is contained separately from other waste at the point of origin.
2. Staff determine if the waste being disposed of is hazardous by consulting the examples provided in the *Stericycle Biomedical and Pharmaceutical Waste Handling Procedures* and disposes of it in the appropriate container. See Exhibit 1.
3. Staff should don appropriate personal protective equipment (PPE) to dispose of hazardous waste. See *Routine Practices and Personal Protective Equipment Process Instruction, CPI-9-1504*.
4. Staff shall ensure waste is contained to prevent leakage:
  - 4.1 Staff shall use either a plastic bag or rigid container with a non-removable lid;
  - 4.2 The bag or container shall be capable of withstanding the weight of the biomedical waste without tearing, cracking or breaking;
  - 4.3 Waste bags should be of a thickness that will resist puncture, leaking and breaking, and they should be waterproof;
  - 4.4 Double-bagging should only be necessary when the first bag becomes stretched or damaged, or when waste has spilled on the exterior;
  - 4.5 When a bag is three-quarters full, it should be closed and tied in a manner that prevents contents from escaping.

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#### Anatomical Waste

5. Staff shall dispose of organs or other anatomical waste in accordance with the *Storage and Disposal of Organs Process Instruction, CPI-9-611*.

#### Sharps/Biohazardous Waste

6. Staff shall place sharps waste into a sharps container labelled with the words “sharps waste” or with the international biohazard symbol and the word “BIOHAZARD”. See Exhibit 2.
7. Sharps containers are available in the following locations:
  - TGLN’s Cold Storage and Clinical Supply Room
  - TGLN’s Utility Room
  - Forensic Services and Coroners Complex Tissue Recovery Suite
  - Hospital operating rooms
8. Portable/disposable sharps containers are available for Tissue Recovery Coordinators. These are available in TGLN’s Sterile Supply (Ocular Tissue) Room. These are shipped to remote staff.
9. When the sharps container is approximately 2/3 full (or less), tape closed or securely snap shut the container so that it is ready for disposal. This is done to preclude the loss of contents. See *Safe Handling, Use, and Disposal of Sharps Process Instruction, CPI-9-1509*.
10. A third party is contracted to pick up biohazardous waste from TGLN on a monthly basis. The Inventory Assistant may request more frequent pick-ups, as needed.
11. The contracted third party completes the waste manifest and a staff member signs the manifest. See Exhibit 3.
12. The Administrative Assistant – Provincial Resource Centre (PRC) Organ is responsible for arranging to pay hazardous waste fees.

#### Pharmaceutical Waste

13. Staff shall dispose of pharmaceutical waste in the white “Pharmaceutical Waste” bin located in the Cold Storage and Supply Room.

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14. A third party is contracted to pick up pharmaceutical waste from TGLN on a monthly basis. The Inventory Assistant may request more frequent pick-ups, as needed.
15. The contracted third party completes the waste manifest and a staff member signs the manifest. See Exhibit 3.
16. The Administrative Assistant – PRC Organ is responsible for arranging to pay pharmaceutical waste fees.

#### General Waste

17. Staff shall dispose of non-hazardous waste in either the garbage or recycle bin, as deemed appropriate.

#### Records:

Record Name	Form No. (if applicable)	Record Holder	Record Location	Record Retention Time (as a minimum)
Hazardous Waste Manifest	-----	PRC	PRC	16 years






















#### References:

- Standards for Tissue Banking, American Association of Tissue Banks, United States, 14th edition, 2017. J3.600
- *Stericycle Biomedical and Pharmaceutical Waste Handling Procedures, Canada, 2016.*
- PIDAC: Best Practices for Environmental Cleaning for Infection Prevention and Control, 3<sup>rd</sup> Edition, 2018
- *Storage and Disposal of Organs Process Instruction, CPI-9-611*
- *Sharps Handling, Use, and Disposal Process Instruction, CPI-9-1509*

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#### Exhibit 1: Sample Stericycle Biomedical and Pharmaceutical Waste Handling Procedures

 <b>Stericycle</b> Protecting People. Reducing Risk.™		<b>Biomedical and Pharmaceutical WASTE HANDLING PROCEDURES</b>			PUTTING WASTE IN ITS PLACE IS EVERYONE'S RESPONSIBILITY. PROTECTING PEOPLE. REDUCING RISK.	
WASTE	PRIMARY COLLECTION CONTAINER	OVERPACK FOR TRANSPORT	LABELLING	STORAGE		
<b>BIOMEDICAL: SHARPS WASTE</b> <input type="checkbox"/> needles with or without syringes <input type="checkbox"/> guide wires (taped up) <input type="checkbox"/> scissors <input type="checkbox"/> lancets <input type="checkbox"/> insulin pen needles <input type="checkbox"/> orange sticks <input type="checkbox"/> scalpels <input type="checkbox"/> razors <input type="checkbox"/> vacutainer with needle <input type="checkbox"/> empty, broken ampoules and vials <input type="checkbox"/> spikes from IV tubing		Must be yellow, sealed, leak-proof and puncture resistant.		Place sharps containers in a lined, reusable container or cardboard box. Liner must be yellow, securely tied. Tape box flaps closed.		Refrigeration not required.
		Do not remove tear strip from pail lid.	N/A	Lid must be securely snapped shut.	Place labels on side, not top of container.	
<b>BIOMEDICAL: NON-ANATOMICAL WASTE</b> <input type="checkbox"/> blood and blood products <input type="checkbox"/> items saturated with blood that might release liquid if compressed <input type="checkbox"/> any tubing containing blood or bloody body fluids <input type="checkbox"/> live or attenuated vaccines		Bag must be yellow with biohazard symbol.		Tie bag securely, place in reusable container or cardboard box. Tape box flaps closed.		If stored for more than 4 days, refrigerate at 4°C or below.
		Do not remove tear strip from pail lid.	N/A	Lid must be securely snapped shut.	Place labels on side, not top of container.	
<b>BIOMEDICAL: ANATOMICAL WASTE</b> <input type="checkbox"/> tissues, organs and body parts (not including teeth, hair and nails)		Bag must be red with biohazard symbol.		Tie bag securely, place inside fibre drum. Tape drum lid closed.		Refrigerate at 4°C or below immediately upon storage.
		Do not remove tear strip from pail lid.	N/A	Lid must be securely snapped shut.	Place labels outside of container. Do not cover printed symbols.	
<b>BIOMEDICAL: CYTOTOXIC WASTE</b> <input type="checkbox"/> anti-neoplastic drugs used in the treatment of cancer. Includes: leftover or unused cytotoxic drugs, IV bags, tubing, needles, tissues, gloves and other items that have come in contact with a Cytotoxic drug.  Sharps used for Cytotoxic injections must go into an approved Cytotoxic sharps container (red).		Bag must be red with biohazard symbol.		Tie bag securely, place in reusable container or cardboard box. Tape box flaps closed.		Refrigeration not required.
		Do not remove tear strip from pail lid.	N/A	Lid must be securely snapped shut.	Place labels outside of container. Do not cover printed symbols.	
<b>PHARMACEUTICAL WASTE</b> <input type="checkbox"/> pharmaceutical products such as vials, injectables, ampoules, ointment pots, tubes, jars, bottles, pills, oral liquids, eye drops, inhalers, empty IV or medication bags with confidential patient information on them.		Box must be lined with red or clear bag.	N/A	Bag must be securely tied. Tape box flaps closed.		Refrigeration not required.
		Pail must be white with Rx label. Do not remove tear strip from pail lid.	N/A	Lid must be securely snapped shut.	Place labels outside of container. Do not cover printed symbols.	
<b>INFECTIOUS WASTE—A MEDICAL WASTE KNOWN TO CONTAIN AN INFECTIOUS SUBSTANCE PER TDG REGULATIONS. THE OVERPACK CONTAINER MUST BE A DISPOSABLE CONTAINER (PAIL OR CARDBOARD BOX) AND NEEDS TO BE LABELLED WITH THE INFECTIOUS LABEL.</b>			All packaging must be compliant with MOE, C4 guidelines and the applicable CGSB standards.		P0665WS01/120404	

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#### Exhibit 2: International Biohazard Symbol





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### Exhibit 3: Sample Hazardous Waste Manifest

MOVEMENT DOCUMENT / MANIFEST DOCUMENT DE MOUVEMENT / MANIFESTE										DC20079-9			
<b>A Generator / consigneur</b> Producer / expéditeur TRILLIUM GIFT OF LIFE NETWORK 1004246-001 ON3081112										<b>B Carrier</b> Transporteur ...E, ULCO ...		<b>C Receiver / consignee</b> Réceptionnaire / destinataire ...	
<b>Shipping details / Adresse postale</b> TORONTO ON ...										<b>Port of entry / Point d'entrée</b> ...		<b>Company name / Nom de l'entreprise</b> ...	
<b>Waste description / Description des déchets</b> 312P (BIOMEDICAL WASTE N.O.S.) 261A PHARMACEUTICAL WASTE										<b>Quantity received / Quantité reçue</b> 15 KG 3 KG		<b>Handing over / Délivrance</b> 02 02	
<b>Signature / Signature</b> ...										<b>Signature / Signature</b> ...		<b>Signature / Signature</b> ...	