

Environmental Standard Operating Procedure

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Title: Medical Waste Operations

1.0 PURPOSE

The purpose of this Environmental Standard Operating Procedure (ESOP) is to provide environmental guidelines for the management of medical waste operations.

2.0 APPLICATION

This guidance applies to those individuals working in medical operations that generate medical waste to include: hospital, medical and dental offices, Battalion Aid Stations (BAS), clinics, and veterinary offices aboard MCAGCC.

3.0 REFERENCES

- 29 CFR 1910.1030 (Code of Federal Regulations)
- CALIFORNIA HEALTH AND SAFETY CODE, SECTIONS 117600 – 118360
MEDICAL WASTE MANAGEMENT ACT
- BUMEDINST 6280.1B
- Combat Center Order 5090.5C, Subject: Integrated Contingency and Operations Plans (ICOP) for Marine Corps Air Ground Combat Center

4.0 PROCEDURE

4.1 Discussion:

Medical waste operations are regulated by federal, state and local laws to protect health care staff and others from exposures to blood-borne pathogens (BBPs). Management of medical waste helps prevent the transmission of blood-borne diseases. The primary concern in medical waste management is the reduction of exposure to blood-borne pathogens, tracking of waste materials, and training of personnel in order to minimize impact to human health and the environment.

Requirements for minimizing the impact includes maintaining a log of waste generated and disposed of, training of personnel, handling procedures, labeling and storage procedures.

4.2 Operational Controls:

1. Separate Regulated Medical Waste (RMW) from other waste at its point of origin.
2. RMW shall be placed in containers, bags, or sharps containers (as appropriate for the waste) that are either labeled with the universal biohazard symbol and the word "BIOHAZARD" or red in color.

3. Line containers with labeled and/or color coded red plastic bags of sufficient thickness (typically 3 millimeters), durability, puncture resistance, and burst strength to prevent rupture or leaks.
4. Dispose of used and/or unused sharps waste into rigid, puncture resistant sharps containers that are appropriately labeled.
5. Never clip, cut, bend or recap needles, or overfill sharps containers.
6. Remove and seal sharps containers when $\frac{3}{4}$ full or above fill line.
7. Close and seal sharps container before removal or replacement to prevent spillage or protrusion of contents during handling, storage, or transport.
8. Label sharps and RMW containers with the unit's name, a point of contact and phone number.
9. Sharps containers ready for disposal shall be placed in a second container (plastic bag or rigid box) which is labeled and/or color coded.
10. All disposals of sharps and RMW containers must be turned into MCAGCC's permitted storage facility (Naval Hospital Twentynine Palms) the same day the container is closed out.
11. Permitted RMW storage area(s) shall be temperature controlled and constructed to prevent pest access, and to allow for easy cleaning.
12. Permitted RMW storage area(s) shall be labeled in English, "CAUTION—**BIOHAZARDOUS WASTE STORAGE AREA—UNAUTHORIZED PERSONS KEEP OUT,**" and in Spanish, "**CUIDADO—ZONA DE RESIDUOS—BIOLÓGICOS PELIGROSOS—PROHIBIDA LA ENTRADA A PERSONAS NO AUTORIZADAS** and a Universal Biohazard Sign.

4.3 Documentation and Record Keeping:

1. The disposal of sharps and RMW containers must be turned into MCAGCC's permitted storage facility Naval Hospital Twentynine Palms and documented within the Naval Hospital's medical waste log book.
2. The permitted RMW storage area(s) shall maintain a medical waste log book.

4.4 Training:

All affected personnel must be trained in this Environmental Standard Operating Procedure and the following:

1. Initial BBP and refresher training.
2. Hazard Communication/Globally Harmonized System.
3. General Environmental Awareness Training.

4.5 Emergency Preparedness and Response Procedures:

Refer to Combat Center Order 5090.5C, Subject: Integrated Contingency and Operations Plans (ICOP) for MCAGCC, MAGTFTC Environmental Compliance and Protection Standard Operating Procedure.

4.6 Inspection and Corrective Action:

The Environmental Compliance Coordinator (ECC) shall ensure the designation of personnel to perform inspections. The ECC shall ensure immediate corrective action for deficiencies noted during weekly

inspections. Actions taken to correct each deficiency shall be recorded on the weekly inspection sheet (including Work Request number(s)). Designated personnel shall conduct weekly inspections using this ESOP as guidance.

Medical Waste Operations – ECC/Unit Inspection Checklist

Date:	Time:
Installation:	Work Center:
Inspector's Name:	Signature:

Inspection Items	Yes	No	Comments
1. Is the Regulated Medical Waste (RMW) properly segregated from other waste at its point of origin?			
2. Is the RMW placed in containers, bags, or sharps containers that are either labeled with the universal biohazard symbol and the word "BIOHAZARD" or red in color?			
3. Are containers lined with labeled or color coded red plastic bags of sufficient thickness (typically 3 millimeters) to prevent rupture or leaks?			
4. Are all used and/or unused sharps waste placed into rigid, puncture resistant sharps containers that are appropriately labeled?			
5. Are all sharps waste disposed of in sharps container without clipping, cutting, bending, or recapping?			
6. Are sharps containers less than ¾ full and/or below the fill line			
7. Are all sharps and RMW containers properly labeled?			
8. Have all sharps & RWM container(s) been turned into MCAGCC's permitted storage facility (Naval Hospital Twentynine Palms) the same day of close out?			
9. Is the permitted RMW storage area temperature controlled and constructed to prevent pest access, and to allow for easy cleaning.			
10. Is the permitted RMW storage area labeled in English, "CAUTION— BIOHAZARDOUS WASTE STORAGE AREA—UNAUTHORIZED PERSONS KEEP OUT, " and in Spanish, " CUIDADO—ZONA DE RESIDUOS—BIOLÓGICOS PELIGROSOS—PROHIBIDA LA ENTRADA A PERSONAS NO AUTORIZADAS and a Universal Biohazard Sign.			

Inspection Items	Yes	No	Comments
11. Is the RMW properly labeled or color-coded and placed into rigid, leak-proof container(s) prior to transportation to off-site facility?			
12. Is the medical waste log book available for review?			
13. Validate with the permitted RMW storage facility (Naval Hospital Twentynine Palms) that medical waste turn-ins meet the ESOP operational controls. <i>NOTE: document what unit and/or facility is not complying.</i>			
14. Are medical waste permit(s) available for review (If applicable)?			
15. Is the Medical Waste Management Plan available for review?			
16. Are medical waste records available for review?			
17. Are training and inspection records maintained and available for inspection?			

ADDITIONAL COMMENTS:

CORRECTIVE ACTION TAKEN:

Environmental Compliance Coordinator

Name: _____

Signature: _____

Date: _____