

University of Connecticut Health Center
Research Safety Office
(LG-035, x2723)

Regulated Medical Waste (RMW) Definitions & Disposal Guidance

I. DEFINITIONS

These definitions are presented in the context of existing UCHC waste management programs in order to provide UCHC activities definitions on the types of medical wastes (often referred to as Regulated Medical Wastes [RMW] or Red Bad Waste) that they must segregate and package to comply with CT Department of Environmental Protection (CT DEP) Regulations on biomedical wastes. In case of questions, the full CT DEP biomedical waste definitions, exclusions, requirements, etc. must be consulted and understood to verify compliance. For more details, UCHC activities should contact the UCHC Research Safety office (x2723) and/or Section 22a-209-15 (Biomedical Waste) of the Regulations of Connecticut State Agencies.

A. Infectious Wastes:

- 1) Any discarded culture or stock of infectious agents and associated biologicals, including human and animal cell cultures from clinical, hospital, public health, research and industrial laboratories; any waste from the production of biologicals; any discarded etiologic agent; any discarded live or attenuated vaccine or serum; and any discarded culture dish or device used to transfer, inoculate, or mix cells cultures. **THIS CLASS OF WASTE MUST BE AUTOCLAVED PRIOR TO BEING PLACED IN AN RMW BOX FOR DISPOSAL.**
- 2) Any body fluid, waste human blood, or waste blood product, any container of any of the foregoing, and any disposable item that is saturated or dripping with a body fluid or that was saturated or dripping with a body fluid and has since caked with dried body fluid. "Body fluid" means any substance which emanates or derives from the human body, including but not limited to blood, semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid and pericardial fluid, but excluding feces, urine, nasal secretions, sputum, sweat, tears, vomitus, saliva, and breast milk, unless any such excluded substance contains visible blood or is isolation waste.
- 3) Any discarded used sharp and any residual substance therein and
- 4) Any discarded unused hypodermic needle, scalpel blade, suture needle or syringe. ("Sharp" means an item capable of causing a puncture or cut, including but not limited to a hypodermic needle, scalpel blade, and broken glassware, provided that (1) broken glassware shall not be deemed a sharp unless it is known to be contaminated with an infectious agent, and (2) a syringe, regardless whether a hypodermic needle is attached thereto, shall be deemed a sharp.)
- 5) Any discarded animal carcass, animal body part or animal bedding, when such carcass, part or bedding is known to be contaminated with or to have been exposed to an infectious agent.
- 6) Isolation waste means discarded material contaminated with body fluids from (a) humans who are isolated to protect others from a highly communicable disease, and (b) animals which are isolated because they are known to be infected with an infectious agent capable of causing a highly communicable disease. A highly communicable disease is one listed in Biosafety Level 4

of the Centers for Disease Control/National Institutes of Health Guidelines entitled Biosafety in Microbiological and Biomedical Laboratories.

- 7) Any material collected during or resulting from the cleanup of a spill of infectious or chemotherapy waste.
- 8) Any waste which is neither a hazardous waste pursuant to Section 22a-115 of the General Statutes nor a radioactive material subject to Section 22a-148 of the General Statutes and which is mixed with infectious waste.

B. Pathological Waste:

Means any human tissue, organ, or body part removed during surgery, autopsy or other medical procedure. Pathological waste does not include formaldehyde or other preservative agent, or a human corpse or part thereof regulated pursuant to Section 7-64 or Chapter 368I, 368j or 368k of the General Statutes. **SPECIAL ARRANGEMENTS MUST BE MADE BY THE GENERATING ACTIVITY WITH FACILITIES MANAGEMENT FOR THE DISPOSAL OF PATHOLOGICAL WASTES IN CONTAINERS HAVING SPECIAL EXTERIOR PATHOLOGICAL WASTE LABELS.**

C. Chemotherapy Waste:

Means waste which has come in contact with an antineoplastic agent during the preparation, handling or administration of such an agent. A container which is or has been used to contain such an agent shall be deemed chemotherapy waste even if such container is empty.

II. KEY POINTS ON UCHC RMW DISPOSAL:

- 1) Facilities Management (x2125) provides every activity with medical waste management services. Such services include: (1) collection of RMW containers segregated by the clinic, laboratory, etc.; (2) maintaining the contracts that are necessary for the transport and treatment of such wastes; (3) maintaining the paperwork audit trail required by the regulations; and, (4) making required reports.
- 2) Responsibilities of UCHC activities that may generate biomedical waste include:
 - a. Identify and segregate medical wastes based on the above definitions by always:
 - placing sharps promptly into authorized UCHC sharps containers such as those that come pre-labeled from the Warehouse (when full, these containers are to be securely closed by the user and placed in the top portion of an RMW box).
 - placing infectious waste in the red bag lined regulated medical waste (RMW) boxes obtained by calling Facilities Management (x2125). Make sure that cultures and stocks have been autoclaved and that any container(s) with over 20cc of liquid has been placed in a break-resistant and tightly lidded or stoppered container prior to placement into the RMW box. Discharge to the sanitary sewer of liquid infectious wastes is permissible provided that universal precautions are followed and aerosol formation is minimized.

- keeping RMW boxes in their work area so that they are only accessible to authorized personnel until collected by Facilities Management (call x2125 for new RMW boxes and collection of filled boxes).
 - coordinating any pathological waste disposal needs in advance with Facilities Management so that only properly marked Pathological Waste Boxes are used.
 - returning unused unit doses of chemotherapy drugs to Pharmacy and calling the Environmental Health and Safety Office (EHSO) for the disposal of chemotherapy wastes generated when a chemotherapy spill has been cleaned by the activity using the chemotherapy spill kit. The EHSO collects such chemotherapy waste from Pharmacy and arranges for disposal as hazardous chemical waste or RMW, as appropriate.
- b. Other general procedures to be followed when managing biomedical waste include:
- Biomedical waste must not be compacted or subjected to violent mechanical stress during segregation, storage or transport.
 - Contact Facilities Management or the Research Safety Office for assistance with medical waste items that are oversized or require special procedures for proper movement or disposal.
 - Remember biomedical waste mixed with hazardous chemical wastes is identified and segregated as hazardous chemical wastes and is collected by the Environmental Health and Safety Office (x2723).
 - Biomedical waste mixed with radioactive material is identified and segregated as radioactive material waste and is collected by the Radiation Safety Office (x2250).
 - Recognize that normal trash from medical facilities receives close examination at disposal facilities. Items that have an appearance of being medical waste can result in rejection of the whole waste load and its return. Activities, especially laboratories, should continue to dispose of items commonly associated with cultures and stocks (e.g., Pasteur pipettes, serological pipettes, culture tubes, culture flasks, etc.) in RMW boxes even when they have not contacted infectious materials. When such items have been used with culture and stocks as defined in IA above, they must be autoclaved prior to being placed in the RMW box. Our experience over the years continues to be that our RMW boxes provide suitable puncture resistant containment for items such as Pasteur pipettes. More general use laboratory glassware items that have not contacted potentially infectious materials should continue to be discarded as normal trash with suitable packing (e.g., glass disposal boxes available from the Warehouse) to protect trash handlers from a cut in case of breakage.

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