

## Biomedical Waste Policy

### General

The University of Maine biomedical waste management program establishes procedures for the disposal of Regulated Medical Waste. Regulated Medical Waste is generated in research and teaching laboratories as well as from emergency and routine medical procedures.

### Regulatory Guidance

- Maine Department of Environmental Protection (DEP), Biomedical Waste Management Rules (06-096 CMR 900).

### Requirements

The Maine Biomedical Waste Management Rules apply to infectious and pathogenic wastes generated within the state of Maine. Biomedical waste includes the following:

- human blood, blood products, body fluids, tissues, organs and anatomical parts;
- waste saturated with human blood, blood products, or body fluids;
- discarded "sharps" used in patient, animal, or cadaver care or in medical or biomedical research laboratories;
- cultures and stocks of infectious agents and devices used to transfer, inoculate, and mix cultures;
- discarded clinical specimens and the associated containers or vials;
- discarded biologicals and waste from the production of biologicals;
- recombinant DNA wastes;
- carcasses, body parts, bedding, or other waste generated by research facilities from animals containing organisms or agents not usual to the normal animal environment and which are pathogenic or hazardous to humans;
- cytotoxic drugs not identified as hazardous waste;
- material that has come in contact with and has no more than a trace of cytotoxic agents.

Biomedical waste does not include the following:

- urine or feces;
- wastewater treatment sludge and septage;
- water samples used for and wastes from routine screening;
- animal carcasses, anatomical parts, bedding, or other waste generated in the routine handling of animals containing organisms or agents normally found in the animal environment;
- Band-Aids and other blood spotted items such as feminine hygiene products.

Liquid cultures of bacteria, viruses, etc. should be autoclaved or inactivated with Clorox and discharged to the sewerage system.

Solid waste must be collected in red plastic bags, clearly marked with the "Biohazard" symbol.

Needles and any other contaminated "sharps" must be placed in properly labeled, leak-proof, and puncture-resistant cardboard or hard plastic containers for disposal. Sharps containers should never be filled more than 2/3 full and they should be closed before disposal.

Biohazard labels are used to signify the presence of biological hazards and must be used on all waste containers or shipping cartons.

Biomedical waste storage areas must be clearly labeled with a biohazard sign. All biomedical waste must be stored in such a manner that it will not be inadvertently removed by a custodian for release as ordinary trash

## Responsibilities

**The Department of Safety and Environmental Management** is responsible for coordinating waste disposal services, including the collection and manifesting of biomedical waste on the Orono campus.

**Departments** are responsible for conducting employee training within their department for all employees who handle or package biomedical waste.

**Employees** are responsible for attending required training, proper handling of potentially infectious materials, and following written guidelines for disposal of biomedical and contaminated waste.

All employees who handle or package biomedical waste must be trained. New personnel may be trained by more experienced personnel in an on-the-job setting. Training should also be provided annually as part of the department Hazard Communication or Bloodborne Pathogen training.

All biomedical waste training must include:

- type of waste generated in their area;
- waste handling, storage, and disposal procedures specific to their area that must address, at a minimum, the requirements of 06-096 CMR 900.12 Section 12 A-D;
- spill containment and cleanup procedures;
- name and phone number of the person responsible for biomedical waste in their area and the biosafety officer.

## Definitions

**Biologicals:** Preparations made from living organisms and their products, including serums, vaccines, antigens, and antitoxins.

**Contaminated Wastes:** Materials contaminated with blood or OPIM that do not meet the definition of biomedical waste (i.e., gloves, Band-Aids, gauze, sanitary napkins). These wastes are less hazardous than biomedical waste because they are not saturated with blood and will not release pathogens under normal circumstances. Contaminated wastes are not regulated by the DEP and

may be put in the regular trash.

***OPIM (Other Potentially Infectious Materials):*** Includes but is not limited to: vaginal secretions, semen, amniotic fluid, certain internal body fluids, body fluids visibly contaminated with blood, saliva from dental procedures, unfixed human tissues or organs, blood, organs or tissues from research animals experimentally infected with HIV or HBV, and HIV or HBV containing cultures or stocks.

***Recombinant DNA:*** In the context of this policy, recombinant DNA molecules are defined as: molecules that are constructed outside living cells by joining natural or synthetic DNA segments to DNA molecules that can replicate in a living cell, or DNA molecules that result from the replication of said constructed recombinant DNA molecules.

***Sharps:*** Items that may cause puncture wounds or cuts including but not limited to: hypodermic needles, syringes, scalpel blades, suture needles, disposable razors, capillary tubes, Pasteur pipettes, broken glassware, IV tubes with needles attached, and lancets.

NOTE: only "Sharps" used in patient, animal, or cadaver care or in medical or biomedical research laboratories are regulated as biomedical waste. All other sharps should be packaged in sealed puncture resistant containers before placing in the regular trash.

#### For Additional Information

- Contact your Department Safety Coordinator or Safety and Environmental Management at 207/581-4055.
- *The University of Maine Biomedical Waste Management Plan* - MP11190
- Biomedical Waste Guidance - MG11191
- Biohazard Spill Clean-up Procedure - MP11192

#### Document History

Date originally published: 02/25/97