Regulated Medical Waste (RMW) Definitions & Disposal Guidance

I. DEFINITIONS

These definitions are presented in the context of existing UConn Health’s waste management programs in order to provide 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 Energy and Environmental Protection (CT DEEP) Regulations on biomedical wastes. In case of questions, the full CT DEEP biomedical waste definitions (Section 22a-209-15 of the Regulations of Connecticut State Agencies) exclusions, requirements, etc. must be consulted and understood to verify compliance. For more details, UConn Health activities should contact Environmental Health & Safety (x2723) and/or Facilities Development & Operations x2125.

A. Infectious Wastes:

1) Any discarded culture or stock of known to be 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 know 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 material.

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 INDICATING THE CONTENTS MUST BE INCINERATED.**

**C. “Trace” Chemotherapy Waste:**

Means waste which has come in contact with an antineoplastic agent during the preparation, handling or administration of such an agent. Personal protective equipment (gloves, gowns, etc.) potentially contaminated with a chemotherapy agent must be disposed of as “trace” chemo waste. 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 RMW DISPOSAL:

1) Facilities Development & Operations (x2125) provides every activity with medical waste management services. Such services include: (1) collection of RMW containers segregated by the hospital, clinic, laboratory, etc.; (2) maintaining the contracts that are necessary for the proper transport and treatment of such wastes; (3) maintaining the paperwork audit trail required by the regulations; and, (4) making required reports.

2) Responsibilities of UConn Health 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 sharps containers (when full, these containers are to be securely closed by the user and placed in the top portion of a RMW container).
      • Placing infectious waste in the red bag lined regulated medical waste (RMW) containers 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.
      • Not over filling the collection containers and securely tying the inner liners prior to pick-up.
      • Keeping RMW containers in their work area so that they are only accessible to authorized personnel until collected by Facilities Development & Operations (call x2125 for new RMW containers and collection of filled containers).
      • Coordinating any pathological waste disposal needs in advance with Facilities Management so that only properly marked Pathological Waste Boxes (cardboard) are used.
      • Being familiar with the institution’s policies and procedures for the safe handling and disposal of pharmaceutical waste.
   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 Development & Operations x2125 or Environmental Health & Safety x2723 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 Environmental Health and Safety (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., serological pipettes, culture tubes, culture flasks, etc.) in RMW containers 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 container. 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.