POLICY

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Policy and procedures are established to ensure that infectious waste is handled and disposed of in accordance with all applicable laws and regulations.

PROCEDURE

1. Infectious waste must be handled and disposed of in accordance with all applicable laws and regulations of the Department of Environmental Health Services of the County of Los Angeles and any other local health laws and regulations.

2. Infectious waste must be separated from other waste at the point of origin in the producing facility.

3. The area for storage of infectious/biohazardous waste must be secured so as to deny access to unauthorized persons and must be marked with a warning sign on or adjacent to the exterior entry doors, gates or lids.

4. Medical wastes are hauled to a permitted offsite medical waste treatment facility, to a transfer station, or to another registered generator for consolidation. Hauling is by a registered hazardous waste transporter or by a person with an approved limited-quantity hauling exemption granted by the CA DHS Waste Management Division. When hauling medical wastes, the transporter carries the exemption form in the transporting vehicle.

5. A medical waste tracking document is maintained that includes the name of person transporting, number of waste containers, type of medical wastes and date of transportation. Tracking documents is kept a minimum of 3 years for large waste generators and 2 years for small generators.

6. “Medical waste” includes all of the following:
   a. Viral hazardous waste or sharps waste
   b. Waste which is generated or produced as a result of the diagnosis, treatment or immunization of patients.

7. “Biohazardous waste” means any of the following:
   a. Laboratory waste, including, but not limited to all of the following:
      1. Human specimen cultures from medical and pathological laboratories.
      2. Wastes from the production of bacteria, viruses or the use of spores, discarded live and attenuated vaccines and culture dishes and devices used to transfer inoculate and mix cultures.
   b. Waste containing any microbiologic specimens sent to a laboratory for analysis.
   c. Human surgery specimens or tissues removed at surgery, which are suspected by the attending physician and surgeon of being contaminated with infectious agents known to be contagious to humans.
d. Waste, which at the point of transport from site, at the point of disposal, or thereafter, contains recognizable fluid blood products.

e. Containers or equipment containing fluid blood products, which are known to be infected with diseases that are highly communicable to humans.

f. Waste containing discarded materials contaminated with excretion, exudates, or secretions from humans who are required to be isolated by infection control staff, the attending physician or surgeon or the local health officer, to protect others from highly communicable diseases.

8. “Sharps waste” means any device having acute rigid corners, edges or protrusions capable of cutting or piercing, including but not limited to the following:
   a. Hypodermic needles, syringes, blades, and needles with attached tubing.
   b. Broken glass items, such as Pasteur pipettes and blood vials contaminated with other medical waste.

9. Sharps containers will be placed close to the immediate area where sharps are used. Sharps container will be a rigid puncture resistant container which, when sealed, is leak resistant and cannot be reopened without great difficulty.

10. Sharps containers will be inaccessible to unauthorized persons. Security of containers in patient care area is maintained at all times.

11. Sharps containers will not be filled over manufacturer’s designated fill line or more than ¾ full.

12. Sharps containers will be labeled with the words “sharps waste” or with the international biohazard symbol and the word “Biohazard”.