

OOSH BULLETIN

Handling of Regulated Waste and Cleanup Protocol

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Handling of Regulated Waste

Bloodborne Pathogens are biological agents, which may be present in human blood and can cause disease. Examples of bloodborne pathogens include the hepatitis B virus, human immunodeficiency virus (HIV) and the organisms, which cause malaria. The Occupational Safety and Health Administration (OSHA) has implemented the Bloodborne Pathogens Standard, cited as 29 CFR 1910.1030, to reduce workers' occupational exposure to bloodborne pathogens. In addition to other



requirements, the standard requires employers to correctly dispose of regulated waste.

What is Regulated Waste?

Regulated Waste means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

Contaminated sharps are any device having acute rigid corners and are capable of cutting or piercing skin. Examples include hypodermic needles, suture needles, scalpel blades, dental wire, lancets, IV catheters and broken glass with blood. Any additional waste that a medical care professional believes may pose a risk may also be handled as regulated waste. Body waste products such as vomitus, urine, and feces without blood are not regulated waste. However, materials used to clean these up should be placed in a plastic bag for disposal in conventional garbage.

Does the Department of Education (DOE) Generate Regulated Waste?

The average DOE facility does not routinely generate regulate waste. The exceptions are those schools where Special Education Nurses may have to perform invasive procedures. However, to comply with OSHA's mandates, all DOE facilities are required to be prepared in the event that regulated waste is generated such as in the case of an accident involving blood and/or body fluids contaminated with blood.

What about Soiled Diapers and Band-aids?

Soiled diapers without blood are not regulated waste and can be disposed of in conventional garbage. They are not required to be individually wrapped prior to disposal; however, they must be disposed of responsibly in a plastic lined container with a fitted lid.

Waste disposables containing non-fluid blood i.e. unsaturated blood-stained band-aids, bandages, soiled sanitary napkins,

gauze, cotton and cotton swabs are not regulated waste. These can also be placed in conventional waste for disposal. In addition, disposable towels, gowns, paper sheeting and tongue depressors from a patient who is not in isolation to protect others from highly communicable disease are not regulated waste.

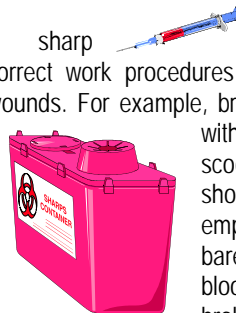
What should be done with the regulated waste?

Regulated waste must be disposed of according to federal, state, and local regulations. Regulated waste must be placed in closable and biohazard labeled or color-coded containers (red bags). In order to reduce odors, waste may be placed in plastic, sealable bags before disposal in a larger biohazard bag. Sharp items such as broken glass with blood may not be placed directly into red bags since they can cause the bag to tear. Contaminated sharps must be discarded immediately in containers that are puncture resistant. The sides and bottom must be leak proof and they must have a lid. Blood saturated dressings, paper towels and the like, should not be placed in sharp containers, but in red bags.

How Can I Safely Handle Regulated Waste?

Employees involved in handling body fluids or regulated waste must practice Universal Precautions. This means that they must assume that all body fluids and regulated waste are potentially infectious and they must protect themselves from contact with the material by wearing protective clothing. If the potential for splashes or soaking of clothes or shoes exists, then employees should wear the appropriate personal protective equipment i.e.: gloves, facial splashguards, or protective footwear.

If sharp materials are being handled, correct work procedures must be used to prevent puncture wounds. For example, broken glass must never be picked up with bare hands. Instead, a brush and scoop should be used. This method should always be practiced as an employee picking up broken glass with bare hands risks being cut and can spill blood onto the glass. The bloodied broken glass would then be classified as regulated waste and must be disposed of as such.



How Will Regulated Containers Be Distributed?

Each Custodian will receive two Regulated waste supply kits. One kit should be kept in the Custodian's office and the other in

the Nurses' office or medical personnel office. Each kit consists of (a) 1 2-gallon sharps container (b) 2 red bags (c) one corrugated cardboard box. One red bag must be used to line the cardboard box and the other used to hold regulated waste. The items in the kits, used or unused must be kept in a locked and secured location at all times.

How Should It Be Stored Before It Is Removed?

The labeled, red colored bag is used only for the disposal of regulated waste and the sharps containers for sharp objects such as hypodermic needles and lancets. Regulated waste must be placed in the red-bag lined box for storage prior to shipment. The containers must be kept in a manner and location, which affords protection from the weather and limits public access. The custodian must ensure that regulated waste is securely stored, that the storage area is marked with a biohazard sign, and that arrangements are made to remove the waste.

When Should Waste Be Removed?

A sharps container may be removed when the container is filled. The closed container must be placed inside of the red-bag lined box. Discretion should be used to determine when red bags are ready for disposal. If waste material will become odorous upon storage (i.e. vomitus or fecal matter with visible blood) or is readily decomposable, then it should not be stored for a lengthy period of time. Keep in mind that DOE facilities do not normally generate regulated waste. However, in a school setting, it is likely that an occasional accident involving blood and body fluids containing blood is possible. Given this, it is expected that each school will require 2-3 regulated waste pick-ups each year.

How is Regulated Waste Removed From My Facility?

For information regarding removal of regulated waste kits, information as to whether specific items are considered as regulated waste, or if waste containers used or unused are lost or destroyed, call the Office of Occupational Safety and Health at (718) 935-2319. When you phone in your request for removal, an appointment will be made for a licensed regulated waste hauler to seal and remove the waste box. At that time, a replacement kit will be provided if requested.

The Custodian or a designee will be asked to sign a tracking manifest signifying that the regulated waste hauler has removed the waste from the school. A signature is necessary since the waste must be accounted for at all times.

Where Does the Waste Go?

By law, regulated waste must be properly accounted for and disposed of at an approved and licensed disposal facility. After disposal, the facility must certify that the waste has been properly treated. This is done when the final page of the tracking manifest is returned to the Department of Education's Office of Occupational Safety and Health.

Cleanup Protocol

Employees' occupational exposure to bloodborne pathogens can be significantly reduced through a good housekeeping program which results in a clean and sanitary workplace. The following clean-up guidelines are taken from the Occupational Safety and Health Administration (OSHA) and the Centers for Disease Control and Prevention (CDC).



Universal Precautions

All employees must practice universal precautions. Universal precautions is an infection control method which requires employees to assume that all human blood and specified human body fluids are infectious for HIV, HBV, and other bloodborne pathogens and must be treated accordingly.

Work Practice Controls

Work practice controls reduce employee exposure in the workplace by minimizing or reducing the worker's exposure. Specific methods of work practice controls include the following:

- All procedures involving blood or other body fluids must be performed in such a manner as to minimize splashing, splattering, and the generation of droplets of these substances.
- Precautions must be taken to prevent injuries caused by needles and other sharp instruments or devices.
- Hands must *always* be immediately washed with soap and water when gloves are removed and immediately after skin contact with blood or other potentially infectious materials (OPIM) occurs. Appropriate antiseptic hand cleanser (towelettes) must be used when hand-washing facilities are not available.
- All equipment that may have become contaminated with blood or other potentially infectious materials must be decontaminated prior to servicing or shipping. If items are not completely decontaminated, they must be labeled.
- Employees are prohibited from eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses in areas of potential exposure.
- Infectious materials must be immediately placed in a labeled container and stored in designated areas. These storage areas must be secured, maintained and routinely inspected by Site Administrator or his/her designee.

General Clean-Up Guidelines

- Use the following guidelines to clean surfaces which have been contaminated with blood or OPIM.
- Remove and replace protective coverings such as plastic wrap and aluminum foil when contaminated.
- Always use mechanical means such as tongs, forceps, or a brush and a dust pan to pick up contaminated broken glassware; never pick up with hands even if gloves are worn.
- Place regulated waste in closable and labeled or color-coded containers. When storing, handling, transporting or shipping, place other regulated waste in containers that are constructed to prevent leakage.

- When discarding contaminated sharps place them in containers that are closable, puncture-resistant, appropriately labeled or color-coded, and leak proof on the sides and bottom.
- Ensure that sharps containers are easily accessible to authorized personnel. Sharps containers also must be kept upright throughout use, replaced routinely, closed when moved, and not be allowed to overfill.
- Never empty or reach into contaminated sharps disposal containers.
- Discard all regulated waste according to federal, state, and local regulations.

Cleaning Schedule

Each facility must ensure that the worksite is maintained in a clean and sanitary condition. Each site must determine and implement an appropriate written schedule for cleaning and method of decontamination based upon the location within the facility, type of surface to be cleaned, type of soil present, and tasks or procedures being performed in the area.

Cleaning and Decontamination Procedures

All equipment and work surfaces shall be cleaned and decontaminated with an appropriate disinfectant immediately after contact with blood or OPIM; after completion of procedures and after any spill of blood or other potentially infectious materials. Use the following cleaning procedures:

- Wear appropriate personal protective equipment.
- Use paper towels/absorbent materials to remove gross material and dispose of it as medical waste. Body fluids not contaminated with blood, can be placed in regular garbage. However, these must be placed in a plastic bag before disposal.
- Clean all contaminated areas and materials first with soap/detergent and water.
- An acceptable commercial disinfectant or germicide may be used for cleaning surfaces not contaminated with blood. For cleaning up blood, use a freshly made bleach solution (1 part bleach to 10 parts cold water). Make a fresh bleach solution daily or as needed.
- After the bleach solution has been in contact with the surface for 10 to 15 minutes, rinse the area with water. Do not place bleach solution directly on large amounts of protein matter such as blood, vomit, or feces, because noxious fumes may be produced.
- If a mop, broom or dustpan is used in the clean up, decontaminate it with a bleach solution.
- All bins, pails, cans and similar receptacles, which may be contaminated, should be inspected before discarding contents. If a receptacle is found to be contaminated with blood or OPIM, it should be immediately cleaned and decontaminated using the above procedures.

Regulated Waste Disposal

The following categories of waste require special handling and qualify as **regulated waste**:

- ▶ Liquid or semi-liquid blood or OPIM.
- ▶ Items which would release blood or OPIM in a liquid or semi-liquid state if compressed.
- ▶ Items that are caked with dried blood or OPIM and are capable of releasing these materials during handling.

Regulated Waste Must Be Disposed Of Using The Following Procedures:

Sharps

Sharps are defined as any device having acute rigid corners, edges or protuberances capable of cutting or piercing, including but not limited to needles, scalpels, dental wires, lancets, syringes, IV catheters, suture needles and broken glass with blood.

Contaminated Sharps Disposal

Contaminated sharps, or unused needles, must be discarded immediately. Containers for used sharps must be puncture resistant. The sides and the bottom must be leak proof. They must be biohazard labeled or color coded red to ensure that everyone knows the contents are hazardous. Containers for disposable sharps must have a lid, and they must be maintained upright to keep liquids and the sharps inside.

When disposing of contaminated needles and other contaminated sharps, they must not be sheared or purposely broken. PESH allows recapping, bending, and removal of contaminated needles only when procedures are required and no alternative is available. If such action is required, it must be done by the use of a mechanical device or one-handed technique.

Red Bags

Each site must have an appropriate biohazard container (labeled, red-colored bag) to be used only for the disposal of regulated waste. The contracted Regulated Waste Hauler will provide replacement red bags or red sharps containers when regulated waste is removed from the facility.



Labeling

- Labels shall be fluorescent orange or orange-red with the biohazard symbol or "BIOHAZARDOUS WASTE" lettering in a contrasting color.
- Individual containers of blood or OPIM that are placed in a labeled container during storage, transport, shipment or disposal are exempted from the labeling requirement.

Storage of Contaminated Sharps

All sites shall provide proper and secure storage and handling of biohazard/regulated waste with proper labels. School Custodians are responsible for providing secure storage, which denies access to unauthorized persons until a licensed Regulated Waste Hauler removes it from the facility. Sharps containers may be disposed of when the container is filled. The storage area shall be marked with warning signs on, or adjacent to the exterior of doors, gates or lids. Signs must read:

**CAUTION
BIOHAZARD WASTE STORAGE AREA
UNAUTHORIZED PERSONS KEEP OUT**

Disposal Procedure

Regulated waste must be disposed of according to federal, state, and local regulations. Place all regulated waste in closable and biohazard labeled or color-coded containers (bags). Waste, may be placed in plastic, sealable bags before disposal in a larger biohazard bag in order to reduce odor. When storing, handling, transporting or shipping, place all regulated waste in containers that are constructed to prevent leakage.

INFECTIOUS WASTE DISPOSAL

SHARPS	INFECTIOUS WASTE
<ul style="list-style-type: none">▶ Needles▶ Syringes▶ Lancets▶ Scalpels▶ Scissors▶ IV Catheters▶ Broken lass with blood	<ul style="list-style-type: none">▶ Items soaked with blood;▶ Items which would release blood or OPIM if compressed;▶ Items which are caked with dried blood or OPIM which are capable of releasing these materials during handling;▶ Suction Catheters
DISPOSE OF IN SHARPS CONTAINER	DISPOSE OF IN REG BAGS AND INFECTIOUS WASTE CONTAINERS

Other Potentially Infectious Materials (OPIM) Include:

1. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any other body fluid that is visibly contaminated with blood such as saliva or vomitus and all body fluids in situations where it is difficult or impossible to differentiate between body fluids such as emergency response;
2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead);
3. HIV-containing cell or tissue cultures, organ cultures and HIV- or HBV-containing culture medium or other solutions; and blood, organs or other tissues from experimental animals infected with HIV and HBV.

Body waste products such as urine and feces without blood are not considered regulated waste. Waste such as disposables containing non-fluid blood (i.e.: soiled sanitary napkins, dressings, gauze and cotton balls with a small amount of dried blood or other body fluids) are not Regulated waste. These can be disposed of in plastic bags with regular garbage.

Personal Protective Equipment

Personal protective equipment (PPE) provides protection against exposure to infectious materials and must be routinely used when contact with blood or other body fluids of any person is encountered. The Custodian must ensure that PPE is provided to all custodial employees and ensure that they are trained on its use for employees' specific job classification and tasks/procedures.

- PPE must be readily accessible and available in appropriate sizes;

- PPE must be properly used, cleaned, or replaced as needed or discarded;
- All personnel who administer first aid involving blood or who handle body fluids including clean-up activities must wear PPE.

Selection, Care and Use of PPE

- Single-use gloves should be worn when direct contact with blood or OPIM is expected to occur and when handling or touching contaminated items or surfaces. Utility (household type) gloves may be used for housekeeping tasks such as cleaning and decontaminating after a blood spill. However, they should only be used if they are in perfect condition (i.e., no tears, cracks, punctures). Hypoallergenic gloves or other similar alternatives must be made available to employees who have an allergic sensitivity to certain materials.
- Replace disposable (single use) and reusable gloves as soon as possible if they are torn, punctured or when their ability to function as a barrier is compromised.
- Disposable (single use) gloves must not be washed for reuse. After usage, dispose of properly.
- Wear face and eye protection devices whenever splashes, sprays, splatters or droplets of blood or other fluids may be generated and eye, nose or mouth contamination can be reasonably anticipated.
- Remove PPE prior to leaving the work area and wash all areas which may have had contact with body fluid.

Hand Washing Techniques

1. Wet hands with warm running water. Running water is necessary to carry away dirt and debris.
2. Apply soap, lather well.
3. Wash hands, using a circular motion and light friction, for 15 to 20 seconds. Include front and back surface of hands, between fingers and knuckles, around and under fingernails, and the entire wrist area.
4. Rinse hands well under warm running water. Point fingers down under the water so that the water drains from the wrist area to the fingertips.
5. Dry hands well with paper towels and turn off the water using the paper towel instead of bare hands.
6. Discard paper towels in receptacle.

Food preparation area should not be used for decontamination or hand washing. When hand washing facilities are not available, use a waterless antiseptic hand cleanser.



Joel Klein
Chancellor

Office of Occupational Safety and Health
65 Court Street, Room 706
Brooklyn, NY 11201
(718) 935-2319