

# Chemistry Biohazardous Waste Disposal

All users sterilizing biohazardous waste must receive training and authorization from Dr. Purcell.

Users are responsible for providing their own bags and autoclave trays.

Do **not** leave waste unattended in 4005. If the autoclave is in use, take the waste back to your own lab or sit and wait with it.

**All waste sterilization cycles MUST be logged in the WASTE log-book.**

- 1) Waste bags can be transported in sterilization trays, carried by hand or cart to Rm 4005.
- 2) All bags shall be filled no more than **3/4 full**.
- 3) Waste must be double-bagged:
  - Both bags must be autoclave-safe bags
  - The outer bag must be red and be labeled with the biohazard symbol
  - Both bags must be LOOSELY sealed with twist ties or rubber bands.
- 4) All Regulated Medical Waste bags must include, prior to treatment:
  - Generator's/ PIs Name
  - Bldg & Room Number
- 5) Outer bag must be marked with autoclave indicator tape
- 6) Liquid items are to be placed in Sterilization tray and transported by cart.
- 7) Any capped liquids going into Autoclave need to have caps loosened/removed or replaced with aluminum foil.
- 8) Sharps containers are to be "Locked" and have autoclave indicator tape across the lid.
- 9) Serological Pipettes: No change in disposal procedure. Placed in tray and covered with Aluminum foil. Foil is marked with Rm # and PI/Generators Name.

**Waste must be sterilized on the 90 minute pre-vac cycle**

- *If the run fails, the autoclave indicator tape is not changed, or there is a spill, contact Dr. Purcell immediately!*

**After the autoclave run is complete:**

- 1) Add a tie label to treated red bag with sterilization info: **Date and Operator**.
- 2) Place inside an orange bag and tie off
- 3) Tear off user log and put it in this month's slot in the file folder.

**Sharps Waste:** After being autoclaved, contact EHS to pickup. [ehsdept@odu.edu](mailto:ehsdept@odu.edu) (leave containers within Autoclave Room).

Take the treated waste (orange bags) to dumpster outback in loading zone. Do not leave waste in room 4005.

# ODU Guidelines for Disposal of Regulated Medical Waste

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## BAGGED WASTE

1. All Regulated Medical Waste (RMW) contained in bags must be submitted to the B.S.S.F / EHS / Health Science / Chemistry for sterilization in **approved red** Biohazard bags, **double bagged** and placed in approved **Sterilization trays**, which each lab must provide their own.
  - Approved Regulated Medical Waste bags must be:
    - Red in color
    - Bear the Biohazard label, at least 2".
    - Bear the words "Potentially Infectious Material" or "Biohazardous"
    - Bear the words "Autoclave Bag"
    - Made of Polypropylene
    - Mil thickness of at least 2.0 mil
    - Examples:
      - [Fisherbrand No. 01-828D](#)
  - No glass may be placed in red Biohazard bags.
2. Unless specifically used to cleanup a biohazard spill, **no paper towels** should be placed in red Biohazard bags. Towels used to routinely clean a work surface before and after use, should be placed in "uncontaminated" waste receptacle.
3. All bags shall be filled no more than **3/4 full**.
4. All bags must be closed with closures, twist ties or rubber bands, **prior** to submission to B.S.S.F/HS/CHEM to allow steam penetration during sterilization, i.e., **do not tape bags closed tightly**.
5. Biohazard bags will be accepted for sterilization as follows:
  - **B.S.S.F (MGB 207): Wednesday Only**. No later than 10am
  - **Health Science**: Discretion of the Autoclave operator
  - **Chemistry**: Each Lab has designated operator to handle own waste.
  - **EHS**: Handles pickup for Student Health / Dental Hygiene and misc. departments who contact EHS for Medical Waste disposal.
6. All regulated medical waste generated by your laboratory must be disposed of (i.e., brought to B.S.S.F/HS/CHEM) within **7** days of generation.
7. All Regulated Medical Waste bags **must include**, prior to drop off:
  - **Generator's/ PIs Name**
  - **Bldg & Room Number**
8. The generator of the Regulated Medical Waste **assumes all responsibility** for assuring the autoclave operator, B.S.S.F and personnel that absolutely no hazardous waste, i.e., chemicals or radioactive waste, is contained in the red Biohazard bags submitted for treatment.

9. It will be the responsibility of the individual labs to retrieve their trays once they have been sterilized.
    - Trays that are not marked will remain in BSSF autoclave room for future use.
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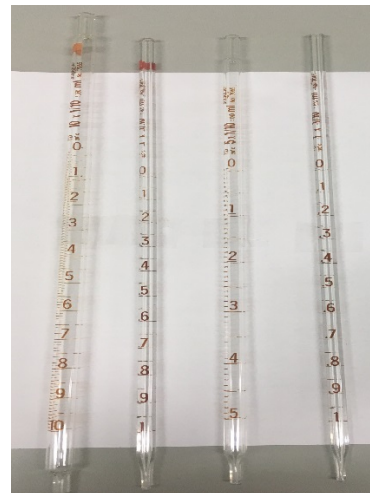
## GLASS AND PIPETTES

### 1. Broken Glass:

- **Contaminated** glass should be placed in a sharps container.
- **Non-contaminated** glass can be placed in a bagged lined cardboard box marked "Broken Glass". Box is to be disposed with normal trash.

### 2. Serological Pipettes:

- These must be placed in an approved sterilization tray, (**no bags**) no more than  $\frac{3}{4}$  full and covered with foil **prior** to transporting.
- Please be sure to label your trays with the following:
  - **PI's name,**
  - **Room Number**
- Pipettes and will be accepted for treatment on any weekday except Wednesday (BSSF)
- It will be the responsibility of the individual labs to retrieve their trays once they have been sterilized and to dispose of the waste.
- Trays that are not marked will remain in BSSF/CHEM autoclave room for future use.



## LIQUID WASTE

Labs that bring their liquid waste to BSSF - MGB 207:

- Please **label all** submitted liquid waste with the agents contained in the waste. Primary containers must be placed into an autoclavable sterilization tray prior to submitting the liquid for autoclaving.
  - Liquid waste will be accepted for treatment on any weekday except Wednesday.
  - It will be the responsibility of the individual labs to retrieve their trays once they have been sterilized and to dispose of the waste.
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## SHARPS WASTE

1. All sharps must be submitted in a closed, approved sharps container, seal with autoclave tape.
  2. If Sharps container is broke or missing lid(s), place entire container into a larger container. Do not attempt to tape broken lids or entire top of container. Empty defective containers should be placed in trash (after removing all labels).
  3. All sharps containers must have the following information clearly labeled on the container, **prior** to submission to B.S.S.F/Health Sciences/Chemistry:
    - Generators name
    - Room number and building.
  4. Once sterilized, ODU must send sharps off campus to a contracted vendor for incineration.
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### Approved sharps containers

Are rigid, leak-proof, puncture resistant boxes of various sizes made of hard red plastic, with a lid that can be securely sealed to keep contents from falling out, and clearly marked with the biohazard symbol.

\* **Maximim size** per container not to exceed 14 quarts



### Approved sterilization tray:

- Fisher Scientific (Cat. #13-359-20B) - Thermo Scientific Nalgene Large Polypropylene Sterilizing Pans
- If there's another tray that could be an option, have it approved through EH&S prior to ordering.



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### Transport of waste

- All bagged or liquid waste and serological pipettes must be placed in the approved sterilization trays, covered with foil for pipettes and placed on a cart for transport to MGB 207 / Health Science/ Chemistry for sterilization.
- Never hand carry any Regulated Medical Waste outside of the labs.
- Pipettes and liquid waste will be accepted for treatment on any weekday except Wednesday (BSSF).

