Biological and Medical Waste Disposal Policy

I. Biological Waste
II. Regulated Medical Waste

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   B. Regulated Medical Waste Disposal Guide for Clinical Areas
Policy for the Disposal of Biological and Medical Waste

I) Biological Waste

Laboratories that are engaged in research regulated at Biosafety Level 1 (BSL1), Biosafety level 2 (BSL2) or Biosafety level 3 (BSL3) must abide by the following policy.

A) All Laboratories

Registration Reminder: Experiments involving ANY of the following materials must be registered with, reviewed and approved by the Rutgers Institutional Biological Safety Committee prior to starting work.

(a) recombinant or synthetic nucleic acid molecules,
(b) genetically engineered organisms,
(c) genetically engineered plants,
(d) non-human primates (NHPs) or NHP tissue/cells,
(e) human cell culture (including established human cell lines),
(f) human materials, tissue/organs,
(g) pathogenic microorganisms (including BSL1),
(h) human blood or blood products, or
(i) other potentially infectious material (OPIM) from humans or NHPs

All registration submissions for these experiments must be made electronically by utilizing the Biosafety Protocol Management System accessed through logging into http://myrehs.rutgers.edu. Paper registration and renewal/amendment documents are no longer accepted.

All laboratories and clinical areas generating RMW must attend a RMW Session provided by REHS. The requirements for RMW disposal are included in REHS laboratory and biosafety trainings. If you plan to generate RMW please contact REHS at 848-445-2550 or by logging into http://myrehs.rutgers.edu to register for a course. Sessions may also be scheduled and provided as needed to individuals, groups, departments, clinical personnel or laboratories.

B) Biosafety Level 1 Laboratories

All solid waste items which are potentially contaminated with microorganisms, tissue culture, cell culture, recombinant or synthetic nucleic acid molecules, genetically engineered organisms, or genetically engineered plants regulated by the CDC/NIH or USDA/APHIS at Biosafety Level 1 (BSL1) must be chemically disinfected or autoclaved in accordance to their approved protocol prior to disposal as regular solid waste (trash). Such items should be placed into a clear autoclave bag before disposal. If an autoclave is not available, BSL1 waste must be discarded in regulated medical waste (RMW) containers.
Red bags, orange bags, and even clear bags with biohazard symbols must not be used for decontaminated BSL1 waste disposed in trash receptacles or dumpsters. These bags or any biohazard labeled items found in regular trash must be reported immediately to REHS.

For laboratories performing both, BSL1 and BSL2 activities, all BSL1 solid waste should be overclassified and disposed of as RMW in the solid waste bin. BSL2 items must be handled as outlined in the BSL2 section below. **Note: All BSL1 recombinant and/or synthetic material registered with the IBC must be autoclaved or chemically disinfected before disposal as RMW, and/or handled as outlined in their approved IBC protocol.**

**Autoclave Procedures for BSL1 Waste**

(a) The clear autoclave bag should be filled to two-thirds of its capacity.
(b) After the bag is 2/3 full, it should be loosely taped closed and labeled with the investigator’s name.
(c) Autoclave tape should be affixed to the exterior of the bag to ensure the waste has reached the proper temperature. (REHS may periodically challenge autoclaves throughout the university using biological indicators such as spore strips to ensure that biological waste is being appropriately disinfected. Please contact REHS at 848-445-2550 to arrange for an autoclave challenge.
(d) Waste is autoclaved using appropriate cycle parameters for the waste.
(e) After autoclaving, waste is disposed in building dumpster by laboratory staff or by arrangement with housekeeping staff.

All BSL1 liquid waste items must be autoclaved or chemically disinfected (with appropriate disinfectant) prior to drain disposal of the liquid. Any use of chemical disinfectant must allow for the appropriate contact time of the disinfectant before drain disposal. Contact REHS at 848-445-2550 for information regarding which disinfectants are appropriate for your BSL1 materials.

**C) Biosafety Level 2 Laboratories**

All solid waste items which are potentially contaminated with microorganisms, tissue culture, cell culture, recombinant or synthetic nucleic acid molecules, genetically engineered organisms or genetically engineered plants which are regulated by the CDC/NIH or USDA/APHIS at Biosafety Level 2 (BSL2) must be autoclaved or chemically disinfected in accordance with their approved protocol and placed into the Regulated Medical Waste stream as Overclassified Medical Waste as outlined below. The following autoclave procedures should be followed when processing biological waste generated in BSL2 laboratories. **Note: The color of the autoclave bags used for BSL2 waste is unimportant since the waste is packaged in the Regulated Medical Waste (RMW) boxes for ultimate disposal.**
All BSL2 liquid waste items must be autoclaved or chemically disinfected (with appropriate disinfectant and contact time) prior to drain disposal of the liquid. Contact REHS at 848-445-2550 for information regarding which disinfectants are appropriate for your BSL2 materials.

_Autoclave Procedures for BSL2 Waste_

(a) The orange, red or clear autoclave bag should be filled to two-thirds of its capacity.

(b) After the bag is 2/3 full, it should be loosely taped closed and labeled with the investigator’s name.

(c) Autoclave tape should be affixed to the exterior of the bag to ensure the waste has reached the proper temperature. (REHS may periodically challenge autoclaves throughout the university using biological indicators such as spore strips to ensure that biological waste is being appropriately disinfected. Laboratory staff are encouraged to perform these challenges monthly. Please contact REHS at 848-445-2550 to arrange for an autoclave challenge or for additional information.)

(d) Autoclave waste using appropriate cycle parameters for waste.

(e) After autoclaving, waste is labeled with an inner container label (supplied by REHS) and disposed in cardboard RMW box or plastic RMW bin located by the autoclaves. When the RMW box/bin is full, seal the liner bag, close the bin or seal the box with tape, and affix an outer container label to the outer box/bin.

_D) Biosafety Level 3 Laboratories_

BSL3 laboratories treat all liquid and solid waste as outlined in a reviewed and approved Standard Operating Procedures. These SOPs are in accordance with approved IBC protocols and outline specific procedures for waste disposal. All waste (liquid and solid) is autoclaved out of the facility in autoclave bags. After autoclaving, inner container labels are affixed to the bag, and the bag is then placed in cardboard regulated medical waste containers. Laboratory staff are to then seal the container and affix an outer container label to the outside. All BSL3 autoclaves are challenged with biological indicators monthly. Select agent facilities must challenge their autoclaves weekly with biological indicators. All autoclave challenges with biological indicators are to be performed as outlined in approved standard operating procedures and/or IBC protocols.

_E) Animal Facilities_

Animal carcasses, body organs and bedding from animals that had been exposed to an agent that can cause disease in humans must be disposed of according to the procedures outlined in the IBC and/or IACUC protocols. All such materials must be autoclaved and then collected in regulated medical waste, unless otherwise approved by REHS. Animal carcasses, body parts and bedding from animals exposed to
pharmaceutical compounds must also be collected as regulated medical waste. Exceptions to this would be animals exposed to hazardous chemicals, which materials required disposal through REHS. For any questions, please contact REHS at 848-445-2550.

F) Clinical Areas

Clinical areas may generate different waste streams than research laboratories. These areas generate regular trash, dirty linens, sharps, body fluids, other potentially infectious material, and other materials generated during patient treatment. Any liquid waste generated over 20cc should be referred to REHS for disposal instructions. Solid waste that must be disposed of as regulated medical waste includes tubing, gloves, paper gowns, paper linens, and clean up debris that is contaminated with blood or potentially infectious human fluids. Fecal smear cards must also be collected as solid regulated medical waste. Solid waste must be disposed and packaged as outlined in Section II - Regulated Medical Waste.

G) Non-Biological Laboratories

Laboratories not performing biological related research may generate different waste streams than BSL1, BSL 2, or BSL 3 research laboratories. These laboratories may generate sharps (Class 4 RMW) and Unused Sharps (Class 7 RMW). Any sharps waste generated must be referred to REHS for disposal instructions. All sharps must be placed in an approved Sharps Container and disposed as RMW, even if they have not been in contact with any biological or infectious material. Syringes without needles must be disposed in a sharps container. Any sharps waste contaminated with chemicals and/or radiological material must still be placed in a separate approved Sharps Container and referred to REHS for disposal in accordance with the respective Hazardous Waste Disposal Policy and/or Radiological Waste Disposal Policy.
II) Regulated Medical Waste

The following instructions apply to generators of Regulated Medical Waste (RMW). At Rutgers University, RMW generators may be engaged in health care delivery, athletics or biomedical research. Rutgers University employees who are reasonably anticipated to come into contact with human blood or blood products must adhere to the Rutgers University Bloodborne Pathogen (BBP) program. Contact REHS at 848-445-2550 or visit [http://rehs.rutgers.edu](http://rehs.rutgers.edu) for BBP program details.

All laboratories and clinical areas generating RMW must attend a RMW Session provided by REHS. The requirements for RMW disposal are included in REHS laboratory and biosafety trainings. If you plan to generate RMW please contact REHS at 848-445-2550 or by logging into [http://myrehs.rutgers.edu](http://myrehs.rutgers.edu) to register for a course. Sessions may also be scheduled and provided as needed to individuals, groups, departments, clinical personnel or laboratories.

The following procedures for the proper processing, transportation, and ultimate disposal of RMW are taken from the Comprehensive Regulated Medical Waste Management Act ([N.J.S.A.](https://www.nj.gov/laws/njas Nh/13-1E-48) 13:1E-48) and the NJDEP Solid and Hazardous Waste Rules subchapter 3A: Regulated Medical Wastes ([N.J.A.C.](https://www.nj.gov/laws/njac Nh/7-26-3A) 7:26-3A).

A) Definition of RMW

The Regulated Medical Wastes subchapter 3A ([N.J.A.C.](https://www.nj.gov/laws/njac Nh/7-26-3A) 7:26-3A.6) defines RMW as solid waste that meets both the process definition and the classification definitions listed below.

1) **Process Definition:** RMW is any solid waste generated from one of the following processes: the diagnosis, treatment or immunization of humans or animals; research pertaining to the diagnosis, treatment or immunization of humans or animals; or the production or testing of biologicals.

2) **Classification Definition:** To be considered as RMW, items that are included in the above process definition must also belong to one of the following classes of regulated medical waste.
# Classes of Regulated Medical Waste

<table>
<thead>
<tr>
<th>Class</th>
<th>Waste Type</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class 1</td>
<td>Cultures and Stocks</td>
<td>Cultures and stocks of infectious agents and associated biologicals: cultures from medical or pathological labs; cultures and stocks of infectious agents from research labs; wastes from the production of biologicals; discarded live and attenuated vaccines; culture dishes and devices used to transfer, mix, or inoculate cultures</td>
</tr>
<tr>
<td>Class 2</td>
<td>Pathological Wastes</td>
<td>Human pathological wastes including tissues, organs, and other body parts and fluids that are removed during surgery or autopsy or other medical procedures; specimens of body fluids and their containers</td>
</tr>
<tr>
<td>Class 3</td>
<td>Human Blood &amp; Body Products</td>
<td>Liquid waste human blood; items saturated, dripping or caked with human blood (including serum, plasma and other blood components) which were used or intended for use in either patient care, testing and laboratory analysis, or the development of pharmaceuticals. Intravenous bags, soft plastic pipettes and plastic blood vials are also included in this category.</td>
</tr>
<tr>
<td>Class 4</td>
<td>Sharps</td>
<td>Sharps that were used in animal or human patient care or treatment in medical research or industrial laboratories. Includes hypodermic needles, all syringes to which a needle can be attached (with or without the needle), Pasteur pipettes, scalpel blades, blood vials, carpules, needles with attached tubing, and broken or unbroken glassware (slides and coverslips) that were in contact with infectious agents.</td>
</tr>
<tr>
<td>Class 5</td>
<td>Animal Waste</td>
<td>Contaminated animal carcasses, body parts, and bedding of animals that were known to have been exposed to infectious agents during research, production of biologicals, or testing of pharmaceuticals.</td>
</tr>
<tr>
<td>Class 6</td>
<td>Isolation Waste</td>
<td>Biological waste and discarded materials contaminated with blood, excretions, exudates, or secretions from humans or animals that are isolated to protect others from certain highly communicable diseases.</td>
</tr>
<tr>
<td>Class 7</td>
<td>Unused Sharps</td>
<td>Unused, discarded sharps that were intended to be used. Includes hypodermic needles, suture needles, syringes and scalpel blades.</td>
</tr>
</tbody>
</table>
B) Overclassified RMW

Overclassified RMW is material that does not meet the strict definition of RMW listed in part A, above. Overclassified RMW materials resemble RMW but are generated from activities that do not meet both the “process” definition and the “classification” definition of RMW. Examples of these materials include blood products generated in teaching laboratories (while research laboratories are covered in the process definition, teaching laboratories are not) or culture dishes generated in basic research laboratories (because these materials are not being used in research pertaining directly to the diagnosis, treatment or immunization of humans or animals). To avoid confusion and to prevent problems stemming from misconceptions about RMW, such materials should be collected for disposal as overclassified RMW. Overclassified RMW must be packaged and labeled in the same manner as RMW and is collected by the RMW vendor.

There are also many activities that do meet the process definition but generate waste that does not belong in any of the seven specific classes. An example of this material would be gloves worn during blood drawing procedures in health centers (because gloves, unless they are either saturated with blood or contaminated with an infectious disease agent are not included as one of the seven classes of RMW). This waste should be packaged and labeled as overclassified RMW.

C) RMW In Process

All solid waste containers for RMW collection must be closed when not in use. Laboratories and clinics may have small rigid, leakproof, bag-lined containers with lids and biohazard labels near work areas or on bench tops to collect RMW as it is being generated.

For laboratories, the preferred method of collection for solid RMW at the lab bench is a small, red bag, or a rigid container lined with a small red bag that can be closed (either by tying the bag, or lid covering the container). Small, bench top containers must be emptied into the larger solid waste containers either when full or not in use. Remember that BSL2 and above solid RMW must be autoclaved or chemically disinfected prior to being placed in the large RMW bin/ box, unless otherwise approved by REHS.

For clinical areas, the solid RMW does not need to be autoclaved or chemically disinfected. RMW can be small/temporary containers can be utilized or RMW can be placed directly into the large RMW bin/ box as appropriate.

When temporary containers (bench top or floor model) are full, the bags must be pulled out by lab or clinic personnel, closed/sealed, labeled with an inner container label and placed in a RMW bin/ box. The RMW bin or box is then closed/sealed.
D) Segregation of RMW

As RMW is generated it must be segregated into the following three categories: sharps (both class 4 and class 7), fluids (greater than 20cc), and other RMW (solid). Collect solid and sharps RMW in separate inner containers appropriate for that waste stream. These inner containers will ultimately be closed and placed into the outer container which is the RMW box/bin. Liquid RMW greater than 20cc must be chemically disinfected for the appropriate contact time, and then drain disposed, unless otherwise approved by REHS. Needles, Pasteur pipettes, glass cover slips, scalpel blades and syringes must be collected in a sharps container; culture transfer devices, blood soaked items, and other paper or cloth related items must be collected in autoclave bags or red RMW liner bags. Do not chop, bend, break or otherwise destroy hypodermic needles or syringes before discarding them into the sharps container.

E) Treatment of RMW

Generally, it is not necessary to treat RMW or overclassified RMW before placing it in the outer container (RMW box/bin) for ultimate disposal. However, Rutgers University policy requires that laboratories working with human pathogens regulated by the CDC or NIH at Biosafety Level 2 or higher must autoclave or chemically disinfect their waste prior to placing the waste into RMW boxes/bins for collection by the RMW vendor. After autoclaving or chemical disinfection, this waste material is considered overclassified RMW.

F) Storage of RMW

Outer containers must be stored in a secure area protected from the elements, high temperatures, vandalism, insects and rodents. Unauthorized personnel must be denied access to this designated storage area. REHS recommends that RMW boxes/bins are not stored in common areas, e.g. accessible autoclave rooms, hallways. If RMW is stored in a common area the location must be secured, e.g. locked, and the door appropriately labeled. When storing containers, be sure that their labels face outward so that they can be easily seen. Containers must also be sealed securely to prevent spillage, putrescence or the leaking of vapors. Liquids (e.g. blood) must be put into containers that are packaged with a sufficient amount of surrounding absorbent material to absorbent leakage. Volumes of liquid may not exceed 20cc per individual container.

G) Limitations on Storage of RMW

NJDEP Solid and Hazardous Waste Rules subchapter 3A: Regulated Medical Wastes (N.J.A.C. 7:26-3A) allows RMW to be stored on site for up to one year. In order to comply with this subchapter, RMW generators must dispose of RMW containers on a yearly basis, even if RMW containers are not full. REHS recommends frequent disposal of RMW boxes/bins.
H) Packaging, Labeling and Marking Requirements

1) Packaging: The generator must package all RMW before the RMW vendor can remove it. The RMW vendor will not package your waste. The RMW bin/box must be lined with a red bag before any waste can be placed inside. All needles, syringes, scalpels and any sharp objects must be packaged in an appropriate puncture-resistant sharps container. Unbroken as well as broken glass must be packaged to prevent puncture of the outer RMW container. All other items may be packaged in autoclave bags or other appropriate inner containers. These items must then be packaged in an appropriate medical waste box/bin before removal. Boxes/bins used for the first shipment of RMW can be obtained by contacting REHS at 848-445-2550. Replacement boxes for use with future disposal of RMW will be available from the waste vendor upon arrival or subsequent pickups. If bins are used, new bins will be supplied to the laboratory. Only the outer containers supplied by REHS or the vendor may be used to package RMW.

2) Labeling and Marking: Generators shall mark each package of RMW according to the following labeling and marking requirements before it can be transported off-site by the RMW vendor. The outermost surface of each RMW box/bin prepared for shipment shall be labeled with a biohazard label (most times preprinted on the outer container) and also with a special water resistant identification label called “Medical Waste Outer Container Label.” The Medical Waste Outer Container Label is available from REHS and provides the following information: campus, building and room where waste was generated. If these labels are unavailable, the required information may be written directly on the outside of the box/bin. Only indelible or waterproof ink or permanent marker may be used to complete this label, or to label the box. If there is not a biohazard label preprinted on the container, a label must be affixed prior to disposal. In addition to the requirements above, the generator must label inner containers including sharps containers and fluid containers. Each inner container shall be labeled only with a special water resistant identification label called “Medical Waste Inner Container Label.” The Medical Waste Inner Container Label is available from REHS and provides the following information: campus, building, room, phone number and contact person name for the location where the waste was generated.

Note that all containers, both inner and outer, must be marked with the required information. Labels may be obtained by contacting REHS at 848-445-2550.

1) Tracking Form for RMW

The NJ Medical Waste Tracking Form (Appendix 1) is used to ensure proper transportation of RMW to an appropriate disposal site. Rutgers University has arranged with the RMW vendor to supply the four-copy RMW Tracking Form. The RMW vendor will fill out the tracking form. The generator must check Items 1 through 14 on the tracking form for purposes of verifying the accuracy of the
information listed. After a thorough review of items 1 through 14, the generator must then sign Item 15 of the tracking form. After the RMW transporter has also signed in Item 16, Copy 4 (goldenrod sheet) of the tracking form will be given to the generator.

After the RMW is received by the disposal facility, a disposal facility representative will sign in Item 22. Copy 1 (white sheet) will be mailed back to REHS. Copy 4 (goldenrod sheet) of the tracking form must be kept by the generator or building contact representing the generator at the generation site for at least three years from the date the waste was accepted by the RMW transporter. The destination facility will send Copy 1 to REHS within 15 days of receipt of the tracking form from the RMW hauler, if Copy 1 is sent to you inadvertently please forward Copy 1 to REHS.

J) RMW Inspections

Periodically, the New Jersey Department of Environmental Protection inspects RMW compliance at Rutgers University facilities. The inspector may visit health centers and other clinical areas, laboratories, or athletic training areas. If any inspector visits without a REHS representative, please contact REHS immediately and wait for the REHS representative to arrive before beginning any opening conference with the inspector. REHS is the designated university representative.

K) Scheduling a RMW Pickup

The RMW vendor makes regularly scheduled pick-ups of RMW boxes/bins. Most buildings and campuses have weekly pick-ups, but the frequency varies based on the volume of waste generated at each pick-up location. Additional pick-up requests and one-time pick-ups must be requested online at http://rehs.rutgers.edu. It is important that all requirements be completed prior to a pickup (e.g. labeling of the inner and outer container and sealing the box). Note: The RMW vendor will not pick up the waste without a representative of the RMW generator (e.g., a lab member or building contact representing the generator) being present to sign the RMW tracking form.

L) Supplies

REHS will provide the following upon an initial request: RMW boxes/bins, RMW liner bags (red bags), and RMW labels (inner and outer). After the first set of supplies are delivered to the area, REHS can assist laboratories and clinical areas with acquisition of supplies from the RMW vendor. It is the responsibility of individual laboratories to purchase sharps containers, autoclave bags, autoclave indicator tape, and packing tape from appropriate laboratory supply vendors.
M) Definitions

1) “Biologics” means preparations made from living organisms and their products; includes vaccines and cultures intended to be used for diagnosing, immunizing, or treating humans or animals or in research pertaining thereto.

2) “Blood Products” means any product derived from human blood, including blood plasma, platelets, red or white blood corpuscles; and other derived licensed products including interferon, etc.

3) “Generator” means any person, by site, whose act or process produces regulated medical waste as defined in N.J.A.C. 7:26-3A.6, or whose act first causes a regulated medical waste to become subject to regulation.

4) “Infectious agent” means any organism (such as a virus or bacteria) that is capable of being communicated by invasion and multiplication in body tissues and capable of causing disease or adverse health impacts in humans.

5) “Inner container” means any container (sharps container, autoclave bag, 5-gallon bucket) that would collect RMW and would ultimately be placed into a properly lined outer container. This container must be labeled with the “inner container label.”

6) “Inner container label” means the label available from REHS which states the campus, building, room, phone number and contact person name for the location where the RMW was generated.

7) “Laboratory” means any research, analytical, or clinical facility that performs health care related analysis or service. This includes medical, pathological, pharmaceutical, research, commercial and industrial laboratories.

8) “Medical waste” means any solid waste that is generated in the diagnosis, treatment, or immunization of human beings or animals; in research pertaining thereto; in the testing of biologicals; or in home self-care.

9) “Outer container” means the cardboard box or plastic bin that is supplied by the RMW vendor or REHS to collect inner containers of RMW. This outer container must be lined with a red RMW bag prior to placing any inner containers into the box. This box also must be labeled with the “outer container label.”

10) “Outer container label” means the label available from REHS which states the campus, building and room where RMW was generated.

11) “Regular trash” means non-regulated, non-contaminated waste. This waste will not be transferred off site to a dedicated waste facility, but will be co-mingled with regular waste streams.
12) “Transporter” means a person engaged in the off-site transportation of regulated medical waste by air, rail, highway, or water.
Appendix 1
Regulated Medical Waste Tracking Form
## TRACKING FORM - REGULATED MEDICAL WASTE (RMW)

### GENERATOR

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Generator's Name and Mailing Address</td>
</tr>
<tr>
<td>2.</td>
<td>Tracking Form Number</td>
</tr>
<tr>
<td>3.</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>4.</td>
<td>State Permit or ID No.</td>
</tr>
<tr>
<td>5.</td>
<td>Transporter's Name and Mailing Address</td>
</tr>
<tr>
<td>6.</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>7.</td>
<td>State Transporter Permit or ID No.</td>
</tr>
<tr>
<td>8.</td>
<td>Destination Facility Name and Address</td>
</tr>
<tr>
<td>9.</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>10.</td>
<td>State Permit or ID No.</td>
</tr>
</tbody>
</table>

### TRANSPORTER

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>11.</td>
<td>New Jersey Waste Description</td>
</tr>
<tr>
<td>12.</td>
<td>Total No. Cons.</td>
</tr>
<tr>
<td>13.</td>
<td>Total Weight</td>
</tr>
<tr>
<td>14.</td>
<td>Additional Information</td>
</tr>
<tr>
<td>14a.</td>
<td>Overclassified Material</td>
</tr>
<tr>
<td>14b.</td>
<td>Central Collection Point, Transfer Station Activity, and Other Information</td>
</tr>
</tbody>
</table>

### DESTINATION

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>15.</td>
<td>Generator's Certification per 40 CFR 722.204(a)</td>
</tr>
<tr>
<td>16.</td>
<td>Transporter 1 (Certificate of Receipt of RMW as described in Items 11, 12, &amp; 13)</td>
</tr>
<tr>
<td>17.</td>
<td>Transporter 2 or Intermediate Handler (Name and Address)</td>
</tr>
<tr>
<td>18.</td>
<td>Telephone Number</td>
</tr>
<tr>
<td>19.</td>
<td>Point of Transfer Address (If different than 17)</td>
</tr>
<tr>
<td>20.</td>
<td>State Transporter Permit or ID No.</td>
</tr>
<tr>
<td>21.</td>
<td>New Tracking Form Number (for consolidated or untracked RMW)</td>
</tr>
<tr>
<td>22.</td>
<td>Destination Facility (Certificate of Receipt of RMW as described in Items 11, 12, &amp; 13)</td>
</tr>
<tr>
<td>23.</td>
<td>Discrepancy Box (any discrepancies should be noted by item number and initials)</td>
</tr>
</tbody>
</table>

Emergency Telephone Numbers (24 hours a day):
- Emergency Response: National Response Center, 1-800-426-8602
- Emergency Discharge: US Department of Transportation, 1-800-321-7272
- Infectious Substance Spills: Centers for Disease Control, 1-800-532-7310

COPY 1 - GENERATOR COPY (WHITE):馬了ED BY DESTINATION FACILITY TO GENERATOR
Appendix 2
Flowchart for Packaging Regulated Medical Waste
PACKAGING RMW FOR DISPOSAL (for Laboratories)

The generator **must** package all RMW properly before the RMW is removed!

- **Is RMW Generated?**
  - Yes
  - **Is RMW Generated Mixed with Radiological or Chemical Waste?**
    - Yes
      - **Contact REHS for Guidance**
    - No
      - **Is Waste Disinfected or Inactivated?**
        - Yes
          - **Are Containers and/or Bags Sealed?**
            - Yes
              - Place Sharps Container and RMW bags in a lined RMW Bin/Box provided for Disposal. Label with a “Medical Waste Inner Container Label” on the Outside of the Bag at the top seal, Tape the Box Closed, and Place a “Medical Waste Outer Container Label” on the Outside of the Bin/Box.
            - No
              - Ensure Lids and bags are closed/sealed
              - Seal Bag, Place a “Medical Waste Inner Container Label” on the Outside of the Bag, and Seal the Lid (See Picture Below)
        - No
          - Seal the Bag, Place a “Medical Waste Inner Container Label” on the Outside of the Bag at the top seal, Tape the Box Closed, and Place a “Medical Waste Outer Container Label” on the Outside of the Bin/Box
  - No
    - **Follow Applicable Disposal Policy**

**Request Disposal by submitting the On-Line Biological and Medical Waste Disposal Request Form at [http://rehs.rutgers.edu/](http://rehs.rutgers.edu/)**
PACKAGING RMW FOR DISPOSAL (for Clinical Areas)

The generator **must** package all RMW properly before the RMW is removed!

1. **Is RMW Generated?**
   - **No:** Follow Applicable Disposal Policy
   - **Yes:**
     1. **Is RMW Generated Mixed with Radiological or Chemical Waste?**
        - **Yes:** Contact REHS for Guidance
        - **No:**
          1. **Are Containers and/or Bags Sealed?**
             - **No:** Ensure Lids and bags are closed/sealed
             - **Yes:**
               1. Place Sharps Container and RMW bags in a lined RMW Bin/Box provided for Disposal. Label with a “Medical Waste Inner Bin
               2. Seal Bag, Place a “Medical Waste Inner Container Label” on the Outside of the Bag, and Seal the Lid (See Picture Below)
               3. Seal the Bag, Place a “Medical Waste Inner Container Label” on the Outside of the Bag at the top seal, Tape the Box Closed, and Place a “Medical Waste Outer Container Label” on the Outside of the Bin/Box

Request Disposal by submitting the On-Line Biological and Medical Waste Disposal Request Form at [http://rehs.rutgers.edu/](http://rehs.rutgers.edu/)
Appendix 3

Laboratory Waste & Clinical Waste Management Guides
<table>
<thead>
<tr>
<th>General Trash</th>
<th>Non-contaminated Glassware</th>
<th>Used and Unused Sharps</th>
<th>Liquids</th>
<th>Solids</th>
<th>Mixed Waste</th>
</tr>
</thead>
<tbody>
<tr>
<td>paper and plastic packaging, wrappers</td>
<td><strong>Non-contaminated</strong> broken and intact glassware</td>
<td>Including, but not limited to:</td>
<td>After disinfection*, the following liquids can be drain disposed:</td>
<td>Solid waste contaminated with:</td>
<td>Please contact REHS for instructions on the disposal of mixed waste.</td>
</tr>
<tr>
<td>small amounts of <strong>non-hazardous</strong> solid waste (i.e., sugars, salts, amino acids, enzymes, etc.)</td>
<td>empty, rinsed* chemical reagent bottles (deface the label and remove the lid first)</td>
<td>needles (including those with attached tubing or filters)</td>
<td>mammalian cell culture</td>
<td>cultures/stocks of bacteria, viruses or fungi</td>
<td></td>
</tr>
<tr>
<td>other <strong>non-contaminated</strong> solids (e.g., paper towels, bench paper, gloves)</td>
<td>Glass boxes must be lined with a clear, thick plastic bag</td>
<td>syringes – with or without needle (don’t remove, bend or recap the needles!)</td>
<td>Blood and body fluids from humans and other animals</td>
<td>Live and attenuated vaccines/viruses (vials must be placed into a sharps containers)</td>
<td></td>
</tr>
<tr>
<td>alkaline batteries</td>
<td>When the container is ⅓ full, the entire box must be removed by Physical Plant/Facilities Custodians</td>
<td>razors/scalpels</td>
<td>bacterial/viral/fungal cultures</td>
<td>human/non-human primate cells, blood, body fluid, tissues, and other source materials</td>
<td></td>
</tr>
<tr>
<td>RECYCLE NON-HAZARDOUS WASTES As Appropriate</td>
<td>The laboratory is responsible for providing a new box and liner.</td>
<td>Pasteur pipettes</td>
<td>*Allow for the appropriate contact time for the chosen disinfectant.</td>
<td>recombinant/synthetic DNA materials</td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Rinsate must be collected and disposed of as hazardous waste through REHS.</td>
<td>blood vials (animal or human)</td>
<td>Drain disposal is prohibited in BSL3 laboratories and if hazardous chemicals or radioactive waste is present!</td>
<td>Includes contaminated plasticware, serological pipets, pipet tips, tubes (i.e., Eppendorf, conicals), gloves, pathological waste (without fixative), and specimen bags with biohazard labels</td>
<td></td>
</tr>
</tbody>
</table>

**BSL2 and higher infectious, recombinant DNA and synthetic DNA waste must be autoclaved or chemically disinfected – before disposal!**

All RMW containers should have a biohazard warning label on the container and the lid.

RMW Bins or Boxes must be lined with red plastic bags and CLOSED when you are not actively adding waste. Once 2/3 full, staff MUST seal bags with tape and label with a REHS provided “Inner Container Label”. A REHS provided “Outer Container Label” must be placed on the sealed box.

Biological and Medical Waste Disposal can be requested Online at http://rehs.rutgers.edu (848) 445-2550
Regulated Medical Waste Disposal Guide for Clinical Areas

<table>
<thead>
<tr>
<th>CLEAR BAG</th>
<th>CLEAR BAG</th>
<th>SHARPS CONTAINER</th>
<th>REGULATED MEDICAL WASTE (RMW) BIN or BOX</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1" alt="Image" /></td>
<td><img src="image2" alt="Image" /></td>
<td><img src="image3" alt="Image" /></td>
<td>Regulated Medical Waste must be placed in an approved box or bin that is lined with a red plastic bag in accordance with the RU Biological and Medical Waste Policy. Other disposal methods must be arranged with REHS.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>General Trash</th>
<th>Dirty Linens</th>
<th>Used and Unused Sharps</th>
<th>Liquids</th>
<th>Solids</th>
</tr>
</thead>
<tbody>
<tr>
<td>Paper and plastic packaging, wrappers</td>
<td>Each clinical site is responsible for arranging used linen collection, as needed.</td>
<td>Including, but not limited to:</td>
<td>Contact REHS for guidance on disposal of liquid regulated medical waste!</td>
<td>Including, but not limited to:</td>
</tr>
<tr>
<td>Non-contaminated (NO visible blood): paper liners and gowns, disposable gloves</td>
<td>All used linen, even linen contaminated with visible blood, must be placed in an appropriate collection receptacle while storing prior to laundering.</td>
<td>- Needles (including those with attached tubing or filters)</td>
<td>Items contaminated with visible blood and/or body fluids:</td>
<td>- Items contaminated with visible blood and/or body fluids:</td>
</tr>
<tr>
<td>Plastic trays/holders from sterile procedure trays (e.g., bone marrow biopsy trays, lumbar biopsy trays).</td>
<td>REMEMBER: ALWAYS check trays for presence of sharps prior to disposal!</td>
<td>- Biopsy needles</td>
<td>- tubing</td>
<td>- tubing</td>
</tr>
<tr>
<td><strong>RECYCLE NON-HAZARDOUS WASTES As Appropriate</strong></td>
<td></td>
<td>- Syringes – with or without needle (don’t remove, bend or recap needles!)</td>
<td>- gloves</td>
<td>- gloves</td>
</tr>
</tbody>
</table>

**Contact REHS for guidance on disposal of liquid regulated medical waste!**

**Contact REHS for Inner and Outer Container Labels!**

**All RMW containers should have a biohazard warning label on the container and the lid.**

RMW Bins or Boxes must be lined with red plastic bags and CLOSED when you are not actively adding waste. When 2/3 full, staff MUST seal the bags with tape and label bags with a REHS provided “Inner Container Label”. A REHS provided “Outer Container Label” must be placed on the sealed box. **Do not overfill containers!**

**Biological and Medical Waste Disposal can be requested**

**Online at http://rehs.rutgers.edu 848-445-2550**