

Standard Operating Procedure Disposal of Biohazardous and Sharps Waste	
SOP Number: <u>SOP-DBSW-02</u>	Category: <u>Lab Process</u>
Supersedes: <u>SOP-DBSW-01</u>	Original Date: <u>December 1, 2017</u>
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	Pages: <u>1 of 4</u>
Issued by: Director, Health Sciences Research	

1.0 POLICY

All biohazardous and sharps waste **MUST** be collected, separated, packaged, labeled, recorded and disposed of in strict accordance to federal and provincial legislation and local municipality by-laws. The disposal methods **MUST** not pollute air, water, or land. This policy will address the prevention of exposure to hazards to users of the W.J. Henderson Centre for Patient-Oriented Research (WJHCPOR), Kingston Health Sciences Centre (KHSC) employees, research participants, volunteers, visitors, and external service providers (i.e. biohazardous and sharps waste disposal companies). Kingston General Health Research Institute (KGHRI) will ensure that all users of the WJHCPOR are properly trained on using the correct waste disposal bins/containers when handling biohazardous and sharps waste.

2.0 PURPOSE

This document outlines procedures for all users of the WJHCPOR to facilitate a safe and responsible disposal of biohazardous and sharps waste.

3.0 DEFINITIONS

Hazard- a danger or risk that has the capability of producing adverse effects to the health, well-being and safety of an individual.

Biohazardous Waste: waste that in all probability contains pathogenic agents that because of their type, concentration and/or quantity may cause disease in individuals exposed to the waste. Wastes that are saturated with blood or bodily fluids (i.e. could drip or be wrung out) are considered biohazardous and require use of biohazardous waste containers whereas wastes which are non-saturated (i.e. used bandages or gauze) are disposed of via regular garbage waste containers.

Sharps Waste: any wastes that involve needles, medical sharps (e.g. scalpels, lancets, saws, etc.), glass blood/specimen collection tubes or broken glass.

4.0 PROCEDURE

Users are responsible for:

- Ensuring that they are properly trained on using the correct waste disposal bins/containers when handling biohazardous, sharps and regular waste.
- Ensuring that the correct waste bins/containers are used when handling biohazardous, sharps and regular wastes:
 - All wastes contaminated with biohazardous material (but no hazardous drug nor pharmaceutical materials) must be placed in the yellow coloured biohazardous waste bin/container.
 - Soft waste (i.e. disposable gloves, gauze, drapes, tubing, etc.) that is saturated with blood/tissue/bodily fluid must be placed in the yellow coloured biohazardous waste bin/container.
 - Sharps waste must be placed in the yellow sharps bins/containers. Do not shear, bend, break or recap needles. Do not overfill the sharps bins/containers.
 - All glass blood/specimen collection tubes must be placed in the yellow sharps bins/containers. All plastic blood/specimen collection tubes must be placed in the yellow coloured biohazardous waste bin/container.
 - All sharp wastes containing unused medication (no patient/blood contact with an individual) or expired and unused medications must be taken to KHSC's Pharmacy Services Department for them to discard in their blue waste bins/containers.
 - All sharp wastes containing unused cytotoxic medication or expired and unused cytotoxic medication **MUST** be disposed into the red sharps bins/containers within the WJHCPOR. **DO NOT** transport back to KHSC's Pharmacy Department.
 - Packaging, disposable gloves, paper towels, and Oxivir®/Accel® INTERVention wipes must be disposed into regular garbage waste containers, unless the items are saturated with blood/tissue/bodily fluid or used during spill cleanup. These items need to go into the yellow coloured biohazardous waste bin/container.
 - All wastes contaminated with biohazardous materials from an individual under cytotoxic precautions must be placed in a red coloured biohazardous waste bins/containers or red coloured sharps bins/containers. For more information about the precautions associated with cytotoxins, please see "Safe Handling of Cytotoxic Drugs and Bodily Fluids" SOP.

KGHRI is responsible for:

- Providing orientation and training on proper disposal of biohazardous, sharps and regular waste.
- Providing the appropriate biohazardous, sharps and regular waste bins/containers in designated areas within WJHCPOR. Sharps bins/containers are located in all areas of point of use (Exam Rooms, Clinical Investigation Unit (CIU), CIU Procedure Room, Research Centrifuge Room and Research Freezer Room).
- Ensuring that all users of the WJHCPOR are following the correct disposal of biohazardous, sharps and regular wastes.

5.0 REFERENCES

- KHSC’s Administrative Policy 05-096 Waste Management Program.
- Queen’s University Environmental Health & Safety SOP-CHEM-01 Hazardous Waste Disposal Procedures.
- KHSC’s Clinical Laboratory Services Safety Manual, SF 3-50.01 Disposal of Biological Waste.
- KHSC’s Safe Handling of Hazardous Drugs and Bodily Fluids for Clinical Staff: Learning Management System (LMS) Safety 020 Course.
- KHSC’s Safe and Responsible Disposal of Wastes at KHSC: LMS Safety 002 Course.

6.0 SOP HISTORY

SOP Number	Date Issued	Summary of Revisions
SOP-DBSW-01	01-DEC-2017	Original version.
SOP-DBSW-02	01-MAY-2019	Bi-annual review of SOP completed. SOP header format updated. SOP version number updated. SOP effective date updated. Removed “Contacts” section from SOP. Updated section number for “References” and “SOP History”. Under Section 4.0, under “Users Responsibilities”, under bullet 2, under sub-bullet 5, reference to unused cytotoxic sharps waste or unused cytotoxic medication added as sub-sub-bullet 1. Under Section 4.0, under “Users Responsibilities”, under bullet 2, under sub-bullet 6, replaced “Oxivir®” with “Oxivir®/Accel® INTERVention”. Under Section 4.0, under “Users Responsibilities”, under bullet 2, new sub-bullet 7 added, reference to red biohazardous waste bins/containers and red sharps bins/containers

		added. Updated "SOP History" section.