

## WASTE MANAGEMENT

Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
<p>Note: This section includes infectious and medication waste management. Also see 10 CSR 10-6.200 Hospitals, Medical, Infectious Waste Incinerators. Also see 19 CSR 30-20.011 for definitions of infectious waste.</p>					
Annually do you submit your hospital's application as a Hospital Infectious Waste Generator according to the requirements of 19 CSR 30-20.070?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Do you have an infectious waste management plan with an annual review identifying infectious waste generated on-site, the scope of the infectious waste program and policies and procedures to implement the plan? 19 CSR 30-20.114(1)(c)2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the plan include at least the following: a. contact information for responsible individuals? b. organizational chart? c. schematic(s) of waste disposal routes? d. definition of those wastes handled by the system? e. department and individual responsibilities? f. procedures for waste identification, segregation, containment, transport, treatment and disposal? g. emergency and contingency procedures? h. training and educational procedures? i. rules and other applicable institutional policy statements? 19 CSR 30-20.114(1)(c)2.A-C	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Does your plan include manufacturer's specifications for temperature, time and control devices for any infectious waste processing devices? 19 CSR 30-20.114(1)(C)3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If your hospital is exempt from infectious waste processing facility permit requirements of 10 CSR 80-70.010 and accepts infectious waste from off-site, does the plan include requirements for storage, processing and record keeping of this waste and the cleanup of potential spills in the unloading area? 19 CSR 30-20.114 (1)(C)2.B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does a trained operator operate the equipment during any infectious waste treatment procedures? 19 CSR 30-20.114 (1)(C)3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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Is the director of this program qualified by education, training and experience in the principles of infectious waste management? 19 CSR 30-20.114(1)(C)1.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is infectious waste segregated from other wastes at the point of generation and placed in distinct, clearly marked, leak proof containers or plastic bags appropriate for the characteristics of the infectious waste? 19 CSR 30-20.114 (a)(C)4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are containers for infectious waste identified with the universal biological hazard symbol? 19 CSR 30-20.114(1)(C)4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does all packaging maintain its integrity during storage and transport? 19 CSR 30-20.114(1)(C)4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are mechanisms in place to assure infectious wastes are never placed in gravity waste disposal chutes? 19 CSR 30-20.114(1)(C)4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Pending disposal, is infectious waste stored and separated from other wastes, in a limited-access enclosure posted with the biological hazard symbol? 19 CSR 30-20.114(1)(C)5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is this enclosure protected from vermin, in a dry area and provided with an impervious floor with a perimeter curb? 19 CSR 30-20.114(1)(C)5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the floor slope to a drain connected to the sanitary sewage system or collection device? 19 CSR 30-20.114(1)(C)5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If infectious waste is compacted, are the fluids and aerosols contained within the mechanical device and not released when the opened container is removed? 19 CSR 30-20.114(1)(C)5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the infectious waste management plan have separate provisions for waste stored 72 hours or more? 19 CSR 30-20.114(1)(C)5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If your hospital treats infectious waste on site by					

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autoclave sterilization: - is the unit operated in accordance with the manufacturer's recommendations? - is the autoclave's effectiveness verified at least weekly with a biological spore assay containing <i>Bacillus Stearothermophilus</i> ? - if the autoclave is used for other functions, does the infectious waste management plan include specific guidelines for its use? 19 CSR 30-20.114(1)(C)6.A.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If you use other decontamination technologies, are they approved by the DHSS?  Note: Bulk blood, suctioned fluids, excretions and secretions may be carefully poured down a drain connected to a sanitary sewer. 19 CSR 30-20.114 (1)(C)6.B.-C.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are infectious waste rendered innocuous disposed of in accordance with the requirements of <a href="#">10 CSR 80-7.010</a> ? 19 CSR 30-20.114(1)(C)6.D.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the program director maintain records of a. biological spore assay test if required by treatment methods? b. the approximate amount of waste disinfected or incinerated per hour measured by weight per load? c. the proper operation of the disinfection or incineration equipment? 19 CSR 30-20.114(1)(C)7.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is infectious waste transported off the premises of the hospital packaged and transported as provided in sections <a href="#">260.200-207, RSMo</a> ? 19 CSR 30-20.114(1)(C)8.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Note: If your hospital accepts infectious waste from small quantity generators as defined by 10 CSR 80.7.010 or from other Missouri hospitals in quantities exceeding 50% of the total poundage of infectious waste generated on-site you must notify the Department of Natural Resources and comply with requirements of sections <a href="#">260.200-207, RSMo</a> . The weight of infectious waste generated on-site shall be calculated by multiplying 1.5 pounds per day times the number of beds complying with DHSS standards for hospital licensure. Infectious waste generated off-site may be accepted by a hospital only if packaged according to <a href="#">10 CSR 80-7.010(2)(A)-(D)</a> . 19 CSR 30-20.114(1)(C)9.					

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<b>Medication Waste Management</b>					
<p>Have you identified a specific waste stream for medication waste including storage container type, storage prior to disposal, and final disposition for each of the following categories:</p> <p>a. general?  b. controlled substances?  c. radiologic?  d. infectious?  e. hazardous?  19 CSR 30-20.114(1)(D)1.A.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Are all medications returned to the pharmacy for disposal? (Exceptions: single doses that may be disposed of by staff at time of administration, doses that are an infectious hazard and radiopharmaceuticals.)  19 CSR 30-20.114(1)(D)1.B.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Are medications disposed of according to Missouri Department of Natural Resources, FDA, and EPA?  19 CSR 30-20.114 (1)(D)1.C.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Are your controlled substances wasted in accordance with 19 CSR 30-1.078?  19 CSR 30-20.114 (1)(D)1.D.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Do you dispose of unused radiopharmaceuticals by returning them to the supplier or according to Nuclear Regulatory Commission guidelines?  19 CSR 30-20.114 (1)(D)1.E.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
<p>Can you demonstrate that your process for disposal of hazardous medications, such as, but not limited to antineoplastic medications, is as follows:</p> <p>a. personnel who handle hazardous medications and/or medication waste are trained regarding collection, transportation, containment, segregation, manifest, and disposal?  b. waste is contained and segregated from others waste?  c. kept in a leak proof container and clearly labeled with a statement such as CAUTION: HAZARDOUS CHEMICAL WASTE?  d. held in a secure place?  19 CSR 30-20.114 (1)(D)1.F.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

**Helpful Hints**

- Waste management is titled Environmental Waste Management and Support Services in the hospital licensure rule.

**Key Resources and Links**

- [10 CSR 10-6](#)
- [19 CSR 30-20.114](#)
- [10 CSR 80-7](#)
- [260.200-207, RSMo](#)