

This policy has been adopted by UNC Hospitals for its use in infection control. It is provided to you as information only.

Special Pathogens Response Center (SPARC) SOP: Procedure for Solid Waste Management in the Special Pathogens Unit (SPU)	
Subject	This procedure defines a process for the safe disposal of solid waste generated by a patient receiving care in the Special Pathogens Unit (SPU).  Examples of solid waste include medical equipment, sharps, linens, privacy curtains, and used healthcare products (such as soiled absorbent pads or dressings), emesis pans, personal protective equipment, or byproducts of cleaning.  All solid waste generated by patients with a select agent pathogen is considered a Category A infectious substance and is regulated as hazardous material under the U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR; 49 CFR, Parts 171-180). Category A waste is an infectious substance in a form capable of causing permanent disability or life-threatening or fatal disease. At UNC Medical Center (UNCMC) solid waste generated by a patient with a special pathogen will be inactivated at an off-site facility.
Responsibility	All staff working in the SPU and consulting in the SPU are responsible for understanding and conducting procedures described in this SOP.
Supplies	<ul> <li>Leakproof red biohazard bags</li> <li>PPE required for special pathogens</li> <li>Waste container in patient's room</li> <li>Disposable absorbent pads/chux pads</li> <li>EPA registered disinfectant wipes active against non-enveloped viruses from EPA List L or List Q         <ul> <li>Super Sani Cloth (purple top wipes) – wet time is 2 minutes</li> <li>Bleach wipe (orange top wipes) – wet time is 4 minutes</li> </ul> </li> <li>Alcohol-Based Hand Rub</li> <li>Rigid outer receptacle that conforms to U.S. DOT HMR requirements for the transport of Category A DOT solid waste provided by the vendor.         <ul> <li>Rigid containers are stored on the Manning level of the Cancer Hospital – Room CM 213</li> <li>Absorbent material sufficient to absorb potential free fluid (if any) should be placed in the bottom of the rigid out packaging or the liner of the fiberboard outer packaging (e.g., disposable absorbent pad or towels) - Chux pads are appropriate</li> </ul></li></ul>
Procedure	Environmental Services leadership will contact Waste Management Sustainability  Services to notify them of a patient with a special pathogen.  • Primary Contact  • Jeff Cooper – National Account Manager  • 803-417-6194  • Jcoope17@wm.com  • General service and support:  • Kim Becker – Project Manager  • wmhsserv@wm.com



## Escalation

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## Primary Packaging of Medical Solid Waste in the Patient's Room

All primary packaging by double bagging of solid waste should occur in the patient's room and be performed by the primary HCP (i.e., doctors and nurses) wearing the appropriate special pathogen PPE.

- Line waste containers with a leak-proof biohazard bag.
- All non-sharps solid waste is to be placed in the biohazard bags.
- Do not fill the bags more than 2/3 to allow for safe closure and ease of lifting.
- Sharps are to be placed in a sharps container. Do not fill more than 2/3 full to allow safe closure.
- No liquid should be added to the bag.
- Closed sharps containers are placed in a biohazard bag.
- Close the bag so that it will not tear, puncture, or leak. Tie the bag closed with a single knot at the neck.
- Wipe the outside surface of the bag with EPA-registered disinfectant.
- Place the bag into a second biohazard bag.
- Close the bag with the same method so that it will not tear, puncture, or leak.
- Wipe the outside surface of the bag with an EPA-registered disinfectant.
- Store the disinfected closed bag in a designated area to await removal.

## **Secondary Packaging and Removal of Solid Waste**

- Staff in the room wearing appropriate special pathogen PPE should wipe the outside surface of the double-bagged waste with an EPA-registered disinfectant immediately before removing the waste from the room.
- Staff outside the patient's room will roll the rigid container to the outside of the room. Staff inside the room will place the double-bagged waste in the rigid outer container (with an absorbent liner).
- Before removal from the outside of the patient's room, staff wearing a gown, gloves, mask, and face shield should close the container and wipe the outer surfaces with an EPA-registered disinfectant.
  - NOTE: Staff should only handle the outer container/transport cart and NEVER open the container or handle the double-bagged waste
- Safely transport the container to the ground floor of the Women's Hospital and place it in the Environmental Services room (WHG0405) until pickup by the vendor.

## References

https://www.cdc.gov/vhf/ebola/clinicians/cleaning/handling-waste.html

U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR; 49 CFR, Parts 171-180

UNC SPARC Special Pathogen Unit (SPU) Standard Operating Procedure



Related Policies	
Responsible	UNC SPARC Program Manager UNC SPARC Medical Director