

## IE7: EPA PHARMACEUTICAL WASTE STORAGE AND DISPOSAL (OPTIONAL)

### Policy

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The facility will dispose of pharmaceutical hazardous and non-hazardous waste using an approved system of disposal that protects employees and the environment according to applicable state, and local law or regulations.

The facility will use an approved vendor for pharmaceutical waste disposal needs.

**Controlled substances are not considered to be hazardous pharmaceutical waste** and are not eligible for disposal as directed in this policy. (See Policy IE1: CONTROLLED SUBSTANCE DISPOSAL)

### Procedure

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- A. The facility shall segregate hazardous pharmaceutical waste designated or "listed" as "P-waste" and "U or D-waste" from other non-hazardous pharmaceutical waste. The facility will maintain separate containers for:
- 1) Non-hazardous pharmaceutical waste.
  - 2) Hazardous U and D-waste (may use the same container).
  - 3) Acutely hazardous P-waste (must be separated from all other pharmaceutical waste).
- B. **Note: Empty bottles and blister cards that once contained acutely hazardous pharmaceuticals or "P-waste" items may be considered pharmaceutical waste and will be placed in the P-waste container.**
- C. Some examples of the different types of P, U, and D-waste include, but are not limited to:

Example P-Waste Drugs	Example U and D-Waste Drugs
Epinephrine	Chemotherapeutic agents
Nicotine patches and lozenges	Insulin
Nitroglycerin	Reserpine
Phenol	Selenium
Physostigmine	Silver-containing products
Warfarin	Vaccines

- D. The facility should maintain approved containers to separate and securely store different types of pharmaceutical waste until it is scheduled for pick up.
- E. Authorized personnel who have access to medications should deposit pharmaceutical waste in the appropriately labeled container.
- F. Each container used to collect, separate, and store each type of pharmaceutical waste will be labeled with the type of waste to be stored in the container.
- G. The date the container is started is entered on the label. The date the container is filled is added when the container is full.
- H. Pharmaceutical waste containers must be maintained in good condition, kept closed and all waste placed in the container must be compatible with the container labeling. For example, U and D waste may not be placed in a container labeled for P-waste.
- I. A containment system should be in place to prevent a release into the environment should primary container fail or leak.
- J. The Administrator or designee must inspect all waste containers weekly and maintain a record of inspections (See Form 21: WEEKLY PHARMACEUTICAL WASTE AREA INSPECTION CHECKLIST).
- K. Paperwork and documentation maintenance includes the following:
  - 1) All paper work, including manifests and land bans, must be retained on-site and easily accessible for a minimum of 3 years, filed and separated by year.
  - 2) The Administrator or designee will determine if an annual report of waste generation and disposal must be submitted to the state environmental protection agency.
- L. Facilities should train all employees who handle pharmaceuticals on the appropriate management and disposal of pharmaceutical waste and emergency procedures upon hire and regularly according to regulation or applicable law.
- M. Employee records of training must be retained by facility as long as the facility exists.
- N. If there is a release of hazardous pharmaceutical waste that could threaten humans outside of the facility the Administrator will notify the U.S. National Response Center at (800) 424-8802.