

	POLICY Number: 7311-20-019 Title: Waste Management
Authorization <input type="checkbox"/> President and CEO <input checked="" type="checkbox"/> Vice President, Finance and Corporate Services	Source: Director, Supply Chain Management and Support Services Cross Index: Date Approved: June 2003 (IPC) Date Revised: January 11, 2013 Date Effective: January 18, 2013 Date Reaffirmed: Scope: SHR & Affiliates

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OVERVIEW

The disposal of wastes is primarily subject to provincial control and is based primarily on the Saskatchewan Biomedical Waste Guidelines 2008. Specific medical wastes that fall under provincial control include microbiological waste, pathology waste and blood specimens or blood products. This policy defines each waste type and the requirements. The complexity of services within the Saskatoon Health Region requires every department to use professional judgment for the interpretation and implementation of this policy for their areas.

DEFINITIONS

Classification and Definition of Waste Materials

General Waste (Black, Green or Clear Bag) means waste that does not pose a disease-related risk or threat to people or the environment. The general waste category includes:

- office waste,
- kitchen waste,
- waste without blood or body fluid, or contains only a trace amount of blood in diluted form i.e. suction liners, IV bags and tubings, urinary drainage systems, incontinent pads, gloves, rinsed hemodialysis tubing, peritoneal dialysis tubing,
- extracted teeth,
- nail clippings,
- hair,
- animal waste and bedding, that is non-pathogenic
- all other waste not included in other categories.

Items that have only scant/trace amounts of blood, exudates or secretions do not require segregation, labeling or special transport and disposal procedures.¹

¹ Canadian Standards Association. (2003). Handling of Waste Materials in Health-Care Facilities and Veterinary Health-Care Facilities. Canadian Standards Association.

Biomedical Waste

Refers to a portion of medical wastes that require special precautions due to the waste being:

- a) infectious;
- b) sharps;
- c) cytotoxic; or
- d) especially sensitive due to the nature of the waste (i.e., human body parts).²

This category represents only a small portion of the total waste generated by SHR but it is important that this waste be handled and disposed of properly due to the environmental, aesthetic and occupational concerns as well as risks to human health.

The biomedical waste includes:

- **Human Blood and Body Fluid Waste** (Yellow Bag). This consists of **items with more than scant/trace amounts of blood** and body fluids removed for diagnosis during surgery, treatment or autopsy. This does not include urine or feces.
- **Waste Sharps** (Yellow Bins). Waste sharps are clinical and laboratory materials consisting of needles, syringes, blades or laboratory glass, broken culture dishes, medical glassware, broken blood tubes and any other material capable of causing punctures or cuts that can penetrate skin or plastic disposal bags.
- **Human Anatomical Waste** (Red Bag or Recognized Symbol). This consists of human tissues, organs, and body parts (e.g. placentas, limbs, organs, tissues) but does not include teeth, hair and nails.
- **Microbiology Laboratory Waste** (Yellow Bag). This consists of laboratory cultures, stocks or specimens of micro-organisms, live or attenuated vaccines, human or animal cell cultures used in research and laboratory material that has come into contact with any of these aforementioned items.
- **Animal Biomedical Waste** - (Orange or Red bag) Waste that contains or is suspected of containing a pathogen that consists of animal tissues, organs, body parts, carcasses, bedding, fluid blood and blood products, items saturated or dripping with blood, body fluids contaminated with blood and body fluids removed during surgery, treatment, autopsy or for diagnosis.

Items contaminated with more than scant/trace amounts of blood/body fluids or secretions need to be treated as biomedical waste. If in doubt treat as biomedical waste.

Chemical Waste means discarded solid, liquid, and gaseous chemicals known to result from diagnostic and experimental work, cleaning and disinfecting procedures. Chemical waste may be hazardous or nonhazardous. For the purpose of choosing the most appropriate waste-handling method, hazardous chemical waste is considered to be waste that has the potential to harm life, property or the environment and is:

- toxic,
- corrosive (acids of $\text{pH} \leq 2.0$ and bases of $\text{pH} \geq 12.0$),
- flammable,
- reactive (explosive, water reactive, shock sensitive), or
- Genotoxic (carcinogenic, mutagenic, teratogenic or otherwise capable of altering genetic material).

Note: Nonhazardous chemical waste consists of chemicals other than those described above, such as sugars, amino acids, and certain organic and inorganic salts.

² Saskatchewan Ministries of Health, Environment and Advanced Education, Employment and Labour. Saskatchewan Biomedical Waste Guidelines. Regina. 2008.

Pharmaceutical Waste means pharmaceutical products such as drugs and medicinal chemicals that:

- are no longer usable in patient treatment and have been returned from patient care areas, have become outdated or contaminated, and
- are no longer required.

*Note: Items contaminated with pharmaceuticals do not normally pose a threat. However, those contaminated with cytotoxics and radiopharmaceuticals are considered to be cytotoxic and radiopharmaceutical wastes respectively.*³

Cytotoxic means wastes that contain drugs that inhibit or prevent the function of cells and are manufactured, sold or represented for use in treating neoplastic or other conditions. This type of wastes includes intravenous needles, tubing, syringes used to inject cytotoxic drugs and personal protective equipment that is used when handling cytotoxic drugs. Cytotoxic wastes are to be segregated from non-hazardous waste and biomedical wastes.⁴

Pressurized Container Waste means aerosol cans or disposable compressed gas containers that may explode if incinerated or accidentally punctured.

Special Precaution Waste means waste associated with patients or animals where medical personnel have identified that the waste is likely to contain a pathogen that usually produces very serious disease and may be readily transmitted from one individual to another or from animal to human directly or indirectly or by casual contact require special waste precautions. Special precaution wastes shall be segregated at the point of generation from other classes of biomedical and general wastes.

Construction and Demolition (C&D) waste materials consist of the debris generated during the construction, renovation, and demolition of buildings. C&D materials often contain bulky, heavy materials, such as concrete, wood, metals, glass, drywall and salvaged building components.

Recyclables

Recyclable material is a significant portion of the waste stream in health-care facilities. Saskatoon Health Region is committed, under the guiding value of Stewardship, to make every reasonable effort to remove recycling from the waste stream. In some areas, options for recycling may be limited. As such, recycling will not be a requirement where it is not feasible, for geographic or fiscal reasons.

It is, however, considered best practice and the direction SHR, and other health regions in Canada are moving toward. For the purpose of this document, recycling refers to paper, cardboard, plastic, boxboard, beverage containers, tin and other metals.

1. PURPOSE

The purpose of this policy is to establish SHR's requirements for handling and disposal of specific waste materials. This policy

- identifies wastes that may be a source of an increased risk of transmission of infectious disease,
- minimizes occupational health risks and to ensure safe disposal of health-care waste,
- defines waste segregation categories.

³ Refer to tri-hospital pharmacy policy #

⁴ Refer to Tri-hospital nursing policy #1065 and #1085.

2. PRINCIPLES

- 2.1 Stewardship of resources includes waste minimization and proper management. SHR supports reducing the consumption of natural resources and resulting pollution into our communities.
- 2.2 The key elements in the management of waste are safe storage and handling, minimizing waste to landfill, consistency among sites and transparency of the process.

3. POLICY

- 3.1 Segregation of waste shall occur at point of use in a safe and fiscally responsible manner.
- 3.2 SHR adheres to the Saskatchewan Biomedical Waste Management Guidelines.
- 3.3 All waste shall be:
 - 3.3.1 Segregated at the point of generation;
 - 3.3.2 Contained in packaging that holds the contents until the point of disposal;
 - 3.3.3 Disposed of in a manner that is practical and efficient, yet minimizes hazards.
 - See Procedure and Appendixes.
- 3.4 Biomedical waste must be stored in a designated location with limited access to authorized personnel.
- 3.5 A disposal contractor shall be used for proper disposal of biomedical and other hazardous waste.
- 3.6 All transportation of infectious waste must comply with *The Transportation of Dangerous Goods Act and Regulation, Transport Canada*.
- 3.7 Health-care workers shall ensure all waste generated in the community, as course of their employment with SHR, is segregated, packaged, stored and transported for suitable disposal.

* Patients in the home hemodialysis program are responsible for handling and disposing of their medical waste from their treatment according to the home hemodialysis policy and procedure manual.

- 3.8 Any near miss or actual incident related to the segregation, packaging, storage or transportation shall be reported through the SHR Incident Reporting procedure.

All Instances of non -compliance with this policy must be reported to OH&S incident report to 655-0820 (urban, or 1-866-966-0820 (rural) with follow up by the manager or their designate to take action as appropriate.

4. ROLES AND RESPONSIBILITIES

4.1 All Staff

Staff members segregate all waste into the appropriate receptacle and handle all waste in adherence to this policy.

4.2 Housekeeping Staff

The collection, handling and storage of all waste.

4.3 Infection Prevention & Control Professionals, Occupational Health and Safety Professionals

Advisory role- if there is a concern that standards are not being complied with.

5. POLICY MANAGEMENT

The management of this policy including policy education, monitoring, implementation and amendment is the responsibility of the Director, Supply Chain Management and Support Services.

The monitoring and implementation of this policy for health-care waste generated as a result care and or treatment within client homes is the responsibility of Home Care staff.

6. NON-COMPLIANCE/BREACH

Repeated non-compliance may result in disciplinary action, up to and including termination of employment and/or privileges with SHR.

7. REFERENCES

- Saskatchewan Biomedical Waste Management Guidelines, 1998
- Guidelines for the Management of Biomedical Waste in Canada CCME (Canadian Council of Ministers of the Environment). February, 1992.
- Saskatoon Health Region Hazardous/chemotherapy Drugs- Safe Handling, #1085
- Saskatoon Health Region Hazardous Drugs (Non-chemo) Administration and Precautions, # 1044.
- Saskatoon Health Region. Information Classification, Labeling, and Handling, #7311-75-010
- CSA Standard Z317.10-09 handling of waste material in health-care facilities and veterinary health-care facilities.

PROCEDURE

Number: 7311-20-019

Title: Waste Management

Authorization

- President and CEO
- Vice President, Finance and Corporate Services

Source: Director of Supply Chain Management and Support Services

Cross Index:
Date Approved: June 2003 (IPC)
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Scope: SHR & Affiliates

1. PURPOSE

The purpose of this procedure is to establish the process for safe handling and disposal of waste materials.

2. PROCEDURE

2.1 Waste Segregation

All waste shall be:

(a) Segregated at the point of generation; (b) contained in packaging that holds the contents until the point of disposal; and (c) disposed of in a manner that is practical and efficient, yet minimizes hazards.

Segregate waste to prevent hazardous waste from entering inappropriate waste streams and divert problematic waste from entering incorrect waste streams.

- Correct segregation is necessary to ensure that materials which are reusable or recyclable are not discarded and to safeguard the health of the community.
- Correct segregation at the point of generation and containment of all wastes are required and the mixing of wastes is not permitted.

Categories include:

1. General waste
2. Biomedical
3. Chemical
4. Pharmaceutical
5. Cytotoxic
6. Pressurized container
7. Special Precaution
8. Construction
9. Recycling
10. Grounds/Yard
11. Miscellaneous

2.2 Packaging

Apart from segregation, the aim of packaging waste containers with colored bags and labels is to ensure that little or no hazard is presented to personnel involved in handling, transporting or disposing of the waste. Packaging must also satisfy the requirements of various authorities with particular statutory requirements about aspects of waste generation, handling and disposal. For specific packaging, storage and handling instructions, see Appendix 1: Saskatoon Heath Region Waste Management Guidelines.

2.3 Storage

2.3.1 Storage occurs after the accumulation and segregation of waste into specified container(s) and is as follows:

- **Primary storage area:** The area of the facility where waste originates, e.g., client room, laboratory, operating room.
- **Intermediate storage area:** The area of the facility, where waste is stored following its collection from the primary storage area, and before being removed to the final storage area e.g. dirty service room. This will necessarily include the means by which the waste is transported.
- **Final storage area:** The area of the facility where waste is stored just before disposal.

2.3.2 Biomedical Waste:

After biomedical waste has been segregated, collected and moved from its point of generation, it shall be held in a final storage area that is:

- Totally enclosed and separate from supply rooms or food preparation areas;
- lockable and access restricted to authorized personnel only;
- identified as containing biomedical waste with biohazard symbol clearly displayed;
- never used for storage of materials other than waste; Note: In cases where the storage area is used for both general and biomedical waste storage, care shall be given to prevent contamination of general waste from biomedical waste;
- permanently marked to prevent recycling as a food storage appliance (as in the case of a domestic-type freezer or cold storage unit);
- kept at a temperature of 4 degrees C or lower for material stored for more than four (4) days;
- Thoroughly cleaned, including floors, walls and ceilings, in accordance with the facility's established procedures as established by Infection Control Committee, Biosafety Officer or other appointed persons.

2.3.3 Chemical Waste

- All containers shall be closed and not overfilled

- Label in accordance with the Transportation of Dangerous Goods Act and the Transportation of Dangerous Goods Regulations.⁵ Information on the label shall include:
 - generator of the chemical waste
 - origin of waste
 - full chemical name(s), no abbreviations
 - a complete list of all the chemicals in the container

2.3.4 Cytotoxic Waste

- refer to Tri-site Nursing Policy 1065

2.4 Transport and Disposal

2.4.1 Ensure carts for carrying waste shall be:

- capable of containing the waste;
- designed to prevent spillage and leakage;
- constructed of materials that permit effective cleaning; and
- designed to minimize the physical strain of loading and unloading materials.

2.4.2 Open carts may be used to transfer waste contained within plastic bags provided that bags are securely tied.

2.4.3 Routes for the movement of waste in health-care facilities must be planned such that passage through client, public, and other clean areas is minimized. Passage through food and linen areas should be avoided.

2.5 Health-Care Waste Originating in Client's Homes:

Health-care workers are responsible for ensuring that the waste they generate in the community is managed correctly to ensure the waste is segregated, packaged, stored and transported for suitable disposal.

* Patients in the home hemodialysis program are responsible for handling and disposing of their medical waste from their treatment according to the home hemodialysis policy and procedure manual.

2.5.1 Biomedical Waste:

- Biomedical waste generated by health-care staff shall be segregated from general waste at the source and placed into approved biomedical waste containers.
- Persons filling the container with biomedical waste must not fill it over the quantity limit line or above $\frac{3}{4}$ full.
- The container used for biomedical waste must be designed, constructed, filled, closed, secured and maintained so that under normal conditions of transport, including handling, there will be not accidental release of contents in the container.
- The container used for biomedical waste must be secured during transport in such a way as to prevent, under normal conditions of transport, damage to the container that could lead to accidental release of the

⁵ Government of Saskatchewan. 2003. The Dangerous Goods Transportation Act. <http://www.gp.gov.sk.ca/documents/English/Statutes/Statutes/D1-2.pdf>

contents in the vehicle (for e.g. in the trunk of the vehicle in a transport tub labeled with a yellow biohazard sign).

- The biomedical waste is to be transported to a biomedical waste storage area. This area is to be identified as containing biomedical waste with biohazard symbol clearly displayed.
- Biomedical waste is to be kept at a temperature of 4 degrees C or lower for material that will be stored more than 4 days.
- A disposal contractor is to be used for proper disposal of biohazardous waste.

3. PROCEDURE MANAGEMENT

- 3.1** The management of this procedure including procedures education, monitoring, implementation and amendment is the responsibility of the Director, Supply Chain and Support Services.
- 3.2** The monitoring and implementation of this policy for health-care waste within client homes is the responsibility of the Saskatoon Health Region home care department.

4. NON-COMPLIANCE/BREACH

Non-compliance with this procedure will require an OHS incident report to 655-0820 (urban, or 1-866-966-0820 (rural) with follow up by the manager or their designate to take action as appropriate.

Repeated non-compliance may result in disciplinary action, up to and including termination of employment and/or privileges with SHR.

5. REFERENCES

- Saskatchewan Ministries of Health, Environment and Advanced Education, Employment and Labour. Saskatchewan Biomedical Waste Guidelines. Regina. 2008.
<http://www.environment.gov.sk.ca/adx/asp/adxGetMedia.aspx?DocID=217,216,104,81,1,Documents&MediaID=1099&Filename=Biomedical+Waste+Management.pdf>
- Saskatchewan Environment. Disposal and Management of Biomedical Waste for Waste Disposal Grounds. 2008. <http://www.saskh20.ca/PDF/EPB306.pdf>
- Government of Saskatchewan. 2003. The Dangerous Goods Transportation Act. <http://www.qp.gov.sk.ca/documents/English/Statutes/Statutes/D1-2.pdf>
- CSA Standard Z317.10-09 handling of waste material in health-care facilities and veterinary health-care facilities.

Appendix 1: Saskatoon Health Region Waste Management Guidelines

	Waste Segregation Category	Examples of Waste	Packaging: Colour Bags/ Type Container	Disposal Method	Special Considerations/PPE Required	Comments
1.	General	<ul style="list-style-type: none"> - Office/kitchen, glass - Disposable gloves, pads - Soiled dressings - Drainage bags - Hair, extracted teeth, nail clippings - Supplies and waste from hazardous drug administration - IV bags and tubing, suction liners and chest tube containers with only trace amounts of blood or body fluid - sanitary napkins 	<ul style="list-style-type: none"> - Black, dark green or clear only - Bins must be grey, black, brown or green. No red, orange or yellow bins shall be used for general waste. 	-compacted and land filled	<ul style="list-style-type: none"> -The IV spike is considered a sharp if removed from the IV bag, otherwise is regular waste -I.V. bags and tubing used for administration of chemotherapy drugs – see chemo waste. PPE: disposable gloves 	Glass should not be placed in trash compactors, thus at RUH, SCH and SPH should be placed in sharps containers. All other sites: non clinical glass waste, such as glass from maintenance and kitchen areas, i.e. broken window panes, discarded glass bottles should be collected in separate puncture resistant containers.
2.	Biomedical Waste			Compacting of biomedical waste is prohibited.	PPE: disposable gloves. Face shield when risk of splashing.	
	A) Human Blood and Body Fluid	<ul style="list-style-type: none"> - Laboratory blood samples - Thoracentesis, Paracentesis, cerebro-spinal 	Yellow bag with biohazard symbol, placed	Liquids can be drained into the sanitary sewer, provided the local		

Appendix 1: Saskatoon Health Region Waste Management Guidelines

Waste Segregation Category	Examples of Waste	Packaging: Colour Bags/ Type Container	Disposal Method	Special Considerations/PPE Required	Comments
Waste	fluid, sputum, etc. - Suction liners, chest tubes, fecal collection bags, blood bags foley bags with more than trace amounts of blood or body fluids - Blood saturated sponges, bedding, dressings, etc.	in biomed tote	municipality approves. Procedure for blood is to not empty into the sewer, but to put intact containers into biomedical waste. Blood saturated sponges, dressings, etc. must be handled as biomedical waste.		
B) Sharps	Needles, scalpel blades, lancets, capillary tubes, broken pipettes and medical glassware, broken blood tubes, retorts, and broken culture dishes, slides and cover slips, tubing with the needle still attached, surgical staples and other objects that can penetrate skin or plastic disposal bags	Puncture Resistant Sharps Containers with biohazard symbol	Sharps containers shall not be completely filled, as overfilling can pose a hazard to those persons using and discarding the containers. Lids shall be securely fastened. Note: <i>Procedure is to fill sharps containers to the fill line and no more than three-quarters of their usable volume.</i>	Sharps used to prepare or administer chemotherapy agents must be disposed of into designated Chemotherapy sharps containers	*Where facilities exist, unbroken glass that has not had contact with infectious waste may be recycled.*
C) Human/ Anatomical	- Placentas - Organs - Tissue - Limbs	Red bag with biohazard symbol, placed in biomed tote			
D) Micro Laboratory Waste	- cultures, stocks or specimens of micro-organisms, live or attenuated vaccines, human or animal cell cultures	Yellow bag with biohazard symbol, placed in biomed tote	Method: - autoclave and landfill - If not autoclaved, needs to be handled as biomedical waste		

Appendix 1: Saskatoon Health Region Waste Management Guidelines

	Waste Segregation Category	Examples of Waste	Packaging: Colour Bags/ Type Container	Disposal Method	Special Considerations/PPE Required	Comments
	E) Animal Biomedical Waste		Orange bag with biohazard symbol, placed in biomed tote	Segregate at the point of generation from non-hazardous wastes (e.g., non-pathogenic animal wastes) and should be segregated from other classes of biomedical wastes.		
3.	Chemical Waste	Cleaning agents, disinfectants, acids, flammables, lead, etc. Elemental mercury: Refer to procedure #7311-95-010	Container of origin For mercury, Break-resistant, airtight container labeled "Hazardous Waste - Elemental Mercury"	Contact Envirotec at 244-9500. Provide cost centre to be charged to and MSDS upon pick up. Departments such as laboratory may use vendor of choice.	PPE as per MSDS	Hand sanitizers are a flammable substance and as such, expired containers should be handled by Envirotech. Large quantities can be donated to Food for the Hungry in Saskatoon. 374-6767.
4.	Pharmaceutical Waste	All medications		All unused drugs are returned to pharmacy for disposal.		
5.	Cytotoxic/ biohazardous	Items in contact with chemotherapeutic drugs: needles, vials, tubing, gloves, incontinent pads, etc	1. Hazardous waste soft sided container with red bag for pt. rooms.	Third Party Biomedical Waste disposal contractor	Each department is responsible for cleaning up chemo spills in their area. Spills kits must be available in all areas	Community: These wastes are to be stored in red sealed containers and

Appendix 1: Saskatoon Health Region Waste Management Guidelines

	Waste Segregation Category	Examples of Waste	Packaging: Colour Bags/ Type Container	Disposal Method	Special Considerations/PPE Required	Comments
			When full, bag is zip tied closed and placed in biomed tote 2. Tote will be zip tied closed when full. 3. Cytotoxic label applied to lid of container.		where chemotherapy drugs are administered (SPD 201903). For further information see Tri-site Nursing Policy 1065. PPE: Double Nitrile glove, low permeable long sleeved gown, and face shield for handling. For bin removal, disposable gloves.	bear a cytotoxic symbol and marked in accordance with Transport of Dangerous Goods requirements.
	a) Sharp & Fluid Resistant Waste Container	Items contaminated with cytotoxic drugs - Sharps, IV tubing, IV bags & syringes, Foley bag - Materials saturated with drug	Must be labeled with cytotoxic label	Third Party Biomedical Waste disposal contractor		
	b) soft-sided Cytotoxic Drug Waste Container	Items used in drug administration. Disposable impervious gowns, gloves, masks.	Soft sided container with red bag for pt. rooms. When full, bag is zip tied closed and placed in biomed tote	Third Party Biomedical Waste disposal contractor		
6.	Pressurized Containers	Aerosol cans Depressurized cylinders deemed disposable	Black	Land-filled (disposed of with general waste) Can be handled as scrap metal once depressurized	Refillable compressed gas cylinders shall be returned to manufacturer or distributor.	

Appendix 1: Saskatoon Health Region Waste Management Guidelines

	Waste Segregation Category	Examples of Waste	Packaging: Colour Bags/ Type Container	Disposal Method	Special Considerations/PPE Required	Comments
7.	Special Precaution Waste	Examples of this include smallpox, hantavirus, Ebola viruses and others listed in TDG, 6.2 Table SOR, 2008-34.	Orange bag with biohazard symbol, placed in biomed tote	Segregated at the point of generation from other classes of biomedical and general wastes	Containers must ensure no leakage In the community, contact MHO, Infection control and/or public health immediately.	
8.	Construction, Renovation & Demolition Waste	Concrete, bricks, rebar, gravel. Drywall accepted in Craik.	Collect and store in dedicated bin	Saskatoon- City of Saskatoon depots ⁶ Rural- landfill	In Saskatoon, call 975-2331 for information.	
9.	Recyclables	Cardboard, paper, boxboard Plastic Beverage containers Tin cans, metals, batteries * As of 2012, glass cannot be recycled in Saskatoon through our current vendor- Loraas Recycles.	Cardboard- loose Paper- best handled as confidential Other- Must be collected in clear bags	Urban- vendors such as Loraas Recycles, SARCAN, COSMO PDM - batteries Rural- recycle where facilities exist	For tips on recycling in Saskatoon, contact the FM Sustainability Coordinator, 655-0676 or Jocelyn.orb@saskatoonhealthregion.ca	Fluorescent bulb (and CFL) recycling available at RUH, SCH, SPH and PRC in Saskatoon. Other sites contact FES for more info. Paper should be placed into the secure shredding bins. An external company approved by SHR may be

⁶ All construction & demolition materials should be taken to the Nicholson site (8th street and Nicholson). The hours of operation are from 7:00 am to 4:30 pm Monday – Friday. They accept concrete, asphalt, gravel, bricks, paving stones, tiles, dirt, and clean sand. There is currently no fee to use this site (Oct, 2010).

Appendix 1: Saskatoon Health Region Waste Management Guidelines

	Waste Segregation Category	Examples of Waste	Packaging: Colour Bags/ Type Container	Disposal Method	Special Considerations/PPE Required	Comments
						contracted to pick up and securely shred paper. Shredding may be performed internally with a cross-cut shredder.
10.	Grounds	Grass clippings, tree branches	Loose or bagged, bags must be opened and removed at compost site	Urban- Haul to City of Saskatoon compost sites (open April to November) Rural- compost where facilities exist, otherwise landfill	http://www.saskwastereduction.ca/resources/Composting/COS-depots.html (information on what is accepted and how to drop it off)	
11.	Miscellaneous	Mice and Pigeon Droppings	Bag as regular garbage.	No special disposal required.	PPE: Use goggles, gloves and a dust mask. Place paper towel over the droppings. Spray paper towel with disinfectant cleaner. Allow 10 min of contact time prior to clean up (important to allow aerosols to settle before cleaning up).	

Examples of items that are considered General (Non-biomedical) Waste

FIGURES 1 & 2

Examples of dressings with minimal dried blood. Example of sponges used for prepping a patient or surgery. The solution is a disinfectant. The sponges do not have blood or body fluids on them.



FIGURE 3

FIGURES 4



Figure 3 shows only trace amount blood on gloves

Figure 4 shows a container that is considered to be non-biomedical/general waste when they:

- contain only a trace amount of blood in diluted form;
- are of a closed circuit type and cannot open easily; and
- do not contain a fluid that has been classified as being infectious.

Note: Err on the side of caution. When in doubt, it is recommended that waste of this type be considered to be biomedical waste.

Examples of Items That are Considered Biomedical Waste



FIGURE
Gauze saturated with blood



FIGURE 5 & 6
Suction canister with blood; suction canister with sputum



FIGURE 9 & 10
Bags with more than trace amounts blood



FIGURE 10
Unknown bloody substance and IV sharp



For more Information, see
<http://www.health.gov.sk.ca/biomedical-waste-management>