Non-Hospital Medical and Surgical
Facilities Accreditation Program

Waste Management

	Guidance: Non-anatomical biomedical waste includes but is not limited to human diagnostic specimens and human blood and body fluids (e.g. items saturated with blood, body fluids removed during surgery, treatment or for diagnosis) not including saliva, feces, vomit, urine or tears. This includes items that would release liquid or semi-liquid blood if compressed. Items contaminated with scant/trace amounts of blood/body fluids or secretions are considered general waste.	
WMGT1.3.1	Non-anatomical biomedical waste is placed in a	colour-coded waste container that is labelled with the biohazard symbol.
WMGT1.3.2		

WMGT1.4.2	Fluid general waste is disposed of in a manner that minimizes exposure through spills, splash backs and inhalation of aerosolized particles. *Guidance: Bodily fluid (e.g. saliva, feces, vomit, urine) that does not contain any visible blood is considered general waste and can be disposed of in a sanitary sewer. This may be performed by manually dumping the fluid waste into a waste hopper or by using a reusable fluid disposal machine that is connected to the facility's plumbing system. However, if the bodily fluid is collected through suctioning, single-use suction liners should be used so that the liner and lid are removed in a single step. The suction liner and lid should then be tightly sealed/closed after use and placed carefully into a . Some suction liners are sold with solidifying agents pre-installed, and some solidifying agents can be added using a closed-delivery system (e.g. Canister Express PremiGuard™ Cap). However, adding a solidifier to fluid disposed as biomedical waste is not required, and fluid waste should not be removed from a contained system (i.e. to add solidifier) as this increases risks of exposure to potentially infectious agents through spills, splash backs and inhalation of aerosolized particles. Fluid waste cannot be disposed of into clean sinks (i.e. MDR, hand hygiene).*
	Guidance: Contaminated sharps include but are not limited to scalpel blades. Unused drug vials and ampoules are not considered contaminated sharps.
WMGT1.5.1	Sharps and similar wastes are placed in a "sharps" container that is labelled with the biohazard symbol. *Guidance: Cytotoxic sharps waste (e.g. Mitomycin) is placed in a "cytotoxic sharps" container that is labelled with the cytotoxic and biohazard symbols.*
WMGT1.5.2	Sharps containers are accessible for convenient sharps disposal.
WMGT1.5.3	Sharps containers are no more than three-quarters full or filled only to the manufacturer-specified fill line. *Guidance: Overfilling poses a hazard.*
WMGT1.5.4	Sharp container lids are securely fastened/locked when full.
WMGT1.5.5	There is safe handling and disposal of sharps. *Guidance: Safe work procedures are implemented (i.e. immediate disposal of sharps after use, prohibiting the recapping of sharps, and making use of a neutral zone or hands-free technique for passing sharp instruments, blades and needles).*
	Guidance: Contaminated sharps include but are not limited to scalpel blades. Unused drug vials and ampoules are not considered contaminated sharps.

WMGT1.10.11	A disposal contractor is used for the proper disposal of biomedical and other hazardous waste.

WMGT1.12.2

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December 5, 2019	Waste storage area cleaning schedule revised.