

Evaluating Pharmaceutical Wastes

Waste/Hazardous Waste #4.45a, August 2004

This fact sheet is intended to help health care providers correctly identify waste pharmaceuticals that are hazardous.

Contents

Environmental	
Concerns 1	
What is a pharmaceuti	
cal waste?1	
Must one evaluate all	
discarded pharmaceuti	
cal materials?1	
Hazardous Pharmaceu	
ticals Regulated by	
Other Rules1	
Evaluation Tool 2	
More Information 2	
Contacts 2	
Flowchart 3	
Flowchart Notes 4	

Environmental Concerns

Health care facilities can generate hazardous waste from many sources, including disposal of pharmaceuticals. Hazardous waste, if managed improperly, may harm human health and the environment.

This fact sheet offers general guidance only to help health care providers **evaluate pharmaceutical wastes** (determine whether they meet the definition of hazardous waste). For help identifying and evaluating nonpharmaceutical wastes commonly generated at health care facilities and for information on proper disposal of wastes, see the fact sheet entitled *Managing Waste from Health Care Providers*, available on the Minnesota Pollution Control Agency (MPCA) Web site at: http://www.pca.state.mn.us/publications/ w-hw3-34.pdf

What is a "pharmaceutical waste"?

Pharmaceutical waste may include, but is not limited to:

- expired drugs;
- patients' personal medications;
- waste materials containing excess drugs (syringes, IV bags, tubing, vials, etc.);
- open drugs that cannot be used;
- containers that held drugs;
- drugs that are intended to be discarded; and
- contaminated garments, absorbents and spill cleanup material, except for materials with only trace contamination.

You must evaluate each pharmaceutical waste to determine whether it is hazardous, then dispose of it properly.

Must one evaluate all discarded pharmaceutical materials?

All discarded pharmaceutical materials must be evaluated except for these two situations:

1. Sometimes pharmaceuticals may be returned to the manufacturer or a reverse distributor. Because of their potential for reuse, these pharmaceuticals are not considered waste and therefore, are not subject to evaluation. Pharmaceuticals managed this way must not be mixed together, leaking, partially used liquids or pastes, inherently waste-like or display any other characteristics that would reasonably preclude their beneficial reuse as products.

2. Medical supplies and containers that are "RCRA empty" (empty as defined by RCRA – the Resource Conservation and Recovery Act) are not subject to evaluation. In this case, "RCRA empty" means that **all** of the following criteria are met:

- all material that can be removed by normal means has been removed **and**
- less than 3% by weight of the total container capacity remains **and**
- supplies and containers do not contain residue from a P-listed hazardous waste (see note 2 on page 4).

Dispose of waste that meets the definition of "RCRA empty" as infectious or solid waste – whichever is appropriate. To determine if a waste is P-listed, see note 2 on page 4 and the fact sheet entitled *P List of Acute Hazardous Wastes* on the MPCA Web site at: http://www.pca.state.mn.us/publications/ w-hw2-02.pdf

Pharmaceutical Hazardous Wastes Regulated by Other Rules

Sometimes pharmaceutical wastes are regulated by both hazardous waste rules and other rules. For example,

- pharmaceutical hazardous wastes may also be regulated by the MPCA and Occupational Safety and Health Administration (OSHA) as infectious waste, such as a syringe containing a pharmaceutical with a mercury preservative;
- pharmaceutical hazardous wastes may also be regulated by the U.S. Drug Enforcement Agency (DEA) as a controlled substance, such as waste phentermine;
- pharmaceutical hazardous wastes may also be regulated by the U.S. Nuclear Regulatory Commission (USNRC) as a radioactive waste, such as waste liquid scintillation cocktail.

When evaluating a waste, be sure to consider all regulations – not just hazardous waste – that affect how you must manage and dispose of the waste. Remember, the guidance offered in this fact sheet only considers hazardous waste regulations.

Evaluation Tool

Use the attached flowchart to determine whether a pharmaceutical waste is hazardous. You will need to also determine whether the waste is regulated under other rules as discussed above.

Before you begin, make a list of all pharmaceuticals used in your health care facility. Follow the flowchart for **each** pharmaceutical. **You must evaluate all pharmaceutical wastes in your facility.**

More Information and Contacts

Waste Management – The MPCA and your county have waste management staff available to help you with your waste management questions (see contact list). Contact your county or the MPCA office nearest you for help.

For more information about and assistance reducing the amount of hazardous waste you generate (which generally lowers disposal costs), contact the Minnesota Technical Assistance Program (MnTAP).

Sewering – Do not discharge pharmaceutical wastes to an individual sewage treatment system (septic tank).

Remember: Get approval from your wastewater treatment plant operator before discharging any pharmaceutical

wastes. Be sure to notify the operator of all ingredients (actives and all others) in any wastes to be sewered.

Facilities in the Twin Cities Metropolitan Area: check with Metropolitan Council Environmental Services (MCES) Industrial Waste Section.

Facilities in Greater Minnesota: check with your local wastewater treatment plant operator or the MPCA office nearest you.

Fact Sheets – The MPCA has fact sheets that provide detailed information about Minnesota's hazardous waste requirements. Find them on the MPCA Web site at http://www.pca.state.mn.us/waste/pubs/business.html

Web Links – Find more information for the health care provider as well as links to other helpful Web sites on the MPCA Health Care page at:

http://www.pca.state.mn.us/industry/healthcare.html

Find information on the Memorandum of Understanding between the U.S. EPA and the American Hospital Association on the Hospitals for a Healthy Environment Web page:

http:// www.h2eonline.org

Metro County Hazardous Waste Offices		
Anoka County	. (763) 422-7093	
Carver County	. (952) 361-1800	
Dakota County	. (952) 891-7557	
Hennepin County	. (612) 348-3777	
Ramsey County	. (651) 773-4466	
Scott County	. (952) 496-8177	
Washington County	. (651) 430-6655	
Web Site		

http://www.co.[county name].mn.us

Minnesota Pollution Control Agency

Toll free (all locations)	(800) 657-3864	
Brainerd	(218) 828-2492	
Detroit Lakes	(218) 847-1519	
Duluth	(218)723-4660	
Mankato	(507) 389-5977	
Marshall	(507) 537-7146	
Rochester	(507) 285-7343	
St. Paul	(651) 297-2274	
Willmar	(320)214-3786	
Web Site http://www.po	ca.state.mn.us	

Minnesota Technical Assistance Program (MnTAP)

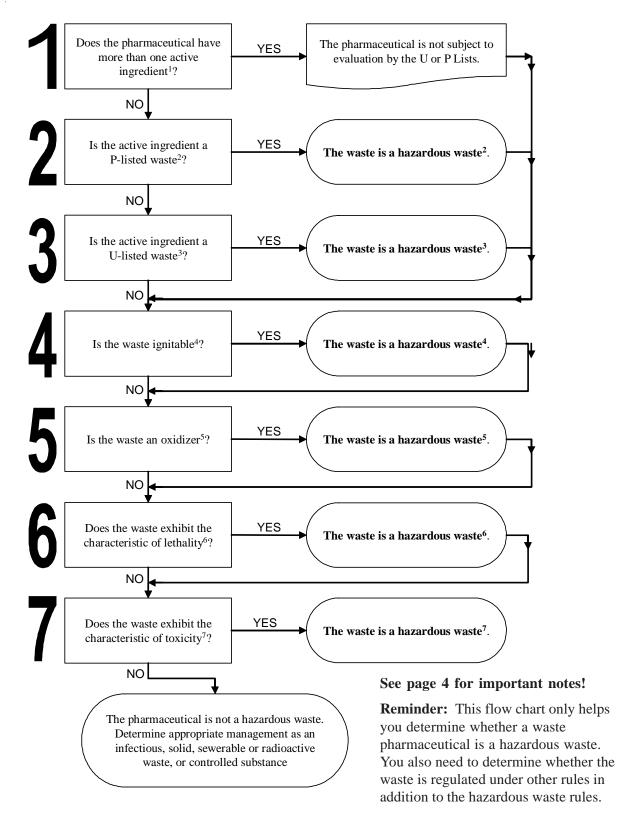
Toll free	. (800) 247-0015
Minneapolis	. (612) 624-1300
Web Site http://www.i	nntap.umn.edu



Flow Chart Evaluation Tool

Remember, you must evaluate every pharmaceutical waste in your facility!

The explanations given on page 4 corresponding to each step contain important information that will help ensure correct evaluation and proper management.



Flow Chart Notes

The **active ingredient** is the component that performs the function of the product. Fillers, solvents, carriers, propellants, preservatives, etc. are not active ingredients.

2 For a list of pharmaceuticals on the **P List**, see hazardous waste fact sheet #2.02, *P List of Acute Hazardous Wastes*, on the MPCA Web site: http://www.pca.state.mn.us/publications/w-hw2-02.pdf

Under a revision to the federal regulations adopted by a program management decision in Minnesota, pharmaceuticals placed on the P and U lists solely for the characteristic of ignitability, corrosivity or reactivity that do not exhibit that characteristic at the point they become waste are not considered P or U-listed hazardous wastes. However, they must still be evaluated for all other hazardous waste criteria. For more information, see the fact sheet "*Exclusion of Some Characteristic Wastes*" on the MPCA Web site: http://www.pca.state.mn.us/publications/w-hw8-01.pdf

Dispose of an unused or unusable pharmaceutical (e.g. open medication, residual IV solution) P- and U-listed wastes as hazardous wastes. Manage contaminated equipment, garments, absorbents and spill clean-up materials as hazardous wastes. Used pharmaceuticals (e.g. removed nicotine patches) are not considered P- or U-listed wastes; however, you must evaluate them for all other hazardous waste criteria. Waste residue remaining in a used syringe is considered a used pharmaceutical.

Containers that held a P-listed pharmaceutical waste are also hazardous unless they are triple-rinsed; the rinseate is also hazardous (See hazardous waste fact sheet #4.16, *Managing Empty Containers*, on the MPCA Web site http://www.pca.state.mn.us/ publications/w-hw4-16.pdf for an explanation of triple rinsing and more information). Rinsing is not recommended for containers that are also infectious waste; manage them as a hazardous waste.

3 For a list of drugs on the U list, see hazardous waste fact sheet #2.03, *U List of Hazardous Wastes* on the MPCA Web site at:

http://www.pca.state.mn.us/publications/w-hw2-03.pdf

Manage an unused or unusable pharmaceutical (e.g. open medication, residual IV solution) listed on the U List as a hazardous waste* .

Manage contaminated equipment, absorbents, other materials and spill materials as hazardous waste.

Ignitable wastes have a flash point less than 140°F or meet one of the other criteria for ignitability given on hazardous waste fact sheet #2.04, *Characteristic*

Waste/Hazardous Waste #4.45a, August 2004

Wastes, on the MPCA Web site at: http://www.pca.state.mn.us/publications/w-hw2-04.pdf

Manage a waste pharmaceutical that is ignitable as a hazardous waste*. Also, manage moist, contaminated materials as a hazardous waste*. Do not air dry absorbents.

An **oxidizer** adds oxygen to a reaction. For a complete definition of an oxidizer, see hazardous waste fact sheet #2.04, *Characteristic Wastes*, on the MPCA Web site:

http://www.pca.state.mn.us/publications/w-hw2-04.pdf

Manage pharmaceuticals meeting the definition of oxidizers as a hazardous waste*. Also, manage overtly contaminated absorbents and materials and spill material as hazardous waste*.

Lethality is a characteristic regulated in Minnesota. For a definition of lethality, see hazardous waste fact sheet #2.04, *Characteristic Wastes*, on the MPCA Web site:

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http://www.pca.state.mn.us/publications/w-hw2-04.pdf

Determine the lethality threshold concentration of the pharmaceutical as a waste. This is the lowest concentration of the pharmaceutical that exhibits the lethality characteristic.

When the concentration of the waste pharmaceutical is at or greater than the lethality threshold concentration, manage the waste as a hazardous waste*. Also manage contaminated materials as hazardous waste*.

A toxic waste contains one or more contaminants (such as mercury) at or above maximum allowable concentrations. For a complete list of toxic contaminants, see hazardous waste fact sheet #2.04, *Characteristic Wastes*, on the MPCA Web site at: http://www.pca.state.mn.us/publications/w-hw2-04.pdf

nttp://www.pca.state.mn.us/publications/w-nw2-04.pdf

Manage waste pharmaceuticals that exhibit the toxicity characteristic as a hazardous waste*. Also manage contaminated materials as hazardous waste*.

*Managing Waste Pharmaceuticals as Hazardous Waste – Hazardous waste has specific management

requirements for marking (labeling), time limits for storing, type of transportation and transporter that can be used, disposal methods and record-keeping. For more information about these requirements, see the "10 Steps to Compliance" fact sheets on MPCA's Web site at: http://

www.pca.state.mn.us/waste/pubs/business.html#general

Also, see hazardous waste fact sheet #3.34, *Managing Waste from Health Care Providers*, on the MPCA Web site: http://www.pca.state.mn.us/publications/w-hw3-34.pdf