

# MUSC Medical Center Policy Manual

Section	No	Title			
EOC	A-022	Red Bag Usage in the Disposal of Bio-Hazardous/Regulated Waste			
Owner:		Safety & Security Director			
Location/File:		N:\Hospital_Admin\Policies\Admin Policies\A-022 Red Bag			
Date Effective: 10/96		Reviewed: 08/06, 09/09	Revised: 10/96, 09/99, 09/12	Effective Date: 09/13/12	

#### **Definition:**

<u>Biohazardous/Regulated Waste</u> is defined to include all materials that are saturated with any of the following human body fluids:

- 1. Blood
- 2. Any body fluid that is visibly bloody
- 3. Semen
- 4. Vaginal secretions
- 5. Cerebrospinal fluid
- 6. Synovial fluid
- 7. Pericardial fluid
- 8. Amniotic fluid
- 9. Saliva (from dental procedures only)
- 10. Any body fluid of unknown origin
- 11. Pleural Fluid
- 12. Peritoneal Fluid
- 13. Unfixed Tissue or Organ (other than intact skin) from a human (living or dead).
- 14. HIV- containing cell or tissue cultures/organ cultures or HBV containing culture medium or other solutions.
- 15. Blood/organs/or other tissues from experimental animals infected with HIV or HBV.

Non-regulated human body fluid waste includes the following (there must be no visible blood):

- 1. Urine
- 2. Feces/Tears
- 3. Saliva (except from dental procedures)
- 4. Sweat
- Gastrointestinal secretions

The non-regulated body fluid waste may be disposed of with the regular hospital waste.

## **Policy:**

To protect patients, employees, visitors and the environment, the Medical Center will dispose of Biohazardous/Regulated Waste (Red Bags) as required by local, state and federal laws, standards and regulations. (Reference: Occupational Safety and Health Manual (<a href="http://academicdepartments.musc.edu/vpfa/operations/Risk%20Management/occpsafety/safetymanual.htm">http://academicdepartments.musc.edu/vpfa/operations/Risk%20Management/occpsafety/safetymanual.htm</a>)).

#### **Procedure:**

- A. Place a biohazard bag in the patient's room ONLY if biohazardous waste is being generated.
- B. Maintain a supply of red bags in the cabinet under the sink in each patient's room or treatment area for disposal of biohazardous waste.
- C. Ensure that at least one large biohazard receptacle is available on the unit. The location may be determined by the manager.
- D. In the event a biohazard receptacle is not available when needed, place the biohazard waste in a brown bag and transfer to a biohazard receptacle as soon as feasible.

**Guidelines:** The following is offered as a **GUIDELINE** to assist healthcare workers in the differentiation of "red bag" (regulated) disposal verses "brown bag" (non-regulated) trash. They include, **but are not limited to**, the following:

#### **BROWN BAG (NON REGULATED)**

Regular paper products including cups, plates, paper towels, etc.

Wraps/covers for procedure trays, equipment, dressings

Specimen cups

IV tubing (non-bloody)

IV bags

Urinary drainage bags (empty) and catheter

Suction canisters containing non-bloody sputum, saliva, NG aspirate, GI/GU fistula drainage NG tubes

Irrigation syringes

Diapers (non-bloody)

Soiled (non-bloody) linen savers/chux

Non-bloody aloves

Disposable materials/products out of an isolation room unless it meets definition on Red Bag List

#### **RED BAG (REGULATED)**

Intravenous/arterial catheters, (i.e., Jelco, TLC=s, Broviac, Hickman, Ports, PICC, Swans, Art. Lines, dialysis catheters, umbilical catheters)

Any IV tubing containing blood (i.e., Hemodialysis, Vamp, Art. Lines, CAVH, ECMO, blood administration sets, up to point where blood was present)

Dressings saturated with blood or serous drainage

Suction containers containing blood/bloody fluids

Obstetrical pads (OB and GYN surgery only)

Bloody gloves

Bloody linen savers/chux

Bloody diapers

Chemotherapy diapers/pads or 48 hours after chemotherapy

Peritoneal drainage bags-empty in toilet first

Pleuravac

Closed wound drainage system-empty first (i.e., Hamovac, JP, J-Vac)

Ventriculostomy drainage tubes/bag/bottles

Autotransfusers

Paracentesis/thoracentesis drainage tubes/bag/bottles

### **SHARP CONTAINERS (REGULATED)**

Syringes with needles

IV Cannulas

Ampules

Guide wires

Introducers

Trocars

Sharp dental instruments

Butterfly needles

Suture needles

Scalpels

**Pipettes** 

Any other sharp items used in laboratories

#### **RED BAG USAGE IN THE DISPOSAL**

\*Sharps Container only needs to be placed in a red bag prior to placement into puncture container ONLY IF LEAKAGE IS ANTICIPATED.

#### **Approvals:**

As Required	Date	
List Hospital Committee(s): EOC	09/12	
Ethics Committee		
Accreditation Review		
Legal Review		
Administration/Operations		
Medical Staff Executive Committee		
Governing Body		

# **Distribution:**

Policy Applies to:	Physicians (Y/N):	Nursing (Y/N):
	Other Clinical Staff (Specify):	Other Staff (Specify):
Educational Plan		
Required Competencies		