



MDA Dental Clinic Hazardous Waste Management Plan

This resource has been developed to help dental offices in constructing a personalized Hazardous Waste Management Plan and to provide regulation assistance in the areas of hazardous and universal waste. Our goal is to promote compliance with the Federal and State Laws and Administrative Rules by making them simple to understand and by providing support in streamlining the task of review by your employees, Minnesota Pollution Control Agency and county Hazardous Waste Departments.

Revised 2015

MDA Dental Clinic Hazardous Waste Management Plan

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GETTING STARTED AND IMPORTANT CONTACTS

Dental Practice: _____ Address: _____
County: _____

Do you have a Hazardous Waste Generator license?

A hazardous waste license or application of license is required for all dental practices in the state of Minnesota. It contains dental practice information and details of waste streams for the specific dental practice.

Helpful hints and details:

- Dental practices in the 7-county metro area make application for the hazardous waste license directly with the county in which they reside. (Contact your county for the application or access on the county website.)
- Dental practices outside of the 7-county metro area make application for licensing directly with the Minnesota Pollution Control Agency (application is included in this manual and is available on the MPCA website.)
- The licensing status is determined by the amount of waste generated in a year.
- Dakota County and most out-state dental practices are classified as minimal generators (Application and communication of changes in waste must be communicated, however an actual license and licensing fees are not required.)
- The remainder of the dental practices generally fall under the "Very Small Quantity Generator" status and do require a license and annual licensing fees.
- The Hazardous Waste license must be posted in a public area of the practices. (We recommend you post by the assistant, hygiene and doctor state licenses.)

INSIDE THE METRO: CONTACT YOUR COUNTY HAZARDOUS WASTE DIVISION

Anoka County	763.422.7093
Carver County	952.361.1800
Dakota County	952.891.7557
Hennepin County	612-348-3777
Ramsey County	651-266-1199
Scott County	952-496-8177
Washington County	651-430-6655

Also, the Minnesota Pollution Control Agency St. Paul Office may be available to answer your hazardous waste questions, call 651-296-6300 or Toll-Free at 1-800-657-3864.

OUTSIDE THE METRO- CONTACT MPCA

Minnesota Pollution Control Agency Hazardous Waste Resources
See <http://www.pca.state.mn.us> under WASTE – Permits and Rules

Minnesota Pollution Control Agency:

Brainerd 218-828-2492
Detroit Lakes 218-847-1519
Duluth 218-723-4660

MDA Dental Clinic Hazardous Waste Management Plan and Regulation Assistance

Mankato 507-389-5977

Rochester 507-285-7343

Southeast Regional Offices- Serving the following counties; Blue Earth, Brown, Dodge, Faribault, Fillmore, Freeborn, Goodhue, Houston, LeSueur, Martin, Mower, Nicollet, Olmsted, Rice, Sibley, Steele, Wabasha, Waseca, Watonwan, and Winona.

Willmar 320-214-3786

Marshall 507-537-7146

Southwest Regional Offices- Serving the following counties; Big Stone, Chippewa, Cottonwood, Jackson, Kandiyohi, Lac qui Parle, Lincoln, Lyon, Meeker, McLeod, Murray, Nobles, Pipestone, redwood, Renville, Rock, Swift and Yellow Medicine.

AMALGAM PROGRAM CONTACTS

MCES- Metropolitan Council Environmental Services

Clean water and a clean environment are essential to a healthy life, and the Metropolitan Council is committed to both. The Environmental Services division is nationally renowned for its superior work treating wastewater, monitoring air and water quality, and planning for a long-range water supply to meet future demand. Mercury/Amalgam and Wastewater Regulation.

**TIP: IF YOU ARE LOCATED IN THE SEVEN COUNTRY METRO AREA
REVIEW MCES RULES PERTAINING TO DENTAL WASTEWATER**



VIEW: Appendix A SAMPLE COMPLIANCE LETTER AND CERTIFICATE

Program Contact:

Peter Berglund
Principal Engineer
MCES Industrial Waste & Pollution Prevention Section
390 Robert Street North St. Paul, MN 55101
651-602-4708

WLSSD- Western Lake Superior Sanitary District

Provides solid waste oversight and wastewater services for a 530 square mile region around Duluth, Minnesota that includes the cities of Duluth, Cloquet, Hermantown, Proctor, Carlton, Scanlon, Thomson and Wrenshall, and the surrounding townships. Mercury/Amalgam and Wastewater Regulation.

**TIP: IF YOU ARE LOCATED IN THE WLSSD SERVICE AREA
REVIEW WLSSD BLUEPRINT FOR MERCURY REDUCTION**



Program Contact:

Sarah Lerohl
WLSSD Environmental Program Coordinator
2626 Courtland Street, Duluth MN 55806
281- 740-4784

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REGULATORY UPDATES:

In 2014, the Federal Environmental Protection Agency proposed rules regarding requirement for amalgam separators. **VIEW: Appendix B** *Effluent Limitation Guidelines and Standards for the Dental Category.*

VIEW: Appendix C *Dental Mercury Reduction Review and Regulatory Update*

Minnesota Dental Association

1335 Industrial Blvd.
Minneapolis, MN 55413
612-767-8400 phone
612-767-8500 fax
800-950-3368 Toll- free

- Notes:

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight shadow on the right side, suggesting it's resting on a surface. There is no handwriting or other markings on the paper.

TYPES OF HAZARDOUS/UNIVERSAL WASTE:

(Typical of a dental practice, but not limited to this list)

Dental Practice: _____ Address: _____

County: _____

1. Used fixer (N/A in practices using digital imaging only)
2. Scrap film (Very minimal or N/A in practices using digital imaging only)
3. Lead foil from x-rays (N/A in practices using digital imaging only)
4. Lead or X-ray apron (Expired or worn out)
5. Amalgam capsules
6. Amalgam scraps/traps and extracted teeth with amalgam
7. Amalgam sludge from amalgam separator
8. Amalgam separator filters
9. Vacuum system filters
10. Silver recovery unit filters- filtering silver from fixer below x-ray processor (N/A in practices using digital imaging only)
11. Lamps (fluorescent light bulbs)
12. Pharmaceutical waste (3% or greater remaining in carpule or vial) **VIEW: Appendix D** Important Notice and **Appendix E** MPCA Reverse Distribution of Pharmaceuticals
13. Motor oil
14. Oil saturated rags/towels-absorbent
15. Electronics waste **VIEW: Appendix F** MPCA E-Waste
16. Batteries
17. Misc. chemicals/dental materials as identified as a hazardous waste

VIEW: Appendix G MPCA "REGULATORY CONSENSUS ON HEALTHCARE ISSUES"

STORAGE OF HAZARDOUS/UNIVERSAL WASTE

	Waste	Note storage container and location of waste or N/A
1	Used fixer	
2	Scrap film	
3	Lead foil	
4	Lead or unleaded x-ray apron	
5	Amalgam capsules	
6	Amalgam scraps, traps & extracted teeth with amalgam	
7	Amalgam sludge (from amalgam separator)	
8	Amalgam separator filters	
9	Vacuum system filters	
10	Silver recovery units (not used in all offices)	
11	Lamps	
12	Pharmaceutical Waste	
13	Oil (Example would be used compressor oil)	
14	Oil saturated rags/towels- absorbent	
15	Electronics waste	
16	Batteries	
17	Misc. chemicals/dental materials (as determined)	

TRANSPORT AND RECYCLING HAULER INFORMATION

BEFORE YOU BEGIN: Do you have a hazardous waste identification number? The Hazardous Waste Identification Number (EPA number) is required by each business in the state of Minnesota to be able to ship wastes.

- The number is site specific (a number is required for each location address.)
- The number is obtained by applying for the number by completing form. **VIEW: Appendix H** MPCA NOTIFICATION OF REGULATED WASTE ACTIVITY FORM.
- Following application, the MPCA will mail a document reflecting the Hazardous Waste Identification number (EPA.)
- No changes or updates are required of the dental practice if all information on the original application remains the same.
- Any change in information would require the completion and submission of the "Notification of Regulated Waste Activity" form.

BEFORE YOU BEGIN: Have you chosen the appropriate waste hauler (s) for your clinics hazardous waste needs? **VIEW: Appendix I** MDA HAZARDOUS, INFECTIOUS AND DUAL WASTE RESOURCE LIST

- Determine hauler according to need and cost (consider pros and cons of contracts.)
- Fewer haulers will simplify management.
- Interview hauler representative: Obtain all information noted on management plan. Ensure proper licensing for waste hauling. i.e. DOT regulated, Hazardous Waste Identification number
- List wastes to be picked-up by the specific waste hauler.

Recycling Hauler Information	
Name:	
Address:	
Telephone:	
Fax number:	
Email address:	
Hazardous Waste Identification number:	

Instructions for pick-up:

Wastes transported by specific hauler (List specific waste here):

- _____
- _____
- _____
- _____

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Recycling Hauler Information	
Name:	
Address:	
Telephone:	
Fax number:	
Email address:	
Hazardous Waste Identification number:	

Instructions for pick-up:

Wastes transported by specific hauler (List specific waste here):

- _____
- _____
- _____
- _____

Recycling Hauler Information	
Name:	
Address:	
Telephone:	
Fax number:	
Email address:	
Hazardous Waste Identification number:	

Instructions for pick-up:

Wastes transported by specific hauler

List specific waste here	List specific waste here
• _____	• _____
• _____	• _____

LABELING AND MONITORING OF WASTE

All wastes are to be properly labeled.

Wastes are monitored on a weekly basis, according to state guidelines to insure proper management.
(Labels in place & legible, covers on all containers...)

Labeling must include:

- Labeled as "Hazardous Waste"
- Name of waste
- Start and end date on label

RESPONSIBLE INDIVIDUALS:

The designated person responsible for management and monitoring of the program at this location is:

Name: _____ Position: _____

Contact Information: _____

VOLUME GENERATED:

The level of Generator license is determined by County environmental services or the MPCA-Minnesota Pollution Control Agency-if outside of the 7-County Metro area. It is the responsibility of the dental practice to notify the County or MPCA if there are any changes in waste being collected. All records are to be recorded on the Hazardous Waste Log sheet and are kept in the Hazardous Waste manual.

Generator License Date Issued	Supersedes Issue Dated

HAZARDOUS/UNIVERSAL WASTE USE LOG

Dental Practice: _____ Address: _____
 County: _____ Year: _____

This log is a record of the following items: (all wastes listed on the Hazardous Waste Management Plan)

Used fixer	Silver Recovery Unit
Scrap film	Lamps (burnt out fluorescent light bulbs)
Foil from x-rays	Wastewater
Old x-ray aprons	Unused Pharmaceuticals
Amalgam capsules	Misc Chemicals
Amalgam scraps/traps & Extracted teeth	Motor Oil from suction system
w/amalgam.	Oil Saturated Rags/towels Absorbent
Sludge from amalgam separator	Electronics

This document is a record of all hazardous wastes, universal wastes and used oil shipped from the dental practice in a given year.

- If your office **HAS** an Automatic Reclaimer for Fixer: You must record the gallons of fixer that are used with your processor.

Used Fixer Tally (use this section only if office has an automatic reclaimer)

WEEK	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1												
2												
3												
4												
5												
TOTAL												

Total gallons of fixer for year: _____ (record this total on table next page)

- If your office **DOES NOT HAVE** an Automatic Reclaimer for fixer: You must record the quantity of gallons of old fixer being picked up by _____ (waste hauler).
- Waste water is calculated annually as 1 liter per operatory (exclude hygiene) per day.
- For example, you have 3 ops and your office is open 5 days a week: $3 \times 5 = 15$ and $15 \times 49 \text{ weeks} = 735$ liters of waste water.

Helpful hints and details:

- This document is especially helpful for state and county inspections and self-audits. (Note: When reporting generated wastes, the reporting must be a total of those wastes shipped and those remaining in the dental practice.)

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Waste	Waste Hauler	Date (s)	Quantity
Used Fixer (Gallons)			
Scrap Film (Lbs.)			
Foil from x-rays (Lbs.)			
Old x-ray aprons (Lbs./Quantity)			
Amalgam Capsules (Lbs.)			
Amalgam-scrap, traps, ext teeth (Lbs.)			
Sludge from Amalgam Separator (Lbs.)			
Silver Recovery Unit (Lbs.)			
Lamps (Quantity)			
Wastewater- Met Council (Liters)			
Pharmaceuticals (Lbs. or Gallons)			
Misc. Chemicals (Lbs. or Gallons)			

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Oil (Example would be used compressor oil)			
Oil saturated items (Qts. or Gallons)			
Electronic Waste (Lbs. or Quantity)			

HAZARDOUS WASTE HAULER MANIFEST LOG SHEET

Dental Practice: _____ Address: _____

County: _____ Year: _____

This log is a record of the _____ (waste hauler name) manifests.

Maintaining of manifests is required by the State of Minnesota and managed the counties in the 7-county metro area. The log should reflect both the initial pick-up and also the obtaining/receiving of the second copy of the manifest. The second manifest should be matched (stapled) to the initial manifest.

- Initial copy of the manifest is left at the time of the pick up
- Second copy of the manifest is mailed from the hauler within 30 days

TIP: This applies to hazardous waste manifest reporting of pharmaceutical and dental materials. Only dental materials evaluated and determined to be a hazardous waste need to be managed and reported in hazardous waste manifest.

TIP: Make copies of the Hauler Manifest log sheets if needed and/or if you have multiple waste haulers.

7-county metro area:

- A copy of the 1st manifest must be submitted within 5 days of the pick up to the appropriate address noted below.
- A copy of the 2nd manifest must be received from the hauler within 30 days of the pick-up and must be submitted within 40 days of the pick up to the appropriate address noted below.

Anoka, Carver, Dakota, Hennepin, Ramsey and Washington counties: Hazardous Waste Manifest Program Mail Code 609 300 South 6th Street, Minneapolis, MN 55487

Scott County: Scott County Environmental Health 200 Fourth Ave West, Shakopee, MN 55379-1220

Practices outside of the 7-county metro:

Practices outside of the 7-county metro area do not need to submit copies of the manifests. Manifests are kept at the practice.

Date	Initial Manifest Staff Initials	Second Manifest Staff Initials

WASTE HAULER PICK-UP LOG

Dental Practice: _____ Address: _____

County: _____ Year: _____

This log is a record of the _____ (waste hauler name) pick up.

Record keeping of Hazardous Waste is required by the State of Minnesota. The pick-up sheets should reflect all details of the wastes being picked up. (Date, waste, weight, quantity of waste)

- Record waste information on the "Hazardous/Universal Waste User Log."
- Maintain pick-up sheets.
- The waste hauler will leave a single "pick-up" sheet at the time of the pick-up.
- **TIP:** Make copies of the Waste Hauler Pick-up Log sheets if needed and/or if you have multiple waste haulers.

DATE OF PICK UP	STAFF SIGNATURE

HAZARDOUS WASTE WEEKLY INSPECTION LOG

Dental Practice: _____ Address: _____

County: _____ Year: _____

EPA ID Number

M	N										
---	---	--	--	--	--	--	--	--	--	--	--

Hazardous/Universal waste containers and container storage areas must be inspected weekly, looking for leaks and for container deterioration. The inspection log must include the dates and findings of these inspections. Additional items to be checked at the time of the inspections should be included but are not limited to:

1. Ensuring that all containers are closed
2. Ensuring that all containers are labeled "Hazardous Waste" or "Universal Waste"
3. Ensuring that all containers include a clear description of their contents
4. Ensuring that all containers include an accumulation start date
5. Ensuring that adequate aisle space is maintained in the storage areas to allow the unobstructed movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment to access any container in the storage area.

Date	Problems noted during weekly inspection	Staff (signature)	Corrective action Date	Corrective action	Corrective Action by: (signature)
Jan					
Feb					
Mar					
Apr					

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Date	Problems noted during weekly inspection	Staff (signature)	Corrective action Date	Corrective action	Corrective Action by: (signature)
May					
Jun					
Jul					
Aug					
Sep					
Oct					
Nov					
Dec					

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List of containers to check when doing weekly inspections:

- Spent fixer
- Silver Recovery Unit
- Scrap Amalgam
- Waste radiographic films
- Lead Foils
- Amalgam traps
- Extracted teeth with amalgam
- Amalgam capsules
- Vacuum system filter (if applicable)
- Amalgam separator and filter (indicate the time of day also)
- Pharmaceutical waste
- Used compressor oil

AMALGAM RECOVERY PROGRAM

Installation form(s) and Certificate(s) of Compliance

The MDA, MCES and MPCA collaborative “*Voluntary Dental Office Amalgam Recovery Program*” encompasses two programs for the state in which dental offices commit to the installation, maintenance and ongoing commitment to dental office amalgam separators. Amalgam separators are recommended as best management practices for all dental practices in the state of Minnesota. In the 7- country metro area, **installation forms or an exemption request, if applicable are required to be submitted to MCES.**

IMPORTANT CONSIDERATIONS FOR CLINICS IN 7- COUNTRY METRO:

- An annual commitment is required to be submitted to MCES in order to maintain certificate of compliance.
- Program Compliance Certificate is valid for a period of 5 years.
- A renewal is automatically sent to the dental practice to complete at the 5 year point.
- It is the responsibility of the dental practice staff to report any changes to the Minnesota Dental Association or MCES.
- Sample certificate and commitment letter are included in this plan.

IMPORTANT CONSIDERATIONS FOR OUTSTATE DENTAL CLINICS:

PARTICIPATION IN THE VOLUNTARY COMPLIANCE PROGRAM IS ACHIEVED BY SUBMITTING THE REQUESTED COMMITMENT PAPERWORK AND OBTAINING AGREEMENT WITH THE MINNESOTA DENTAL ASSOCIATION AND MINNESOTA POLLUTION CONTROL AGENCY.

FOR CLINICS THAT ARE LOCATED IN THE WLSSD SERVICE AREA, PLEASE CONTACT THIS PROGRAM FOR FURTHER DETAILS ON REQUIREMENTS AND COMMITMENT TO MERCURY REDUCTION IN WASTEWATER.

TIP: IN THE BEGINNING OF THIS WASTE MANAGEMENT PLAN BOOKLET THERE IS DETAILED CONTACT INFORMATION FOR EACH PROGRAM.

AMALGAM SEPARATOR INSPECTION LOG

This document is a record of the weekly amalgam separator monitoring of integrity and maintenance.

Helpful hints and details:

- Follow manufacturer's instructions for maintaining the separator as related to frequency of switch out of canister.
- Weekly checks are required.
- We recommend you perform the check at the beginning of day, prior to turning on the suction system.
- Date and time of check are must be noted.
- Manufacturer and/ or dental supplier repair must be notified immediately if there is any documentation of concern regarding the filter, separator unit, and/ or connections to the suction lines. Documentation should include any presence of cracks, corrosion, leaking, or knowledge of inoperative pump.
- Observe the need to replace amalgam separator canister. Attention to fill line.

The approved list of amalgam separators is located with the Minnesota Pollution Control Agency.

Amalgam Separator make/model: _____

Amalgam Separator serial number: _____

Year: _____

Instructions for maintenance: (follow manufactures instructions):

Amalgam Separator Weekly Check
(Include Date and Time of check)

WEEK	JAN		FEB		MAR		APR		MAY		JUN		JUL		AUG		SEP		OCT		NOV		DEC	
	D	T	D	T	D	T	D	T	D	T	D	T	D	T	D	T	D	T	D	T	D	T	D	T
1																								
2																								
3																								
4																								
5																								

RECOMMENDATIONS ON TESTING RECORDS

Testing records are required for all chemical indicators used in the dental practices. The reason for is this that most indicators contain lead or barium and both are considered a hazardous waste under Federal standards at a certain level.

Helpful hints and details:

- Indicators include but are not limited to: Indicator tape, indicator strips and sterilization pouches with internal and external indicators built into the pouch
- We recommend you purchase indicator products that DO NOT contain any lead or barium or those in which the manufacturer will share the required testing documents that prove the lead and barium to be below Federal limits.
- Examples of known non-hazardous products:
 - Patterson sterilization pouches: Contain hazardous chemicals, but fall below the Federal limits. (Testing must be obtained and retained within the Hazardous Waste manual.)
 - Peelview sterilization pouches: Contain hazardous chemicals, but fall below the Federal limits. (Testing must be obtained and retained within the Hazardous Waste manual.)
- **We recommend you contact your dental supplier for more information and support in obtaining testing records. Some testing records are located on the internet.**

REQUIRED EMERGENCY EQUIPMENT AND PROTOCOL

INTERNAL/ EXTERNAL COMMUNICATION SYSTEM- NOTIFIES EMPLOYEES OF
EMERGENCY AND ABILITY TO REQUEST ASSISTANCE FROM AUTHORITIES

CHECK IF YOU HAVE AVAIL	METHOD	LOCATION
	PHONE	
	INTERCOM	
	ALARM	
	TWO WAY RADIO SYSTEM	
	OTHER METHOD_____	

APPROPRIATE SPILL CONTROL EQUIPMENT- SUFFICIENT TYPE AND QUANTITY TO
CONTROL SPILLS OF HAZARDOUS WASTE

CHECK IF YOU HAVE AVAIL	METHOD	LOCATION
	FLOOR DRY	
	ABSORBENT PADS	
	CLEAN UP EQUIPMENT	
	OTHER METHOD_____	

SPILL GUIDANCE

R.I.N.S.E.

R-Recognize there has been a spill.

I-Identify the substance, what has been spilled?

N-Notify-in this situation it would be the doctor, practice/office manager, other team members.

S-Secure the scene so someone does not walk into spill area and use spill kit for clean-up. If it is a large spill that requires clean-up assistance, Bay West has a spill team available 24 hours a day/ 7 days a week, call 1-800-279-0456 for rapid response to any emergency spill.

E-Evacuate if necessary.

DECONTAMINATION EQUIPMENT-

ENABLES EMPLOYEES TO WASH OFF OR REMOVE CONTAMINANTS

CHECK IF YOU HAVE AVAIL	METHOD	LOCATION
	EYE WASH STATION	
	SINK	
	SHOWER	
	OTHER METHOD _____	

FIRE CONTROL EQUIPMENT- COMPATIBLE WITH YOUR HAZARDOUS WASTE
GENERATED THAT HAVE A FIRE HAZARD

CHECK IF YOU HAVE AVAIL	METHOD	LOCATION
	FIRE EXTINGUISHER	
	EYE WASH	
	SINK	
	OTHER METHOD _____	

WATER SUPPLY

CHECK IF YOU HAVE AVAIL	METHOD	LOCATION
	AUTOMATIC SPRINKLERS	
	FOAM PRODUCING EQUIPMENT	
	HOSE	
	PROXIMITY TO FIRE HYDRANT FOR USE BY LOCAL FIRE DEPARTMENT	
	OTHER METHOD _____	

EMERGENCY RESPONSE CONTACTS

(Post near telephones or in a conspicuous location for staff members)

Facility Emergency Coordinator

Phone Number

Alternate Coordinator

Phone Number

Location of Emergency Response Equipment

1. Fire Extinguishers

2. Fire Alarm

3. Spill Control Kit

4. Special Emergency Response Equipment (if applicable)

Emergency Contact Numbers

Fire Department 911 or local _____

Minnesota Duty Officer 651-649-5451

National Response Center 800-424-8802

Required Notification

In case of a fire, explosion, or release which could threaten human health or a spill that has reached surface water, immediately notify the MN Duty Officer.

EMPLOYEE HAZARDOUS WASTE TRAINING RECORD

Name of Employee_____

Job Title_____

Employee Hazardous Waste Duties

Record of Training

Date of Training_____New Hire_____Refresher_____

Name of Instructor_____

Employee Signature _____

List areas covered in training or attach documentation from training received.

Common topics in Dental Hazardous Waste Management

Amalgam management and separator

Containers (labeled, closed, weekly inspections)

Storage of Waste

Waste Manifests and Hazardous Waste Transporter

Oxygen and Nitrous Tanks (Labeling, contained, inspect)

Reduce/ Reuse/ Recycle

Recordkeeping

Emergency Response (spills, fire)

FINAL NOTES ON INSPECTION AND SELF/AUDIT RECORDS

All records from a hazardous waste inspection and/or self-audit should be maintained. This includes copies of hazardous waste reports as a result of an inspection and copies of self-audits as requested by most counties on an annual basis.

Helpful hints and details:

- We recommend to be accurate in reporting waste amounts, as this is what determines the level of generator status and licensing fees.
- It is the responsibility of the dental practice staff to report any changes in waste streams.
- Reminder to notify the county or the MPCA if your dental practices changes from traditional film processing to digital radiography.



LIST OF APPENDICES

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APPENDIX A

SAMPLE COMPLIANCE LETTER AND CERTIFICATE

April 07, 2015

TO: Dental Offices that have renewed their Certificate of Compliance

FROM: Metropolitan Council Environmental Services

RE: Awarding Certificate of Compliance

Metropolitan Council Environmental Services (MCES) received your Certificate of Compliance renewal form. We are pleased to award the enclosed "Certificate of Compliance" to recognize your use of an amalgam separator in your dental office. The enclosed "Certificate of Compliance" is for the five-year period from July 2013 to June 2018.

Each year you will be required to submit a statement to MCES certifying that your separator continues to be properly operated and maintained, and that amalgam and other wastes are being managed correctly. The Annual Statement from your dental office is due on June 30th of each year. You will be notified next year prior to the due date. Failure to submit could result in MCES rescinding your "Certificate of Compliance" and requiring that your clinic obtain an Industrial Discharge Permit, including the payment of permit fees.

MCES and the Minnesota Dental Association (MDA) continue to partner in promoting the use of amalgam separators in dental offices within the Minneapolis-Saint Paul metropolitan area. For more information on proper management of amalgam and other wastes, please refer to the brochure: "re: amalgam recovery". This brochure and related information may be found on MDA's website:

Thank you on behalf of MCES and MDA for using an amalgam separator to minimize the release of mercury-amalgam to wastewater treatment plants. Your actions are protecting the environment. If you have any questions, please contact either Peter Berglund (MCES) at 651-602-4708 or Bridgett Anderson (MDA) at 612-767-4256.

Sincerely,



Peter Berglund, P.E.
Metropolitan Council Environmental Services
Industrial Waste & Pollution Prevention Section

Enclosure: Certificate of Compliance

SAMPLE

Certificate of Compliance

Amalgam Recovery Program

This dental office is protecting the environment by properly operating an approved amalgam separator and managing waste through participation in the joint program of the Metropolitan Council and the Minnesota Dental Association.

Effective: July 2013 - June 2018 (ID No. 0000)



Leisa E. Thompson, General Manager





APPENDIX B

Effluent Limitation Guidelines and Standards for the Dental Category



Effluent Limitation Guidelines and Standards for the Dental Category

Summary

EPA is proposing technology-based pretreatment standards under the Clean Water Act for discharges of pollutants into publicly owned treatment works (POTWs) from existing and new dental practices that involve the discharge of dental amalgam. The proposal would require dental practices to comply with requirements for controlling the discharge of dental amalgam pollutants into POTWs based on the best available technology or best available control technology and Best Management Practices.

EPA is also proposing to amend selected parts of the General Pretreatment Regulations (40 CFR Part 403) to streamline oversight requirements for the dental sector. EPA expects compliance with this proposed rule would reduce the discharge of metals to POTWs by at least 8.8 tons per year, half of which is mercury. EPA estimates the annual cost of the proposed rule would be \$44 to \$49 million.

Why is EPA proposing this rule?

When dentists remove old amalgam fillings from cavities, or when dentists place a new filling, mercury in the form of dental amalgam enters the wastewater of the dental office. Studies have shown that dental offices are the largest source of mercury discharges to POTWs, contributing about half of the mercury received by POTWs. Mercury is a persistent and bioaccumulative pollutant with well-documented effects on human health. When in water, certain microorganisms can change mercury into methylmercury, a highly toxic form that builds up in fish, shellfish and animals that eat fish. Fish and shellfish are the main sources of methylmercury exposure to humans.

The proposed rule would require all affected dentists to control mercury discharges to POTWs by reducing their discharge of dental

amalgam to a level achievable through the use of the best available technology (amalgam separators) and the use of Best Management Practices. In order to simplify compliance with, and enforcement of the numeric reduction requirements, the proposed rule would allow dentists to demonstrate compliance by installing, operating and maintaining amalgam separators. The proposal also includes a provision by which dental offices that have already installed amalgam separators that do not meet the proposed amalgam removal efficiency would still be considered in compliance with the rule for the life of the amalgam separator. Removing concentrated sources of mercury to POTWs opportunistically, such as through low-cost amalgam separators at dental offices (average annual cost per dental office: \$700), is a common sense solution to managing mercury that would otherwise be released to air, land, and water.

Proposed Pretreatment Standards for the Dental Category Include:

- Technology-based pretreatment standards for discharges of pollutants into POTWs from existing and new dental practices that involve the discharge of dental amalgam
- Dental offices covered by this proposed rule could control mercury discharges to POTWs by reducing their discharge of dental amalgam to a level achievable through the use of the best available technology (amalgam separators) and the use of Best Management Practices.
- Amendments to selected parts of the General Pretreatment Regulations (40 CFR Part 403) to streamline oversight requirements for the dental sector and to eliminate discharge monitoring for the dentists.



APPENDIX C

Dental Mercury Reduction Review and Regulatory Update

Dental Mercury Reduction Review and Regulatory Update

John Maguire*

Introduction

Mercury emissions are decreasing in Minnesota waters thanks in part to the stewardship of the Minnesota Dental Association (MDA) in its efforts supporting the collection and recycling of dental amalgam solids. This article is a brief history of that work and that commitment dating back to 1990.

Basis for Action, and Action Initiated

Natural mercury emissions contribute approximately 25% to 33% of all airborne mercury transport.¹ Energy production, primarily from coal-fired plants, accounts for more than 50% of domestic man-made mercury airborne emissions per the EPA.² The balance of domestic mercury airborne emissions primarily occurs from waste management incinerators — i.e., municipal solid waste combustion, as well as combustion emissions from landfills, medical waste incineration, and other sources.

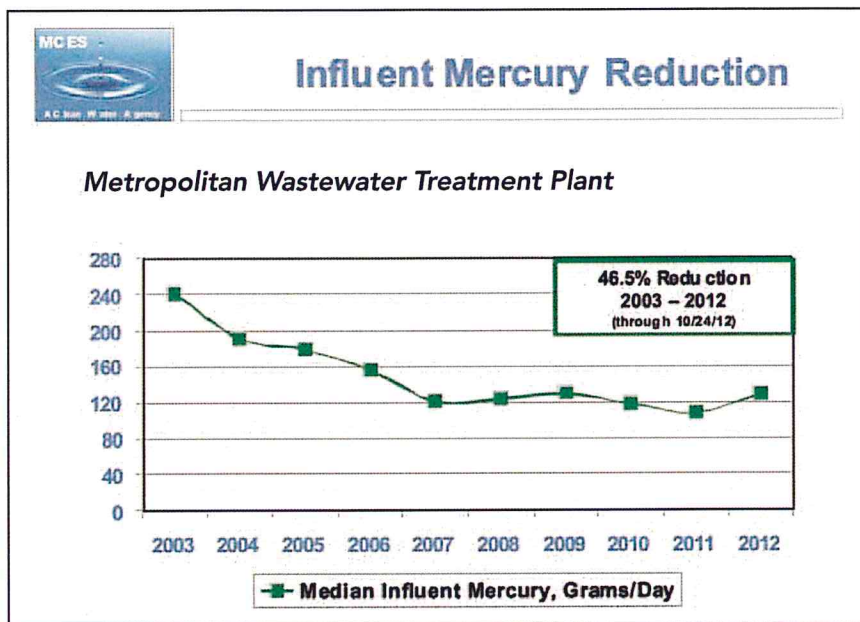
Amalgam is a heavy metal alloy upon which gravity works naturally. In a “Physico-chemical Properties of Dental Wastewater” study, Cailas et al³ estimated that 90% of the waste particles generated were larger than 10 microns and hence could be captured in common filter traps. In another wastewater study, Drummond et al⁴ estimated that approximately 75% of the amalgam waste solid is captured in chairside traps, and that

Natural mercury emissions contribute approximately 25% to 33% of all airborne mercury transport.

of the other 25%, all but one percent will settle within 24 hours. Thus gravity sedimentation works well for small, dense, heavy-metal particulate amalgam waste.

Dental amalgam is highly insoluble in water and generally insoluble in sewer wastewater as well.⁵ Amalgam waste will not release mercury unless the waste is subject to extreme conditions such as high heat incineration or unusual chemical conditions.

The Regulatory Update Chart for mercury reduction relates to the main Saint Paul Metropolitan Council Environmental Sciences (MCES) wastewater treatment plant. This 2003–2013 MCES chart for the Metropolitan area tracks mercury



emissions from the main wastewater sanitary plant, noting that there has been a 46.5% reduction in the median mercury emitted. The Median Influent Mercury has dropped from 240 grams per day to about 120 grams a day. Thus the mercury reduction of 120 grams per day calculates to an annual reduction of 97 pounds, or nearly 100 pounds.⁶ While a considerable portion of this decrease is attributed to the installation of dental amalgam separators, reduction of other industrial and household mercury sources should be noted as well.

The Northeastern District Dental Society and Western Lake Superior Sanitary District Co-operative Project

Back in the early 1990s, the Western Lake Superior Sanitary District

Continued on next page

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Practice Management

Continued from previous page

Co-operative Project (WLSSD) and MCES publicly owned wastewater incinerator and treatment plants were under regulatory pressure to reduce mercury emissions. The WLSSD of Duluth received particular regulatory attention due to the fact that Lake Superior is the headwaters of the Great Lakes, just as Itasca is the headwater of the Mississippi River.

With this as its impetus, in 1992 WLSSD invited representatives of the Northeastern District Dental Society to find solutions to environmental dental waste concerns in a collaborative, non-threatening fashion. Dr. Jim Westman of Duluth, co-representative for NEDDS, and Mr. Tim Tuominen of the WLSSD met to discuss issues regarding dental amalgam in wastewater. Through their collaboration, Dr. Westman authored *Recycling Amalgam and Keeping it Simple*⁷, which appeared in 1997. This mutual co-operation also included table clinics and in-office instruction.

Dr. Westman and Mr. Tuominen subsequently authored an oft-cited seminal work, "Amalgam Waste Management – Issues and Answers", published in 2000 in *Northwest Dentistry* and elsewhere. Their published pieces served as local and state models around the country.

Later, the American Dental Association would ask Dr. Westman to join them as an authority on amalgam waste for the ADA Scientific Affairs Committee.

The WLSSD and Northeastern District Dental Society later encouraged voluntary use of amalgam separator filters that captured 99%

of amalgam particles as per the ISO 11143 Standard⁸ and applied for state grants to install such apparatus. Co-operation continued. Grants were awarded, in part by the MPCA, and in December 2003 51 of 53 dental offices in the WLSSD area had amalgam separators installed. The two dental practices without separators were pursued to encourage them to volunteer for the program. The January 30, 2004 WLSSD report noted mercury reductions, thanks in part to amalgam separators.⁷ While considerable mercury reduction of

WLSSD numbers can be attributed to dental amalgam curtailment efforts, other commercial and household mercury abatement efforts have contributed to mercury emission decreases as well.

The MDA/MCES Partnership

The Twin Cities membership component of the Minnesota Dental Association recognized a stewardship to reduce amalgam solids in

wastewater and to reduce dental waste in general.

In an effort to analyze the load of mercury from dental amalgams going into the sanitary sewer system, the Minnesota Dental Association (MDA) and the Metropolitan Council Environmental Sciences (MCES) partnered to study the effectiveness of amalgam separators in wastewater in 1998.⁸ Thus the partnership between the MDA and MCES was established.

The two 1998 MCES studies concluded amalgam separators were effective in removing amalgam solids from dental wastewater. Solids not captured by amalgam separators

ultimately were incinerated at the MCES treatment plant. This resulted in fewer dental amalgam solids reaching the sanitary sewer and thus a smaller release of mercury into the environment. Further, a reduction in mercury alloys into the treatment plants or landfills meant less mercury to collect in our lakes and rivers.

In 1999, the MDA House of Delegates established the Ad Hoc Amalgam Waste Committee. In 2001, the name changed to the Environmental Health and Personal Safety Committee, which it remains today. Drs. Jim Westman and Daniel Shaw were the original co-chairs of this entity.

In 2001, a task force for implementation of amalgam separators would extend from the MDA and MCES to include related agencies and companies: waste recyclers, the Minnesota Pollution Control Agency (MPCA), the Minnesota Technical Advisory Board, plumbing installers, and dental supply companies.

In 2002, the MDA House of Delegates unanimously passed a resolution to implement a voluntary amalgam separator program throughout the state under the guidance of Dick Diercks, then MDA Executive director; MDA staff member Loren Hansen; Dr. Jim Westman; Dr. Scott D. Lingle, then president of the MDA, and others. Mr. Peter Bell chaired the Metropolitan Council at the time. The resulting 15-page booklet describing the MDA efforts, *Re: Amalgam Recovery. Take Preventative Action Now. Capture Amalgam So It Doesn't Release Mercury*, is still available on the MDA website.

The 2002 Voluntary MDA Amalgam Separator Program pre-empted formal state legislation. This collaboration between private dental practices and regulatory agencies serves as a model for other dental regions and states to emulate.

The 2002 Voluntary MDA Amalgam Separator Program pre-empted formal state legislation.

Dental offices located in the seven Metro counties, did, however, need to meet the ISO 11143 standard. In 2012, the MPCA assumed amalgam separator standards per ANSI/ ADA specification no. 108 with addendum.

In 2003, the Minnesota Chapter of American Public Works awarded the MDA and MCES a Technical Innovation Award for the Voluntary Dental Office Amalgam Separator Program.⁹ Since this program began, mercury loadings at the Metro plant have dropped by slightly more than 50%. MCES recognizes that there are sources other than amalgam by which mercury enters the wastewater treatment system, and it has been working since 1994 to identify and minimize all mercury sources. However, given the timing of the significant decline in influent loadings at the Metro plant and that of the amalgam separator installations, MCES feels confident that the reductions are largely due to the separator installations.¹⁰

In October of 2007, the ADA followed the lead of the MDA and published the ADA guide *Best Management Practices for Amalgam Waste*.¹¹

Dr. Westman, the “Answer Man”, and the MDA’s Loren Hanson teamed up on behalf of the ADA Council on Scientific in 2011. They helped with evaluations on amalgam separators at the ADA Professional Product Review’s Forum at that year’s ADA Annual Session in Las Vegas.¹²

The MDA rewarded stewards for shepherding the dental community further into the environmental movement regarding best management practices for waste. Among others, Dr. Jim Westman received the MDA President’s Award in 2004, and Dr. Scott Lingle received its Outstanding Service Award in 2005. In January of 2005, Loren Hanson of the MDA stepped in for absent the Tim Tuominen to present Jim

We Continue

Amalgam Separators have been installed in 730 offices in the metro area as part of the dental mercury reduction program as noted in a 13 June 2013 MCES Industrial Forum.

Westman the Sally Gibson Award. This St. Louis River Alliance award was for Jim’s work as a member of the Northeastern District Dental Society with the WLSSD and for help in a Best Management Practices Guide regarding dental waste posted statewide to dentists. Jim’s efforts significantly reduced the amount of mercury in the WLSSD’s effluent. Dr. Westman received the MDA’s Outstanding Service Award in 2011.

All the Pieces in Place

Processing and recycling companies form the final piece in the environmental movement. Dental amalgam separators, amalgams, amalgam plastics and filters, fixer, film, and spent lead need to be legally disposed of in accordance with best management practices as determined by the ADA, MDA, and MPCA.

Results created by the partnership of the MDA, MCES, MPCA, and amalgam waste processors have resulted in reduced mercury emissions.

The Land of Sky Blue Water

“We do not inherit the earth from our ancestors, we borrow it from our children” is a Native American proverb. The word “Minnesota”, translated from Ojibwa, means “sky-tinted waters” or “sky blue waters”. Let us continue to keep the waters sky blue for all our children. ■

Acknowledgments

The author thanks Drs. Jim Westman and Scott Lingle; Mr. Peter Berglund of the MCES; Ms. Bridgett Anderson of the MDA; Mr. Loren Hanson, former MDA staff member; and

Northwest Dentistry Managing Editor Sue Miller for their guidance, comments, and corrections to this article.

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APPENDIX D

Important Notice Regarding Pharmaceuticals

IMPORTANT NOTICE REGARDING PHARMACEUTICAL WASTE IN THE DENTAL OFFICE

TIPS:

COMMON PHARMACEUTICAL WASTES INCLUDE; ANESTHETICS, SEDATIVES
AND EMERGENCY MEDS FROM EMERGENCY KIT.

ALL WASTE MUST BE EVALUATED BY GENERATOR FOR HAZARDOUS
PROPERTIES.

YOUR OPTIONS FOR EVALUATING PHARMACEUTICALS INCLUDE

- DOING A FULL FORMULARY EVALUATION
- DOING A PARTIAL FORMULARY EVALUATION AND ASSUME THAT
NON- EVALUATED WASTE PHARMACEUTICALS ARE HAZARDOUS
- ASSUME THAT ALL WASTE PHARMACEUTICALS ARE HAZARDOUS.

REVIEW REVERSE DISTRIBUTION PROGRAMS

ALL WASTE PHARMACEUTICALS THAT HAVE NOT BEEN EVALUATED AND
DETERMINED TO BE NON- HAZARDOUS NEED TO BE TREATED AS
HAZARDOUS AND DISPOSED OF APPROPRIATELY.

MAKE SURE IF YOU USE A MAILBACK PROGRAM THAT YOU ARE OBTAINING
AND RETAINING THE PROPER MANIFEST RECORDS.



APPENDIX E

MPCA Reverse Distribution of Pharmaceuticals



Minnesota
Pollution
Control
Agency

Reverse Distribution of Pharmaceuticals

Guidance for Minnesota healthcare providers

Waste/Hazardous waste #3.36b • June 2011

Contents

What is reverse distribution?	1
When are pharmaceuticals subject to regulation? ...	1
Minimizing waste	2
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Other requirements	3
Sent for use by another party	3
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Training use	3
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What is reverse distribution?

In the course of normal operations, health care providers and pharmacies accumulate pharmaceuticals that, for various reasons, they will not use. The health care industry has developed a management process for returning some of these pharmaceuticals to specialized brokers for management – sometimes with a monetary credit to the provider. This process is known as reverse distribution.

Although the Minnesota Pollution Control Agency (MPCA) and the U.S. Environmental Protection Agency (EPA) considered reverse-distributed pharmaceuticals *products* exempt from hazardous waste requirements, the MPCA has become aware that the majority of these pharmaceuticals are destroyed or disposed of, making them *wastes* subject to the Minnesota Hazardous Waste Rules. Whether a pharmaceutical is eligible for return credit does not affect its *product* or *waste* status. In Minnesota, if a pharmaceutical is not used or reused for its intended purpose, it is a *waste*. The MPCA considers health care practitioners and pharmacies to be *generators* of these pharmaceutical wastes.

Nevertheless, the MPCA believes that the established reverse distribution system provides an environmentally protective method for handling waste pharmaceuticals. Therefore, it will allow Minnesota health care practitioners and pharmacies to manage certain pharmaceuticals through reverse distribution, subject to additional requirements discussed in this fact sheet.

When are pharmaceuticals subject to MPCA regulation?

When pharmaceuticals cannot or will not be used for their intended purpose, they are considered *waste* and are regulated by the MPCA. Assume a waste pharmaceutical is hazardous unless you have evaluated it and have documentation showing it to be non-hazardous. For help evaluating pharmaceuticals, see MPCA hazardous waste fact sheet #4.45a, [Evaluating Pharmaceutical Wastes](http://www.pca.state.mn.us/publications/w-hw4-45a.pdf) at <http://www.pca.state.mn.us/publications/w-hw4-45a.pdf>.

Product pharmaceuticals that will be used for their intended purpose and *waste* pharmaceuticals that have been shown to be non-hazardous are exempt from the Hazardous Waste Rules as well as the MPCA reverse distribution requirements discussed in this fact sheet. However, they may still be regulated by the Minnesota Board of Pharmacy (Board) or the U.S. Drug Enforcement Administration (DEA).

w-hw3-36b

Minimizing pharmaceutical waste

Even though managing pharmaceuticals through the reverse distribution system may cost less than normal hazardous waste management, the cost is likely still considerable – even if you are eligible for return credit. By utilizing waste-minimization practices, you may be able to reduce not only your regulatory burden, but also your costs. The Minnesota Technical Assistance Program (MnTAP) has resources to help you to reduce pharmaceutical waste generation and costs. Contact MnTAP for assistance (see *More information*, page four).

MPCA requirements when using reverse distribution for pharmaceuticals

To be eligible to manage unevaluated or hazardous waste pharmaceuticals through a reverse distributor, you must:

- Get a Hazardous Waste Identification Number (HWID) – also known as an *EPA Identification Number* – free from the MPCA. To get a HWID, complete and submit MPCA hazardous waste form #7.09, [Notification of Regulated Waste Activity](http://www.pca.state.mn.us/publications/w-hw7-09.pdf) at <http://www.pca.state.mn.us/publications/w-hw7-09.pdf>.
- Ensure the reverse distributor you intend to use is licensed by the Board as a pharmaceutical manufacturer or wholesaler. If the pharmaceuticals are controlled substances regulated by the Board or DEA, the reverse distributor must also be a DEA Registrant.
- Document that all pharmaceuticals that (1) have not been evaluated or (2) would be hazardous waste in Minnesota will be disposed of according to hazardous waste disposal requirements. Documentation should include at least:
 - An agreement between you and your reverse distributor stipulating that disposal of those pharmaceuticals will meet hazardous waste disposal requirements; and
 - A management plan from the reverse distributor listing the identity and location of the hazardous waste disposal facility or facilities that will ultimately manage those pharmaceuticals.
- Accumulate and ship for reverse distribution only pharmaceutical wastes that you originally legally possessed as products. For questions on legal possession, contact the Board (see *More information*, page four). You may not accept or ship for reverse distribution any wastes that you have accepted from households or another generator.
- Accumulate and ship for reverse distribution only pharmaceuticals in closed, original manufacturer or appropriate dispensing containers that are labeled with the identity of the pharmaceutical. Containers that formerly held pharmaceuticals may also be shipped if they are closed and labeled with the identity of the pharmaceutical they held, and your reverse distributor will accept them. Wrappers and backing materials are not eligible for this addition.
- Label each pharmaceutical container accumulated for reverse distribution with one of the phrases: *Reverse Distribution*, *Pharmaceuticals for Reverse Distribution*, or *Expired Pharmaceuticals*; or accumulate the closed pharmaceutical containers in an open or closed box, bin or other accumulation container labeled with one of these phrases.
- Maintain the following records at your site for at least three years from the shipping date:
 - Shipping record (obtain or prepare this immediately) that includes at least the date and amount of the shipment by either weight or container count and the name and address of the reverse distributor.
 - Disposal record (obtain from your reverse distributor within 40 days) that includes at least the date of shipment to the reverse distributor and, for each pharmaceutical in the shipment: the identity, weight or unit count, hazardous waste code, and hazardous waste disposal method.
- Comply with all requirements, limitations, and prohibitions of your chosen reverse distributor.
- Comply with all applicable requirements of the Board, DEA, U.S. Department of Transportation (DOT), and any other applicable federal, state, or local law.

Other hazardous waste requirements

Do not count reverse-distributed pharmaceuticals when determining your hazardous waste generator size.

Pharmaceuticals transported within a reverse-distribution system need not be accompanied by a hazardous waste manifest. However, if classified as a hazardous material by the DOT, a pharmaceutical may still be subject to the DOT's Hazardous Materials Regulations (HMR) requirements. Pharmaceuticals originally shipped to you as 'ORM-D' consumer commodities may remain eligible for the 'ORM-D' allowances under the HMR when they become waste shipped for reverse distribution. For questions on the HMR, contact the DOT (see *More information*, page four).

If you are located:

- **Within the seven-county metropolitan area** (Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, or Washington County) – contact your county regulator for county-specific reporting and licensing requirements (see *More information*, page four).
- **Outside the seven-county metropolitan area** – and you generate less than 100 pounds annually of 'countable' hazardous waste, you do not need to obtain a Hazardous Waste Generator License nor pay annual fees to the MPCA. You must still complete and submit a License Application every three years. The MPCA will notify you when you need to complete an Application.

Pharmaceutical manufacturers and wholesalers are not eligible for the reduced requirements for reverse distribution discussed in this fact sheet. Pharmaceutical wastes they generate or receive through a reverse-distribution system are subject to full hazardous waste requirements.

Reverse-distributed pharmaceuticals not managed according to the requirements discussed in this fact sheet remain fully regulated wastes subject to all normal requirements of the Minnesota Hazardous Waste Rules.

Pharmaceuticals sent for use by another party

Pharmaceuticals that can and will be used for their intended purpose remain *products* not subject to MPCA requirements. Health care practitioners and pharmacies who intend to ship pharmaceuticals they cannot use to another party for use, however must be able to document that those pharmaceuticals will be used as intended.

Donating pharmaceuticals

Donating pharmaceuticals for legitimate use by charitable organizations is allowed by the MPCA; however, the practitioner or pharmacy must be able to document a reasonable belief that the donated pharmaceuticals will be used for their intended purpose by the receiving organization. Both the donor and receiver may also need to meet additional state and federal requirements relating to pharmaceutical possession and export. The MPCA cautions that, unless carefully planned in partnership with a responsible relief agency, many such well-intentioned donations end up being abandoned at their destination and remain the legal responsibility of the donor.

Training use

Pharmaceuticals may be supplied in forms (such as some pre-filled dispensing instruments) that require training for proper use. For training purposes, the MPCA previously allowed the use of unevaluated or hazardous expired pharmaceuticals that would not be administered to humans or animals. However, the MPCA has become aware that reasonable non-pharmaceutical training alternatives exist for the majority of training needs. Therefore, it will no longer allow training use of unevaluated or hazardous expired pharmaceuticals for which reasonable alternatives exist.

In the unusual case that a training product is not available, the training program must document that obtaining or constructing a training-only product would be unreasonable before using an unevaluated or hazardous expired pharmaceutical for training.



APPENDIX F

MPCA E-Waste



Managing Electronic Wastes

Guidance for generators, collectors, and recyclers

What is electronic waste?

Electronic waste, or E-waste, includes any tool, equipment or appliance containing a printed circuit board or a cathode ray tube (CRT). E-waste includes computers and peripherals, such as keyboards, monitors, and mice. It also includes many common business items like telephones, cameras, scanners, manufacturing control equipment, and medical devices.

Indicators that tools or equipment likely contain a circuit board include the presence of a keypad, touch screen, any type of video or digital display, or common electronic ports or connectors, such as serial, parallel, RJ45 ('network') or USB plugs. Consider equipment having any of these items to be E-waste until you have proven otherwise.

Regulation of E-waste

In Minnesota, the Minnesota Pollution Control Agency (MPCA) regulates E-wastes under the Hazardous Waste Rules. E-waste is hazardous because of its potential to release toxic heavy metals – lead, cadmium, mercury – into the environment if not managed and disposed of properly. Assume all E-waste to be hazardous waste unless you evaluate and can document that it is non-hazardous.

This fact sheet discusses requirements applicable to businesses and government agencies that generate E-waste as well as to those that collect or recycle E-waste.

Note: Guidance contained in this fact sheet discusses hazardous waste requirements for E-waste as applied by the MPCA. Generators and handlers of E-waste in the Twin Cities metropolitan area may be subject to additional county-specific requirements. If you are located in a metropolitan county, contact your county regulatory program (see *More information*, page five).

Reduce waste

Minimizing the amount of E-waste you generate can lower not only your regulatory requirements, but also your costs. Working and usable electronic equipment that is of use to another party may be sold or donated rather than disposed of. For more information about selling or donating usable electronic equipment, visit the MPCA at <http://www.pca.state.mn.us/publications/w-hw3-36a.pdf> to view MPCA hazardous waste fact sheet #3.36a, [Reverse Distribution of General Merchandise](#).

The [Minnesota Technical Assistance Program](#) (MnTAP) can help you reduce the amount of E-waste you generate and identify available reuse or recycling options. For more information, contact MnTAP (see *More information*, page four).

Regulatory requirements for E-waste generators

The MPCA allows businesses and government agencies that generate hazardous E-wastes to manage them either as fully-regulated hazardous waste or under the reduced requirements described below.

1. Accumulation and storage

Generators may accumulate any amount of E-waste, as long as at least 75% of the weight of the E-waste you generate each year is shipped off site for recycling. Ensure you keep records verifying this. Protect E-waste from precipitation by storing it indoors or in impervious containers. Store any E-waste that might release hazardous constituents, such as cracked monitors or crushed components, in a closed container that is impermeable to the waste. Label or mark the container with the words *Electronics for Recycling* or *E-waste*.

The MPCA does not require that E-waste be counted towards hazardous waste generator size or reported. If you generate only E-waste, or E-waste and wastes that are also exempt from reporting, such as Universal Wastes and used oil, you do not need to obtain a Hazardous Waste Identification (HWID) number. Metropolitan county regulations may differ for counting, reporting and obtaining a HWID.

If you have a spill of hazardous constituents from E-waste, ensure you contain and completely clean up the spill. Manage the spill debris as a newly generated waste and either evaluate it or assume it is hazardous waste.

2. Transporting

You or any transporter may carry your E-waste to a collector for recycling. The collector must have a HWID from the MPCA (if located in Minnesota) or be properly authorized by the state in which it is located. Only use a uniform hazardous waste manifest for E-waste shipments if you are managing them as fully regulated hazardous waste.

3. Recordkeeping

Keep records showing that you ship off site at least 75% of the E-waste you generate each year. Keep these records for at least three years. The MPCA also strongly recommends you obtain shipping receipts from your transporter for each shipment.

Regulatory requirements for E-waste collectors

You are a *collector* if you receive E-waste for recycling from businesses, government agencies, or households, and then send that E-waste to a recycling facility. The MPCA allows collectors and recyclers to manage E-waste under the reduced requirements described in this fact sheet in lieu of obtaining a Hazardous Waste Storage Permit from the MPCA.

1. Accumulation and storage

You may accumulate any amount of E-waste, as long as you ship at least 75% of the weight you receive each year off site for recycling. Protect E-waste from precipitation by storing it indoors or in impervious containers. Store any E-waste that might release hazardous constituents, such as cracked monitors or crushed components, in a closed container that is impermeable to the waste. Label or mark the container with the words *Electronics for Recycling* or *E-waste*.

If you have a spill of hazardous constituents from E-waste, ensure you contain and completely clean up the spill. Manage the spill debris as a newly generated waste and either evaluate it or assume it is hazardous waste.

2. Recordkeeping and reporting

If you do not already have an HWID, obtain one by visiting the MPCA at <http://www.pca.state.mn.us/publications/w-hw7-09.pdf> to complete MPCA hazardous waste form #7.09, [Notification of Regulated Waste Activity](#). Affirm that you are still an active collector by submitting a Hazardous Waste License Generator Application every three years or whenever you receive one from the MPCA. Keep a record of all shipments of E-waste from your site for three years.

3. Additional requirements for collectors of household E-waste

If you collect E-waste from households, register with the MPCA using the [Collector Registration Form](#) at <http://www.pca.state.mn.us/index.php/view-document.html?gid=4833>. Annually report the weight in pounds of household electronic devices. Household E-waste includes computers and peripherals, such as keyboards, mice, and monitors; televisions; eBook readers; digital picture frames; DVD players; VCRs; and fax machines. It does not include appliances, cellular telephones and personal data assistants, or strictly audio equipment. Report using the [Collector Reporting Form](#) at <http://www.pca.state.mn.us/publications/w-gen2-60.xls>.

Regulatory requirements for E-waste recyclers

You are an E-waste *recycler* if you do any of the following:

- Recover usable materials from E-waste
- Reuse E-waste constituents in a manufacturing process
- Prepare E-waste for either material recovery or manufacturing reuse
- De-manufacture or disassemble E-waste components
- Shred or crush E-waste components

You are *not* an E-waste recycler if you only:

- Disassemble electronic equipment for repair (see instead *Regulatory requirements for generators* in this fact sheet)
- Remove E-waste components from other equipment or wastes, such as extracting E-wastes from appliances, vehicles, or commercial or industrial equipment. If you disassemble appliances, see the requirements for appliance recyclers in MPCA hazardous waste fact sheet #3.02, Appliance Recycling, at <http://www.pca.state.mn.us/publications/w-hw3-02.pdf>.

If you are an E-waste recycler, you must comply with the following requirements:

1. Storage

Protect the E-waste from precipitation by storing it indoors or in impervious containers. Before processing, store any E-waste that might release hazardous constituents – such as cracked monitors or crushed components – in a closed container that is impermeable to the waste. Label or mark the container with the words *Electronics for Recycling or E-waste*.

If you have a spill of hazardous constituents from E-waste, ensure you contain and completely clean up the spill. Manage the spill debris as a newly generated waste and either evaluate it or assume it is hazardous waste. Also assume all wastes generated from your recycling process are hazardous wastes until you have evaluated and documented them to be non-hazardous.

2. Recordkeeping and reporting

If you do not already have an HWID, obtain one by visiting the MPCA at <http://www.pca.state.mn.us/publications/w-hw7-09.pdf> to complete MPCA hazardous waste form #7.09, [Notification of Regulated Waste Activity](#). Annually submit a Hazardous Waste Generator License Application.

Submit an E-waste Management Plan to the MPCA that describes your recycling process, the environmental and health safeguards you use in your process, the methods you use to evaluate the wastes or other materials your recycling process generates, and how you or another facility will dispose or reuse all of the wastes and other materials generated from your recycling process. Submit an updated plan to the MPCA whenever you change your E-waste recycling process.

Keep records of all shipments of E-waste to and from your recycling facility for the past three years. Also, obtain and keep records of the final recycling or disposal of all E-waste and other wastes sent from your site for the past three years. Ensure that all sites to which you ship E-waste and other waste are authorized by the state in which they are located and compliant with local requirements.

3. Liability insurance

Obtain and maintain liability insurance of at least \$1,000,000 (one million) dollars coverage for environmental releases, accidents, and emergencies. Ensure that all sites to which you ship E-waste and other wastes have equivalent coverage.

4. Partial exemptions for recyclers of only business-generated circuit boards

If the only E-wastes you recycle are circuit boards generated by businesses, you need not comply with the management plan or the insurance requirements discussed above. If all mercury switches, relays, and batteries have already been removed from the circuit boards, you are further exempted from the HWID and record keeping requirements above.

5. Additional requirements for recyclers of household E-waste

If you recycle E-waste from households, register with the MPCA using the [Recycler Registration Form](#) at <http://www.pca.state.mn.us/index.php/view-document.html?gid=4835>.

Annually report the weight in pounds of household electronic devices. Household E-waste includes computers and peripherals such as keyboards, mice, and monitors; televisions; eBook readers; digital picture frames; DVD players; VCRs; and fax machines. It does not include appliances, cellular telephones and personal data assistants, or strictly audio equipment. Report using the [Recycler Reporting Form](#) at <http://www.pca.state.mn.us/publications/w-gen2-61.xls>.

You, and any downstream recyclers to whom you send E-wastes, are prohibited from using prison labor to recycle household video display devices (monitors, televisions, eBook readers, digital picture frames, and cellular telephones with screens larger than 9 inches diagonally).



APPENDIX G
MPCA “REGULATORY CONSENSUS ON HEALTHCARE
ISSUES”



Regulatory Consensus on Health Care Issues

Guidance for Minnesota generators of health care-related wastes

Applicability

Except where specifically noted, the hazardous waste programs of the Minnesota Pollution Control Agency (MPCA) and the Minneapolis-St. Paul metropolitan area counties of Anoka, Carver, Dakota, Hennepin, Ramsey, Scott, and Washington (Metro Counties) have reached consensus on the interpretations, guidance, and allowances discussed in this fact sheet. Generators of health care-related wastes may apply this guidance at any location in Minnesota.

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Waste/Issue	Regulatory consensus
Acute hazardous waste accumulation	<p>Health care providers and pharmacies that are Very Small Quantity Generators of hazardous waste (VSQGs) may accumulate up to one kilogram (kg) of finished form pharmaceutical acute hazardous waste. (This one-kg limit does not include waste in satellite accumulation containers.) Accumulation containers must be compatible with the contents, closed, labeled and inspected at least weekly. Document these inspections. If you meet these requirements, you do not need to meet additional acute hazardous waste accumulation requirements or comply with the one-quart satellite accumulation limit for acute hazardous waste discussed below.</p> <p>If using satellite accumulation, you may only accumulate up to one quart of acute hazardous waste in each satellite accumulation area. For more information on acute hazardous waste accumulation, see MPCA hazardous waste fact sheet #w-hw2-02, P List of Acute Hazardous Waste, at http://www.pca.state.mn.us/publications/w-hw2-02.pdf.</p>
Acute pharmaceutical containers and packaging	<p>Unless they have been triple-rinsed, manage containers and inner packaging that held pharmaceuticals that would be acute hazardous wastes when disposed of as acute hazardous wastes. You may report only the mass (weight) of the residue inside the container and count only that amount when calculating generator size. For more information, see the MPCA fact sheet #w-hw2-02 referenced in the preceding Acute hazardous waste accumulation entry in this fact sheet.</p> <p>Acute pharmaceutical packaging from solid products such as tablets or patches may be comingled in a common container with other non-acute wastes without being assumed to create an acute hazardous waste mixture, so long as no visible dusts or particles remain on the packaging before being placed into the container. Document that the volume of acute pharmaceutical packaging in the common container does not exceed one quart if you are managing the container under the satellite accumulation allowances or one kilogram for all other accumulation.</p>
Aerosol inhalers	<p>Empty inhalers (must meet empty container standards and have no remaining pressure) – These are exempt from hazardous waste regulation. Recycle, if possible, or manage as an industrial solid waste according to solid waste requirements. See the Empty containers section.</p> <p>Non-empty inhalers – Some inhalers may use an ignitable propellant. If these are not empty, they will be ignitable hazardous wastes at disposal. Manage them as a hazardous waste or evaluate and document that they are not hazardous. For more information, see MPCA hazardous waste fact sheet #w-hw4-00, Managing Waste Aerosols, at http://www.pca.state.mn.us/publications/w-hw4-00.pdf.</p>
Alcohol-based hand sanitizers	<p>Many waterless hand sanitizer products are alcohol based and would be ignitable hazardous wastes when disposed of. Use of these products as intended is not “disposal” because the material never becomes a waste. Manage alcohol-based hand sanitizer dispensers that do not meet the empty container requirements as hazardous waste or evaluate and document that they are not hazardous.</p>
Ambulance waste	<p>Hospitals in Minnesota are required to accept properly packaged and labeled infectious waste from ambulance services. They are not required to accept infectious waste containers that include hazardous waste (dual waste), but may do so if properly labeled. Hospitals that choose to accept hazardous or dual wastes from one ambulance service must then accept such wastes from all ambulance services that serve their facility. Waste accepted from an ambulance service is considered to be the hospital’s waste. Ambulance services may also choose to consolidate their own infectious and hazardous waste at their central business location and dispose of it from that location. For more information, see MPCA solid waste fact sheet #w-sw4-30, Infectious Waste: Management guidance for generators, at http://www.pca.state.mn.us/publications/w-sw4-30.pdf.</p>

Waste/Issue	Regulatory consensus
Black containers	<p>You are not required to use any particular color for hazardous waste containers. Some container suppliers and waste vendors encourage the use of black containers for pharmaceutical hazardous wastes. If you choose to use color-coded waste collection containers, be careful not to use colors that already may signify other waste management to many health care employees, such as red or yellow. Regardless of color, you must properly label all hazardous waste containers. For more information on hazardous waste container requirements, see MPCA hazardous waste fact sheet #w-hw1-04-05, Label and Store Hazardous Waste, at http://www.pca.state.mn.us/publications/w-hw1-04-05.pdf.</p>
Carbon dioxide absorbents	<p>Carbon dioxide (CO₂) absorbents used in gaseous anesthesia systems may contain barium and therefore be D005 toxic hazardous wastes when disposed of; or they may carry health warnings that render them lethal hazardous wastes. Although solids, these materials may absorb enough moisture during use, accumulation, or disposal to make them regulated liquids as corrosive hazardous wastes.</p> <p>Do not dispose of CO₂ absorbent as solid waste unless you have determined through evaluation that they are not hazardous in Minnesota. For more information about the hazardous waste characteristics, see the Characteristic hazardous wastes entry in this fact sheet.</p>
Characteristic hazardous wastes	<p>In addition to the five Federal hazardous waste characteristics (Ignitability, Oxidizer, Reactivity, Corrosivity and Toxicity) Minnesota also applies the additional state-specific characteristic Lethality.</p> <p>For more information about all the hazardous waste characteristics, see MPCA hazardous waste fact sheet #w-hw2-04, Characteristic Hazardous Wastes, at http://www.pca.state.mn.us/publications/w-hw2-04.pdf.</p> <p>For specific information on the lethality characteristic, see MPCA hazardous waste fact sheet #w-hw2-05, The Lethality Characteristic, at http://www.pca.state.mn.us/publications/w-hw2-05.pdf.</p> <p>The MPCA allows healthcare providers to use a simplified evaluation of pharmaceuticals for the lethality characteristic. See MPCA hazardous waste fact sheet #w-hw4-45b, Alternate Method to Evaluate Pharmaceutical Waste for the Lethality Characteristic, at http://www.pca.state.mn.us/publications/w-hw4-45b.pdf.</p>
Chemotherapy hood filters	<p>Filters from chemotherapy preparation hoods may become characteristic hazardous waste if contaminated with hazardous constituents from the pharmaceuticals prepared under them. Each health care facility must determine the potential contaminants on their waste hood filters and evaluate the filters for the appropriate characteristics.</p>
Chemotherapy wastes	<p>Bulk chemotherapy waste: Though not defined in Minnesota law, <i>bulk chemotherapy waste</i> is considered to mean waste that is known to contain any chemotherapy agents. Examples include all spill clean-up materials, contaminated personal protective equipment (PPE), and non-empty containers and infusion sets.</p> <p>Assume bulk chemotherapy waste is lethal hazardous waste unless you evaluate it and document that it is non-hazardous. Safe work practices dictate that one handle disposable infusion equipment as little as possible after use to minimize occupational exposure. You are encouraged to manage all disposable chemotherapy infusion equipment holding any free liquid as hazardous bulk chemotherapy waste rather than attempting to empty it to meet the empty container standards.</p> <p>Trace chemotherapy waste: Though not defined in Minnesota law, <i>trace chemotherapy waste</i> is considered to mean waste that may have come into contact with a chemotherapy agent, but is not known to contain chemotherapy agents. Examples include uncontaminated PPE, outer packaging, and empty containers and infusion sets. You may assume trace chemotherapy waste is non-hazardous.</p>

Waste/Issue	Regulatory consensus
Clinitest™ tablets	<p>Unreacted Clinitest™ tablets are assumed to be reactive and lethal hazardous waste unless evaluated and documented as non-hazardous. Reacted Clinitest™ tablets are assumed to be lethal hazardous wastes unless evaluated and documented as non-hazardous.</p>
Construction and service contractor wastes	<p>Construction and service contractors may choose to transport wastes generated at a remote job site back to their place of business for consolidation and subsequent shipment for disposal. Home health care providers, including those using personal vehicles for business purposes, and ambulance services are also considered eligible for this allowance. For more information, see MPCA hazardous waste fact sheet #w-hw3-11, Managing Hazardous Waste Generated by Construction and Service Contractors, at http://www.pca.state.mn.us/publications/w-hw3-11.pdf.</p>
Controlled substances	<p>Wastes from controlled substances regulated by the U.S. Drug Enforcement Administration (DEA) must be managed in compliance with both DEA requirements and Minnesota hazardous waste requirements.</p> <p>Controlled-substance wastes may be evaluated to show they are non-hazardous. Controlled substances are no longer a Risk Criteria Group in the Alternate Method to Evaluate Pharmaceutical Waste for the Lethality Characteristic. You may evaluate a controlled substance waste as non-hazardous if you document that it is not included in one of the other Risk Criteria Groups (such as testosterone, which is an Endocrine Disruptor) and is not a Listed or Federal Characteristic hazardous waste. For more information, see Characteristic hazardous wastes and Listed hazardous wastes in this fact sheet.</p> <p>If you cannot document that your controlled substance wastes are not hazardous, manage them as (1) a fully regulated hazardous waste and (2) in compliance with DEA requirements. Hazardous waste controlled substances may be managed through reverse distribution if you are the legal possessor of the controlled substances and follow the MPCA's reverse distribution conditions. For more information, see the Reverse distribution of pharmaceuticals section.</p> <p>Controlled substances may not be managed through household pharmaceutical collection programs or drop boxes unless the waste is eligible to be managed as a household hazardous waste. See the Household versus commercial wastes entry in this fact sheet.</p> <p>Non-hazardous controlled substances that have been rendered non-recoverable by a method approved by the DEA may be disposed of in your solid waste stream.</p>
Cuvettes, cartridges, and boats	<p>Many laboratory analyzers use reagents, calibrators, and cleaners packaged in cuvettes, cartridges, or boats. If any of these wastes may release liquids when handled in the disposal process, ensure you evaluate the liquids in the package separate from the cuvette, cartridge, or boat, rather than the package as a whole. Some cuvette, cartridge, and boat manufacturers have published Material Safety Data Sheets (MSDS) showing the concentration of hazardous constituents as a percentage of the whole package, including the weight of plastic or metal components. Applying these concentrations as printed may inadvertently lead to a false evaluation of the liquid waste as non-hazardous.</p>
Dental amalgam	<p>In Minnesota, mercury-containing amalgam in any form that will be recycled may be managed the same as universal waste. Mercury-containing amalgam that is not recycled must be managed under the full hazardous waste requirements. For more information, see MPCA hazardous waste fact sheet #w-hw4-62, Universal Wastes, at http://www.pca.state.mn.us/publications/w-hw4-62.pdf.</p>

Waste/Issue	Regulatory consensus
Dental wastewater	<p>Manage mercury-containing wastewater that has not been pretreated by an approved amalgam separator as a toxic hazardous waste. Do not discharge mercury-containing wastewater, pretreated or not, to a septic system.</p> <p>If your site is located within a Metro County, use an amalgam separator approved by the Metropolitan Council Environmental Services (MCES) or the MPCA (see More information). If outside the Metro Counties, you are encouraged to use an approved amalgam separator. Notify your POTW of your dental wastewater discharge and whether you are using an amalgam separator. For more information, see POTW.</p> <p>You may manage mercury-containing wastewater pretreated by an approved and properly maintained amalgam separator the same as universal waste. For more information, see MPCA hazardous waste fact sheet #w-hw4-62, Universal Wastes, at http://www.pca.state.mn.us/publications/w-hw4-62.pdf.</p>
Drug Buster™	<p>The Drug Buster™ product is intended for treatment of non-hazardous wastes only, including non-hazardous controlled substances. It will not render your hazardous or unevaluated pharmaceutical wastes non-hazardous nor allow you to throw them into the normal trash. For more information, see Treating hazardous waste at your site.</p>
Dual wastes	<p>In Minnesota, dual waste is waste that simultaneously meets the definitions of both hazardous waste and infectious waste. Manage dual waste in compliance with both hazardous and infectious waste regulations. (Neither ‘trumps’ the other.)</p>
Dust and particles	<p>If a solid pharmaceutical is a hazardous waste when disposed of, the dust and particles created by that waste are also hazardous waste. You may visually examine solid surfaces and personal protective equipment (such as countertops, pill dispensers, and gloves) that may have come into contact with solid pharmaceuticals (such as tablets) to identify whether contamination has occurred. Uncontaminated solid surfaces and personal protective equipment may be managed as non-hazardous waste. Materials used to clean up dust or particles of a hazardous waste are hazardous wastes as well; manage them accordingly.</p>
ECG & EKG electrodes	<p>Many electroencephalograph (ECG) and electrocardiogram (EKG) electrodes contain silver in metallic or gel form. If you have waste electrodes, you must evaluate them before disposal or assume they are toxic hazardous wastes. At this time, the MPCA has not received adequate information for a wide enough variety of electrodes to issue blanket guidance about their hazardous waste status.</p>
Empty containers	<p>Most containers that previously held hazardous waste or pharmaceuticals that would be hazardous wastes at disposal may be considered ‘empty’ for hazardous waste purposes only if both of these conditions are met:</p> <ol style="list-style-type: none"> 1. All material that can be removed by the method commonly used for that type of container has been removed. For example, if material is normally removed from a vial by aspiration with a syringe, then the vial must contain no liquid which could still be removed with a syringe; and 2. After the first condition has been met, no more than 3% of the container capacity remains. (Three percent applies to containers of 119 gallons or less. Larger containers have different standards.) <p>If a container held an acute hazardous waste or a pharmaceutical that would be acutely hazardous when disposed of (such as warfarin or nicotine), it is not ‘empty’ until it has been triple-rinsed (rinsed three times) using a solvent that can dissolve the contents. The rinse liquid is then an acute hazardous waste.</p> <p>For more information, see MPCA hazardous waste fact sheet #w-hw4-16, Containers Used to Hold Hazardous Wastes & Products, at http://www.pca.state.mn.us/publications/w-hw4-16.pdf.</p>

Waste/Issue	Regulatory consensus
Epinephrine	<p>In Minnesota, epinephrine salts, which comprise the majority of pharmaceutical forms of epinephrine, are not considered to meet the definition of a P042 acute hazardous waste. Therefore, only waste that contains epinephrine base {Chemical Abstract Service (CAS) Registry number 51-43-4} as its sole active ingredient will be a P042 acute hazardous waste at disposal. Health care providers must determine which form of epinephrine is contained in their pharmaceutical epinephrine solutions.</p> <p>For those applying the Alternate Method to Evaluate Pharmaceutical Waste for the Lethality Characteristic, the MPCA considers epinephrine in general to be an endocrine disruptor and therefore a lethal hazardous waste. However, generators may assume epinephrine with concentrations less than 0.24 percent is not lethal. The MPCA and Metro Counties strongly encourage incineration to dispose of even non-hazardous epinephrine waste.</p> <ul style="list-style-type: none"> • Unused epinephrine base (CAS #51-43-4) is an acute P042 listed hazardous waste at any concentration. • Used and unused epinephrine base and salts ≥ 0.24 percent are lethal hazardous wastes. • Used and unused epinephrine base and salts < 0.24 percent are not lethal, but still must be assumed to be hazardous for other characteristics or evaluated and documented as non-hazardous.
Evaluation documentation	<p>You must be able to readily access (physically or electronically) at your site all documentation from your waste evaluations. If an evaluation was performed by a third party, such as a consultant or a transporter, you must have the documented rationale they used to evaluate the waste (e.g. references to the actual flashpoint, presence and concentration of any contaminants, median lethal dose, etc.); the final conclusion alone is not sufficient. For more information about evaluation, see MPCA hazardous waste fact sheet #w-hw1-01, Evaluate Waste; Determine Generator Size, at http://www.pca.state.mn.us/publications/w-hw1-01.pdf.</p>
Formaldehyde and formalin solutions	<p>Formalin is a solution of formaldehyde, methanol, and water.</p> <ul style="list-style-type: none"> • Unused solutions containing formaldehyde as the sole active ingredient are U122 listed hazardous wastes at any concentration. • Used and unused solutions containing $\geq 20\%$ formaldehyde are lethal hazardous wastes. • Used solutions containing $< 20\%$ formaldehyde are considered non-hazardous. <p>If you intend to discharge formaldehyde to a sanitary sewer, you must notify the POTW before discharge regardless of its hazardous waste status. Never discharge waste formalin or formaldehyde solutions to a septic system. For more information, see POTW.</p>
Free liquids and dry absorbents	<p>Free liquids are assumed to be present in all pre-moistened absorbents and those to which liquids are added, such as surgical gauze used with liquid disinfectants, unless you show that the absorbents meet the hazardous waste requirement for “dry” at the time of disposal. Absorbents may be considered “dry” in Minnesota (not containing free liquid) if no liquid drips from them when wrung with reasonable mechanical pressure (maximum hand pressure).</p> <p>Assume free liquids are hazardous for ignitability and corrosivity unless you evaluate and document them as non-hazardous.</p>
Glutaraldehyde solutions	<p>Solutions (like cold sterilants) with a glutaraldehyde concentration $\geq 27\%$ are lethal hazardous wastes. Since glutaraldehyde is an aquatic toxicant, facilities are encouraged to neutralize waste glutaraldehyde with glycine before discharge to a POTW. Health care providers that intend to discharge glutaraldehyde-containing wastes to a POTW must notify the POTW before discharge, whether or not they are neutralized. For more information, see POTW.</p>

Waste/Issue	Regulatory consensus
Hazardous waste codes	<p>Health care providers and other generators of hazardous waste must report their hazardous wastes using specific hazardous waste codes. The appropriate codes a generator must use are specific for each situation:</p> <ul style="list-style-type: none"> • Manifesting – If more than six waste codes apply to a single waste stream, generators must enter the six four-character hazardous waste codes that are most representative of the properties of the waste. If the waste includes any Minnesota-specific hazardous waste codes, such as MN01, MN02, or MN03, include these in the six entered codes. For more information on manifesting, see MPCA hazardous waste fact sheet #1.07, Manifest Shipments of Hazardous Waste, at http://www.pca.state.mn.us/publications/w-hw1-07.pdf. • Land Disposal Restrictions – Generators required to provide a Land Disposal Restrictions form must enter all of the four-character hazardous waste codes represented in the waste. For more information on Land Disposal Restrictions, see U.S. Environmental Protection Agency (EPA) training module #EPA-530-K-05-013, Introduction to Land Disposal Restrictions, available on the EPA website at http://www.epa.gov/. • Annual reporting – Generators in a Metro County must follow the annual reporting process for their county. In greater Minnesota, Large Quantity Generators (LQGs) and Small Quantity Generators (SQGs) must enter all of the four-character hazardous waste codes represented in their generated waste; VSQGs must enter all of the two-digit hazardous waste types represented in their generated waste. For more information on annual reporting in greater Minnesota, see MPCA fact sheet #w-hw7-01, Hazardous Waste License Application, at http://www.pca.state.mn.us/publications/w-hw7-01.pdf.
HemoCue™ cuvettes	<p>HemoCue™ cuvettes are assumed to be lethal hazardous wastes unless evaluated and determined to be non-hazardous. Ensure you evaluate the liquids separate from the cuvette container. See the Cuvettes, cartridges, and boats entry in this fact sheet.</p> <p>Note: HemoCue™ cuvettes contaminated with blood may be dual waste subject to both hazardous and infectious regulatory requirements.</p>
Home health care provider waste	<p>Home health care providers may manage hazardous waste generated in a client's home as a household hazardous waste if they dispose of it at the house with the permission of the client. They may also transport it to their central business location and dispose of it as a commercially-generated hazardous waste from that location.</p> <p>See the Construction and service contractor wastes entry in this fact sheet.</p>
Household versus commercial wastes	<p>Pharmaceutical hazardous waste generated from commercial-type activity is regulated hazardous waste in Minnesota regardless of where it is generated. Pharmaceutical waste generated from non-commercial household activities is unregulated household hazardous waste in Minnesota, unless and until collected by a household hazardous waste collection program.</p> <p>Health care providers that generate pharmaceutical hazardous wastes from commercial activities are regulated hazardous waste generators. The MPCA considers the degree of centralized control and storage of pharmaceuticals in a facility as the most significant indicator of generation from commercial activities:</p> <ul style="list-style-type: none"> • Pharmaceuticals stored in a centralized, employee-controlled location separate from resident living areas, such as is required at hospitals, nursing homes, and boarding-care homes, will be considered generated from commercial activities and therefore regulated when discarded. <p>(continued)</p>

Waste/Issue	Regulatory consensus
Household versus commercial wastes (continued)	<ul style="list-style-type: none"> Pharmaceuticals stored in resident rooms or other non-central and unrestricted-access location, such as at home-care client houses, may be considered generated from non-commercial household activities and therefore household hazardous waste when discarded. <p>Note: Pharmaceutical waste generated in a long-term care facility with a maximum capacity of six residents may be considered household waste regardless of the control and storage indicators above.</p>
Ictotest™ tablets	<p>Unreacted Ictotest™ tablets are assumed to be reactive hazardous waste. As a solid material, reacted Ictotest™ tablets are not corrosive hazardous waste, but attempting to treat reacted tablets by dissolving them in water in a closed container may create a liquid corrosive hazardous waste. Corrosive hazardous wastes may be neutralized on site and discharged to a sanitary sewer. If you intend to discharge corrosive hazardous waste, notify the POTW before discharge, whether or not the waste is neutralized. For more information, see POTW.</p>
Infectious waste	<p>Ensure you have a written management plan for your infectious waste and follow your plan. Do not send your infectious waste management plan to the MPCA or Metro County unless specifically requested. For more information about infectious waste management plans and other infectious waste requirements, see MPCA solid waste fact sheet #w-hw4-30, Infectious Waste: Management Guidance for Generators, at http://www.pca.state.mn.us/publications/w-sw4-30.pdf.</p>
Inspection of pipe to POTW	<p>If you discharge hazardous waste to the sanitary sewer, you must ensure that your pipes that connect to the publicly-owned sewer system will not release any hazardous waste to the environment. You are strongly encouraged to periodically inspect your complete piping system, including underground pipes, to ensure integrity.</p>
Intrauterine devices (IUDs)	<p>Some intrauterine devices (IUDs) may contain barium for radiopacity purposes; some may contain pharmaceutical hormones to increase their effectiveness. When removed by a health care provider and disposed of, these IUDs may be toxic hazardous wastes, lethal hazardous wastes, or both. Manage removed IUDs as hazardous waste or evaluate and document they are not hazardous.</p>
Intravenous bags and sealed tubing	<p>An intravenous (IV) bag and its attached tubing (commonly referred to as an administration or infusion set) are together considered a container – not a dispensing instrument. When assessing whether an administration set is empty, you must include any excess and residual liquids in the set, including the attached tubing. If the container is not empty, you must evaluate the contents to determine whether they are hazardous waste. If tubing is designed to be removed from an administration set, it may be assessed separately from the IV bag once it is removed.</p> <p>Tubing flushed with saline at three times the volume of the tubing is considered to have met both the empty container requirement for all hazardous wastes and the triple-rinsing requirements for acute hazardous wastes. This interpretation applies only to that segment of tubing actually triple-rinsed and not to upstream tubing, attached IV bags, or other equipment.</p> <p>Note: Administration sets commonly leak, so consider them “free liquids” and place them in a closed, leak-proof container when accumulated for disposal.</p>
Laboratory analyzer wastes	<p>Laboratory analyzer wastes (consisting of patient samples mixed with chemical reagents, calibrators, and cleaners) commonly are either piped directly to a drain for discharge to the sanitary sewer or contained in cuvettes, cartridges, bubble tapes, or removable containers.</p> <p>(continued)</p>

Waste/Issue	Regulatory consensus
Laboratory analyzer wastes (continued)	<p>Evaluate each waste stream generated by the analyzer at the point it leaves the analyzer before it is mingled or combined with other wastes. Each discharge pipe or container is considered a separate and distinct waste stream; evaluate each separately. Wastes from cuvettes, bubble tapes, and similar waste expelled from an analyzer at a common point may be considered a single waste stream for evaluation.</p> <p>Assume all wastes from an analyzer, including expired reagents or calibrators and discharged or expelled wastes, are hazardous unless you evaluate and document that they are not hazardous.</p> <p>Contact MPCA or Metro County hazardous waste staff for guidance on collecting a representative sample from your analyzer. When determining the representative sample, you must take into account calibrations, cleanings, and number and types of tests specific to your analyzer and its use in your facility.</p> <p>Note: Lab analyzer wastes may be dual wastes subject to both hazardous and infectious waste regulatory requirements.</p>
Laboratory waste	<p>Assume all laboratory waste you dispose of is hazardous until you evaluate and document that it is not hazardous. Discharging or rinsing laboratory stains, reagents, and fixatives into the sewer is disposal. Document all evaluations; ensure they are available for inspection. For more information about evaluation, see MPCA hazardous waste fact sheet #w-hw1-01, Evaluate Waste; Determine Generator Size, at http://www.pca.state.mn.us/publications/w-hw1-01.pdf.</p>
Listed hazardous wastes	<p>A waste is a “listed” hazardous waste in Minnesota if it is identified on any of the four hazardous waste lists or contains polychlorinated biphenyls (PCBs) at greater than 50 parts per million (ppm). However, only three of the four lists generally apply to health care providers, and PCBs are usually found in healthcare facilities only in fluorescent light ballasts and old X-ray equipment. See:</p> <ul style="list-style-type: none"> • MPCA hazardous waste fact sheet #w-hw2-00, F List of Hazardous Wastes at http://www.pca.state.mn.us/publications/w-hw2-00.pdf • MPCA hazardous waste fact sheet #w-hw2-02, P List of Acute Hazardous Wastes at http://www.pca.state.mn.us/publications/w-hw2-02.pdf • MPCA hazardous waste fact sheet #w-hw2-03, U List of Hazardous Wastes at http://www.pca.state.mn.us/publications/w-hw2-03.pdf • MPCA hazardous waste fact sheet #w-hw4-48f, Managing PCBs in Ballasts and Small Capacitors at http://www.pca.state.mn.us/publications/w-hw4-48f.pdf
Listed wastes that are excluded	<p>Certain listed chemicals are excluded from regulation as listed hazardous waste in Minnesota provided both of these two criteria are met:</p> <ol style="list-style-type: none"> 1. The chemical was originally listed only for the characteristic(s) of ignitability, corrosivity, or reactivity; and 2. The waste does not exhibit that/those characteristic(s) at the point of generation. <p>For example, nitroglycerin, originally listed for reactivity, is not reactive in final pharmaceutical form. At the time of disposal, that final form would not be a P081 acute hazardous waste. The wastes still must be evaluated for all other characteristics. For more information on this exception, see MPCA hazardous waste fact sheet #w-hw8-01, Exclusion of Some Characteristic Wastes under Certain Conditions, available at http://www.pca.state.mn.us/publications/w-hw8-01.pdf.</p>
Mail-back pharmaceutical disposal	<p>Unused and other waste pharmaceuticals may not be disposed of using a ‘mail-back’ service unless all of the reverse distribution conditions are followed or the pharmaceuticals are evaluated before disposal and documented to be non-hazardous. See the Reverse distribution of pharmaceuticals entry in this fact sheet.</p>

Waste/Issue	Regulatory consensus
Nicotine patches & gum	<p>Unused nicotine patches and gum destined for disposal are considered to be commercial chemical products in Minnesota, not manufactured articles, and therefore are P075 acute hazardous wastes. Manage packaging materials for nicotine patches and gum as acute hazardous waste as discussed in the Packaging entry below.</p> <p>Applied nicotine patches and chewed gum are considered “used” in Minnesota (regardless of how long the patch was on or the patient chewed the gum); therefore, they no longer meet the definition of the P075 acute hazardous waste listing.</p>
Nitroglycerin	Nitroglycerin in final pharmaceutical form is not a P081 acute hazardous waste at the time of disposal. See the Listed wastes that are excluded entry in this fact sheet.
OPA solutions	Ortho-phthalaldehyde (OPA) cold sterilants, while not listed hazardous wastes and not generally hazardous for lethality or other hazardous characteristics, are aquatic toxicants. If you use OPA sterilants, you are encouraged to use glycine to neutralize the OPA before discharging it to a POTW. Remember you must notify your POTW before discharging OPA whether or not it is neutralized.
Packaging	<p>Packaging, including wrappers, adhesive backing, and foil that immediately enclosed a pharmaceutical, are considered segments of a container that held the pharmaceutical. If the pharmaceutical was an acute hazardous waste at the time of disposal, the packaging must also be managed as an acute hazardous waste unless it is triple-rinsed.</p> <p>If the pharmaceutical was not acute hazardous waste and the packaging meets the empty container standards discussed in the Empty containers section, it is “empty” and exempt from further hazardous waste regulation.</p>
Personal protective equipment (PPE)	<p>For PPE potentially contaminated with solid pharmaceuticals or other solid hazardous wastes, such as tablets, see the Dust and particles section in this fact sheet.</p> <p>For PPE potentially contaminated with liquid pharmaceuticals or other liquid hazardous wastes, see the Chemotherapy wastes section in this fact sheet.</p>
Pharmaceutical waste	<p>You must assume all pharmaceutical waste is hazardous unless you evaluate and document that it is not hazardous. For guidance evaluating pharmaceuticals, see MPCA hazardous waste fact sheet #w-hw4-45a, Evaluating Pharmaceutical Wastes, at http://www.pca.state.mn.us/publications/w-hw4-45a.pdf.</p> <p>Note: Squirting or pouring pharmaceuticals into a sanitary sewer drain or absorbent material, commonly referred to as wasting, is a form of disposal. For more information about discharging pharmaceuticals to a sanitary sewer for disposal, see the Sewered wastes section in this fact sheet.</p>
Phentermine	Phentermine hydrochloride is not considered to meet the definition of P046 acute hazardous waste in Minnesota. Only waste that contains phentermine base (CAS Registry number 122-09-8) as its sole active ingredient is a P046 acute hazardous waste. Health care providers must determine which form of phentermine is contained in their pharmaceutical phentermine wastes. If your phentermine waste is not a P046 acute hazardous waste, you must still evaluate the waste for all other hazardous waste characteristics. See the Controlled substances section in this fact sheet.
Publicly Owned Treatment Works (POTW)	If your facility is connected to a sanitary sewer, your Publicly Owned Treatment Works (POTW) is the governmental authority that operates the sanitary sewage treatment plant. If your facility is not connected to a sanitary sewer, only normal toilet and sink waste may be discharged to your septic system. For more information, see Sewered wastes .
Radiological contrast media	Assume all barium-containing radiological contrast medias that you must dispose of are toxic hazardous wastes unless you evaluate and document they are not hazardous. In Minnesota, contrast media or any other waste excreted by or removed from a patient is not considered a generated waste subject to hazardous waste regulations.

Waste/Issue	Regulatory consensus
Reverse distribution of pharmaceuticals	<p>Unevaluated or hazardous waste pharmaceuticals contained in original manufacturer or appropriate dispensing containers that have not left your facility's control may be shipped through the established pharmaceutical reverse distribution system for disposal as long as: (1) they will be recycled or disposed of as hazardous wastes, (2) you maintain records and (3) you meet all other conditions of Minnesota's allowance.</p> <p>Comply with all return criteria of your chosen reverse distribution vendor. You do not need to count pharmaceuticals shipped through reverse distribution toward your regulated hazardous waste generator size. However, if you are located in a Metro County, you may need to report these wastes.</p> <p>Ensure you follow all conditions described in MPCA hazardous waste fact sheet #w-hw3-36b, Reverse Distribution of Pharmaceuticals, at http://www.pca.state.mn.us/publications/w-hw3-36b.pdf.</p>
Sewered wastes	<p>Any time you discharge or waste material into a drain it is "disposal" by sewerage. Assume all wastes disposed of by sewerage (other than normal toilet and sink wastes) are hazardous wastes unless you evaluate and document they are not hazardous. When evaluating sewerage wastes, each must be evaluated individually, before being mingled or combined with other wastes or wastewater flow.</p> <p>Note: In Minnesota, wastes excreted by or removed from a patient are not considered generated wastes subject to the hazardous waste regulations. You do not need to collect or evaluate excreted or removed wastes. However, laboratory samples mixed with stains, reagents, and fixatives are regulated.</p> <p>To determine potential to discharge to a sewer, you must answer two questions:</p> <ol style="list-style-type: none"> 1. Has the waste been evaluated (documented to be non-hazardous)? 2. Does the receiving POTW prohibit or limit the waste? <p>The answer to the first question does not necessarily control the second. Some wastes, though non-hazardous, may not be sewerage. Other wastes, though hazardous, can safely be treated by a POTW and may be discharged.</p> <p>Notify your POTW before discharging any waste other than normal toilet and sink wastes. Ensure your notification includes at least these items:</p> <ul style="list-style-type: none"> • The identity of the waste • The hazardous waste status of the waste • The volume intended to be sewerage to the POTW <p>You must notify your POTW even if you have already reported the wastes to your hazardous waste regulator (MPCA or Metro County); regulators do not forward notifications to the POTW.</p> <p>The prohibitions and limitations placed by your POTW on any discharges are final and binding. However, if you do not receive any response from your POTW within a reasonable period after you have notified them of an intended discharge, you may discharge that waste. Keep documentation of your notification to the POTW. Annually report all sewerage hazardous wastes to your hazardous waste regulator.</p> <p>For POTW notification guidance, see MPCA hazardous waste fact sheet #w-hw7-11, Sewered Waste Notification, available at http://www.pca.state.mn.us/publications/w-hw7-11.pdf.</p> <p>Do not discharge any waste except normal toilet and sink waste to a septic system.</p>
Stains, fixatives, and reagents	<p>Assume all wastes produced during the staining process are hazardous unless you evaluate each separately at the point of generation and before combining it with other wastes. When solutions are cleaned off slides or equipment and discharged into the sewer, it is considered disposal. See the Sewered wastes section.</p>

Waste/Issue	Regulatory consensus
Sterilization indicators	<p>Some steam sterilization indicator products, such as tapes and cards, still contain sufficient lead or barium to make them toxic hazardous wastes when they are discarded. Assume sterilization indicators and items to which the indicators are attached (such as sterilization wrap commonly known as 'blue wrap') are hazardous unless you evaluate each indicator/wrap combination separately and document each is not hazardous. Analytical results may be mathematically extrapolated between identical products and product combinations.</p> <p>The MPCA and Metro Counties encourage the use of non-hazardous steam sterilization indicator products that are now available.</p>
Surgical/wound prep applicators	<p>Combination reservoir/sponge applicators used for surgical preparation and wound cleaning commonly consist of a reservoir (typically cylindrical) containing a liquid disinfection agent and attached to an absorbent material. Many disinfection agents used in these applicators are alcohol-based and are ignitable hazardous wastes at disposal. If the disinfectant is ignitable, manage the entire applicator as a hazardous waste, unless the absorbent on the applicator is dry and the reservoir meets the empty container standards. See the Free liquids and dry absorbents and the Empty containers sections in this fact sheet.</p>
Surgical/wound prep gauze pads	<p>Pre-moistened gauze pads are commonly used for cleaning wounds and preparing surgical sites. Many such pads are packaged individually in foil envelopes and are pre-moistened with an ignitable alcohol-based disinfection agent. Pads and other absorbents that contained only an ignitable liquid and become dry through use are non-hazardous. Pads that still contain free liquid after use are hazardous waste. See the Free liquids and dry absorbents section.</p>
Training	<p>SQGs and LQGs are not required to train employees that only place hazardous wastes into satellite accumulation containers and have no other hazardous waste-related duties. The MPCA and Metro Counties nevertheless strongly encourage that all employees at a facility handling any hazardous wastes be trained, as training is the best method to minimize improper waste management and resulting costs and liabilities.</p>
Treating hazardous waste at your site	<p>You may use products such as Chemgon™, Drug Buster™, Smart Sink™, or similar products to treat your unevaluated or known pharmaceutical or maintenance hazardous waste in a container at the site where it is generated; however, all treatment must be performed in a closed container. Report all waste treated on site as generated hazardous waste.</p> <p>Caution: Many of these products do not actually treat hazardous pharmaceutical waste, but only encase it in a solid matrix or dissolve it into a solution. You must manage the resulting mixture as a fully regulated hazardous waste unless you can document that your treated waste is no longer hazardous under Minnesota definitions. You may not discard treated pharmaceuticals into your normal trash without this documentation.</p>
Treating infectious waste at your site	<p>You may use products such as Isolyser/SMS™ to treat infectious waste that does not include sharps in a container at the site where it is generated without MPCA approval; however, you are responsible for verifying that the decontaminated waste is not infectious.</p> <p>You may also treat infectious waste that does contain sharps; however, after treatment you must still manage the treated waste as a fully regulated infectious waste and meet all corresponding requirements, unless the system has been approved by the MPCA.</p> <p>For more information, see MPCA solid waste fact sheet #w-sw4-33, Infectious waste: Management guidance for on-site treatment, at http://www.pca.state.mn.us/publications/w-sw4-33.pdf.</p>

Waste/Issue	Regulatory consensus
Unsorted pharmaceuticals	<p>You may find it convenient to collect and co-mingle both product and waste pharmaceuticals in a common container for later sorting. If any pharmaceuticals are apparently, reasonably, or known to be a waste at the time they are placed in a common container, the contents of the entire container are also considered wastes until the wastes are segregated. Assume all wastes that have not been evaluated are hazardous. Any container in which they are collected must meet all hazardous waste container requirements.</p> <p>Mixing a listed hazardous waste with non-listed waste may result in the entire mixture becoming a listed hazardous waste. To ensure mixing does not occur before sorting, you may use containers or plastic bags to separate wastes. Assume spiked IV bags or vials with pierced diaphragms containing free liquids to be uncontained unless individually shown to be leak-free. Snapped ampoules with any free liquid also are considered uncontained. For more information on hazardous waste container requirements, see MPCA hazardous waste fact sheet #w-hw1-04-05, Label and Store Hazardous Waste, at http://www.pca.state.mn.us/publications/w-hw1-04-05.pdf.</p>
Vaccines	<p>Unused or expired vaccines are subject to the same hazardous waste requirements and eligible for the same allowances as all other pharmaceuticals. They may be managed for disposal through reverse distribution as long as you follow all the relevant conditions. See the Reverse distribution of pharmaceuticals section.</p> <p>Live or attenuated vaccines may also be infectious wastes. See the Infectious waste section.</p>
Veterinary pharmaceuticals	<p>Veterinary pharmaceuticals are subject to the same hazardous waste requirements and eligible for the same allowances as human pharmaceuticals. They may be managed for disposal through reverse distribution as long as you follow all the relevant conditions. See the Reverse distribution of pharmaceuticals section.</p>
Voluntary surrenders at detention facilities	<p>Drugs voluntarily surrendered at detention facilities from persons arriving or leaving the facility may be managed as household hazardous waste. Drugs confiscated by law enforcement or corrections agencies from inmates or visitors remain regulated as hazardous wastes. For more information on drug waste management by law enforcement and corrections agencies, see MPCA hazardous waste fact sheet #w-hw4-13, Managing Waste at Law Enforcement Agencies, at http://www.pca.state.mn.us/publications/w-hw4-13.pdf.</p>
Waste in a used dispensing instrument	<p>Dispensing instruments in Minnesota include manual injection syringes, injection ‘pens,’ and ready-to-assemble syringes, including Carpuject™, StatDose™, and similar products, as well as inhalers. Carpules, removable inhaler cartridges, and similar portions of a used dispensing instrument separated before disposal are still considered to be dispensing instruments. Oral and rectal syringes and intravenous administration sets are not considered dispensing instruments for hazardous waste purposes.</p> <p>Waste remaining in a used dispensing instrument is considered used and not a P-Listed or U-Listed waste.</p> <p>A used dispensing instrument with the plunger fully depressed is considered to be an empty container, regardless of waste remaining in the needle or hub. If the plunger is not fully depressed, the remaining excess pharmaceutical in the barrel must be assumed to be hazardous unless it is evaluated and documented to be non-hazardous.</p> <p>Note: A used syringe containing excess hazardous waste pharmaceutical is a dual waste subject to both hazardous and infectious waste regulatory requirements.</p>

Waste/Issue	Regulatory consensus
X-ray equipment	<p>Medical radiology (X-ray) equipment may contain a high-voltage tube or magnetron, or occasionally a radioactive source, to generate the X-rays. In addition, nearly all modern radiology equipment contains electronic control systems.</p> <p>Radioactive sources: Manage under the Minnesota Department of Health (MDH) radiation management regulations. For more information, visit MDH at http://www.health.state.mn.us/.</p> <p>Capacitors and transformers: High-voltage tubes or magnetrons are usually powered by capacitors or electrical transformers. Assume that capacitors and transformers manufactured before 1979 contain polychlorinated biphenyls (PCBs). Manage them as PCB hazardous wastes in Minnesota. For more information on identifying and managing PCBs, see MPCA hazardous waste fact sheet #w-hw4-48a, Identifying, Using, and Managing PCBs, at http://www.pca.state.mn.us/publications/w-hw4-48a.pdf.</p> <p>Electronics: Electronic control systems, indicated by keypads, display screens, and digital input or output ports, become electronic waste (E-waste) when radiology equipment is disposed of or disassembled. Manage E-waste under the requirements described in MPCA hazardous waste fact sheet #w-hw4-15, Managing Electronic Wastes, at http://www.pca.state.mn.us/publications/w-hw4-15.pdf.</p>
X-ray film & plates	<p>Film: You may assume that X-ray film manufactured after 1976 is non-hazardous for silver, unless there is a specific reason to believe a particular film is hazardous. You are encouraged to recycle all waste X-ray film. For more information, see MPCA hazardous waste fact sheet #w-hw4-46, Managing Photographic and X-ray Waste, at http://www.pca.state.mn.us/publications/w-hw4-46.pdf.</p> <p>Note: Some Metro Counties have specific management requirements for X-ray film, even if it is non-hazardous.</p> <p>Reusable plates: Many reusable X-ray plates, known as photostimulable phosphor (PSP) plates, used with computed radiography (CR) systems contain barium. Assume your PSP plates are toxic hazardous waste when disposed, unless you evaluate and document that they are not hazardous.</p>
X-ray shielding and packaging	<p>X-ray shielding, personal protective equipment (PPE), and film packaging commonly contain lead, either in foil or powder form. Lead metal sheets and foil are exempt from hazardous waste regulation if they are recycled as scrap metal. For more information on scrap metal, see MPCA hazardous waste fact sheet #w-hw4-27, Hazardous Scrap Metal, at http://www.pca.state.mn.us/publications/w-hw4-27.pdf. Keep documentation showing they have been recycled.</p> <p>Glass, rubber, plastic, and other materials impregnated with lead powder or lead compounds do not meet the scrap metal definition and are toxic hazardous wastes at disposal; however, you are still encouraged to recycle all lead-containing X-ray waste. See MPCA hazardous waste fact sheet #w-hw2-42, Recycling Hazardous Waste, at http://www.pca.state.mn.us/publications/w-hw2-42.pdf for more information about hazardous waste recycling.</p>

Future issue reviews

The MPCA and Metro counties continue to research and develop consensus on health care related issues. If you have an environmental regulatory interpretation question related to health care, please contact your MPCA or Metro County hazardous waste staff. If your question has statewide relevance and is not addressed in existing guidance, it may be added to this fact sheet. See [More information](#) for contact information.

More information

Guidance and requirements in this fact sheet were compiled from Minnesota Statutes, Chapters §115A and §116, and Minnesota Rules, Chapters 7035 and 7045, and incorporates regulatory interpretation decisions made by the MPCA on July 2, 2004; October 17, 2007; October 18, 2007; September 9, 2008; October 27, 2008; May 21, 2010; April 13, 2011; May 6, 2011; August 9, 2011; and January 25, 2012. Visit the Office of the Revisor of Statutes at <https://www.revisor.mn.gov/pubs> to review the Minnesota Statutes and Rules directly.

Your Metro County and the MPCA have staff available to answer waste management questions. The MPCA's Small Business Environmental Assistance Program (SBEAP) can provide you with free, confidential regulatory compliance assistance. The Minnesota Technical Assistance Program (MnTAP) can help you reduce your waste generation and risk.

Metro County Hazardous Waste Offices

Anoka 763-422-7093
Carver 952-361-1800
Dakota 952-891-7557
Hennepin 612-348-3777
Ramsey 651-266-1199
Scott 952-496-8475
Washington 651-430-6655
Websites [http://www.co.\[county\].mn.us](http://www.co.[county].mn.us)

Metropolitan Council Environmental Services

Metro 651-602-1000
Website
..... <http://www.metrocouncil.org/environment>

Minnesota Technical Assistance Program

Toll free 1-800-247-0015
Metro 612-624-1300
Website <http://www.mntap.umn.edu>

Minnesota Pollution Control Agency

Toll free (all offices) 1-800-657-3864
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 651-296-6300
Willmar 320-214-3786
Website <http://www.pca.state.mn.us>

Small Business Environmental Assistance

Toll free 1-800-657-3938
Metro 651-282-6143
Website <http://www.pca.state.mn.us/sbeap/>



APPENDIX H
MPCA NOTIFICATION OF REGULATED WASTE
ACTIVITY FORM



Minnesota Pollution
Control Agency

520 Lafayette Road North
St. Paul, MN 55155-4194

Notification of Regulated Waste Activity Form

Hazardous Waste Program

Doc Type: License Application

Instructions begin on Page 2

Type or print only. You may complete this form electronically at <http://www.pca.state.mn.us/publications/w-hw7-09.doc>. When complete, make one copy for your records, and mail the original to the address above, *Attn: Hazardous Waste Licensing*. You may also fax it to 651-205-4592, or e-mail an image of a signed copy to: hw-licensing.pca@state.mn.us.
Be sure to complete all items in this form. Incomplete forms cannot be accepted by the Minnesota Pollution Control Agency.

1. **Type of notification:** ☐ **Initial** ☐ **Subsequent** ☐ **Inactivation**
Leave line #2 (HWID) blank. Complete remainder of form. Fill in line #2 (HWID). Complete sections of form with changes and lines #27 - #29. Complete lines #2 - #4 and lines #27 - #29.
2. **Hazardous Waste Identification Number (HWID):** _____
3. **Name of site:** _____
4. **Street address of site:** _____
(Do not enter a PO box or rural route number. Identify suite number if necessary.)
5. **Site city:** _____ 6. **State:** _____ 7. **Zip code:** _____
8. **Site County:** _____ 9. **Primary NAICS code for site:** _____
10. **Legal name of business/agency operating site:** _____
11. **Mailing address of business:** _____
12. **Business city:** _____ 13. **State:** _____ 14. **ZIP+4 code:** _____
15. **Site hazardous waste contact name:** _____
16. **Mailing address of contact:** _____
17. **Contact city:** _____ 18. **State:** _____ 19. **ZIP+4 code:** _____
20. **Contact phone:** _____ 21. **Contact fax:** _____
(Area code and number.) (Area code and number.)
22. **Contact e-mail:** _____
23. **Site estimated hazardous waste generator size** (If you generate hazardous waste, choose only one):
☐ Large Quantity Generator (LQG) ☐ Minimal Quantity Generator (MiniQG)
☐ Small Quantity Generator (SQG) ☐ One-time-only Generator
☐ Very Small Quantity Generator (VSQG)
24. **Other hazardous waste activities** (If you only generate hazardous waste, leave these blank):
☐ Transporter with a ten-day transfer facility ☐ Treatment, storage, or disposal facility
☐ Transporter without a transfer facility ☐ Recycling facility
25. **Electronic, universal, and other collection site activities** (If you only generate hazardous waste, also leave these blank):
☐ Electronic waste collector ☐ VSQG collection program site
☐ Electronic waste recycling facility ☐ Household hazardous waste collection site
☐ Universal waste lamp accumulation site ☐ Paint collection site
☐ Universal waste large quantity handler
26. **Used oil activities** (If you only generate used oil, or burn only your own used oil, leave these blank):
☐ Used oil transporter ☐ Used oil marketer ☐ Used oil processor ☐ Used oil burner

Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

27. **Print name:** _____ **Title:** _____
28. **Signature:** _____ **29. Date (mm/dd/yyyy):** _____

Instructions

Be sure to complete all items in this form as directed below. Incomplete forms cannot be accepted by the MPCA.

Businesses and government agencies which generate or manage hazardous waste in Minnesota must obtain a Hazardous Waste Identification Number (HWID) from the Minnesota Pollution Control Agency (MPCA). HWIDs are also commonly referred to as 'EPA ID Numbers'. If you have already obtained an U.S. Environmental Protection Agency (EPA) ID Number for your site, you do *not* also need to obtain an HWID.

This form replaces EPA Form 8700-12 and Form 8700-13A/B for sites in Minnesota.

For more information on HWIDs and when you must obtain one, see MPCA fact sheet #w-hw1-02, [Step 2: Obtain a Hazardous Waste Identification Number](#), available at <http://www.pca.state.mn.us/publications/w-hw1-02.pdf>.

You may access any of the MPCA fact sheets referenced in these instructions from the MPCA Hazardous Waste Publications webpage at <http://www.pca.state.mn.us/waste/pubs/business.html>.

1. Type of notification:

Initial - If your site does not already have an HWID, or you are not sure if your site already has an HWID or not, select this box. Leave line #2 (HWID) blank and complete the entire remainder of the form, including lines #27 - #29.

Subsequent - If your site already has an HWID, but you need to update or correct information, such as site name, address, owner, contact staff, telephone number, or e-mail change, select this box. Complete line #2 and then only the sections of the form with changes. *Do not select this box if your business has moved.* In that case, you must inactivate your previous HWID by selecting the 'Inactivation' box and then obtain a new HWID for the new location by also completing a separate form and selecting the 'Initial' box. Finally, complete lines #27 - #29.

Inactivation - If you have closed or sold a location, select this box. Complete lines #2 - #4 and lines #27 - #29.

2. **Hazardous Waste Identification Number (HWID):** If you selected the 'Initial' box on line #1, leave this line blank. If you selected either the 'Subsequent' or 'Inactivation' boxes, enter the HWID of this site in this line.
3. **Name of site:** Enter the name of the site where the hazardous waste is generated or managed. This is the name by which the site will be known to the MPCA. If your business operates multiple sites, ensure that you and the MPCA can identify this site easily by this name. You may choose to use your corporate name followed by a hyphen and a location, such as 'Acme Corp - Lake Wobegon'. If your site operates under a different name than your legal corporation or person, enter the name by which it is commonly known.
4. **Street address of site:** Enter the street address for the physical location where the hazardous waste is generated or managed. *Do not enter a Post Office (PO) box or Rural Route (RR) number.* If you do not have a street address for your site, the U.S. Postal Service (USPS) or county government may be able to assist you in obtaining one. Do not enter the address of your corporate or government offices.
5. **City:** Enter the city for the physical location where the hazardous waste is generated or managed.
6. **State:** Enter 'MN' unless you are a hazardous waste transporter or used oil transporter based outside Minnesota. If you are a transporter, enter the abbreviation for the state of the city identified in line #5.
7. **Zip code:** Enter the USPS zip code for the physical location where the hazardous waste is generated or managed.
8. **County:** Enter the county for the physical location where the hazardous waste is generated or managed. For cities which straddle county borders, ensure you enter the correct county.
9. **Primary NAICS code for site:** Enter the North American Industry Classification System (NAICS) Code for the primary activity at your site. To find your NAICS Code, visit the U.S. Census Bureau at <http://www.census.gov/> and search for 'NAICS'.
10. **Legal name of business or government agency operating site:** Enter the legal name of the business, government agency, or sole proprietor operating the site. Ensure that you have properly registered this name with the Minnesota Secretary of State, even if your business is headquartered outside Minnesota. To determine whether your business name has been registered, visit the Office of the Secretary of State at <http://www.sos.state.mn.us/>.
11. **Mailing address of business or government agency operating site:** Enter the mailing address for the executive office or headquarters of the business or government agency you identified on line #10. You may use PO boxes or RR numbers. The mailing address for the office does not need to be in Minnesota. If your business is a sole proprietorship, enter the home or another permanent address for the sole proprietor.
12. **Business city:** Enter the city for the business mailing address you identified on line #11.
13. **State:** Enter the state for the business mailing address you identified on line #11.
14. **ZIP+4 code:** Enter the USPS ZIP+4 code for the business mailing address you identified on line #11. To find the ZIP+4 code, visit the USPS at <https://www.usps.com/>.
15. **Site hazardous waste contact name:** Enter the name of the staff at the business or government agency you entered on line #10 whom you would like the MPCA to contact regarding hazardous waste activities at the site. The site contact need not be in Minnesota; however, they should be personally familiar with all hazardous waste operations at your site and with Minnesota state requirements. Do not enter a contractor or consultant. Ensure you enter an actual name - *do not* enter a position title.

- 16. Mailing address of contact:** Enter the mailing address for the site contact you identified on line #15. You may use PO boxes or RR numbers. The mailing address for your site contact need not be in Minnesota.
- 17. City:** Enter the city for the contact mailing address you identified on line #16.
- 18. State:** Enter the abbreviation for the state for the contact mailing address you identified on line #16.
- 19. Zip+4 code:** Enter the mailing ZIP+4 Code for the contact mailing address you identified on line #16. To find the ZIP+4 code, visit the USPS at <https://www.usps.com/>.
- 20. Contact phone:** Enter the direct telephone number, including area code, for the site contact you identified on line #15.
- 21. Contact fax:** Enter the facsimile telephone number, including area code, for the site contact you identified on line #15.
- 22. Contact e-mail:** Enter the E-mail address for the site contact you identified on line #15. If you do not have an e-mail address, you may leave this line blank, but this may delay future MPCA contacts with you.
- 23. Site estimated hazardous waste generator size:** If your site generates or will generate hazardous waste, select the box for the estimated hazardous waste generator size of your site. For more information on estimating your expected hazardous waste generator size, see MPCA fact sheet #w-hw1-01, [Step 1: Evaluate Waste; Determine Generator Size](http://www.pca.state.mn.us/publications/w-hw1-01.pdf), available at <http://www.pca.state.mn.us/publications/w-hw1-01.pdf>. If you are notifying as a one-time-only generator, ensure you submit an inactivation notification when you are finished generating the hazardous waste.
- If you are not a hazardous waste generator, but are notifying for one of the other reasons in lines #24, #25, or #26, leave this line blank.
- 24. Other hazardous waste activities:** If you transport, store, treat, dispose, or recycle hazardous waste you did not generate, select the appropriate box. If you only generate hazardous waste, or recycle only your own waste, leave this line blank. For more information on transporting, storing, treating, disposing, or recycling hazardous waste, see MPCA fact sheet #w-hw1-06, [Step 6: Treat or Dispose of Hazardous Waste Correctly](http://www.pca.state.mn.us/publications/w-hw1-06.pdf), available at <http://www.pca.state.mn.us/publications/w-hw1-06.pdf>.
- 25. Electronic, universal, and other collection site activities:** If you intend to collect or recycle electronic wastes from households, businesses, or government agencies, select the appropriate box. You may be subject to additional requirements. For more information on collecting or recycling electronic wastes, see MPCA fact sheet #w-hw4-15, [Managing Electronic Wastes](http://www.pca.state.mn.us/publications/w-hw4-15.pdf), available at <http://www.pca.state.mn.us/publications/w-hw4-15.pdf>.
- If you intend to collect more than 1000 universal waste lamps from others, select the 'Universal Waste Lamp Accumulation Site' box. You must also provide financial assurance to the MPCA. See MPCA form #w-hw7-20, [Lamp Accumulation Financial Assurance Form](http://www.pca.state.mn.us/publications/w-hw7-20.pdf), available at <http://www.pca.state.mn.us/publications/w-hw7-20.pdf>.
- If you estimate you will be a Large Quantity Handler of Universal Waste (LQH), select the 'Universal Waste Large Quantity Handler' box. For more information on universal wastes and the LQH threshold, see MPCA fact sheet #w-hw4-62, [Managing Universal Wastes](http://www.pca.state.mn.us/publications/w-hw4-62.pdf), available at <http://www.pca.state.mn.us/publications/w-hw4-62.pdf>.
- If you intend to operate a Collection Program for Very Small Quantity Generators (VSQG Collection Program), a Collection Program for Household Hazardous Waste (HHW Collection Program), or a Collection Site for Architectural Paint, select the appropriate box. You must also obtain specific approval and a license from the MPCA to operate such programs. Contact the MPCA for more information.
- If you will not collect hazardous waste from others or be an LQH of your own universal waste, leave this line blank.
- 26. Used oil activities:** Select the appropriate box for any used oil activities other than generation at your site. For more information on used oil, see MPCA fact sheet #w-hw4-30, [Managing Used Oil and Related Wastes](http://www.pca.state.mn.us/publications/w-hw4-30.pdf), available at <http://www.pca.state.mn.us/publications/w-hw4-30.pdf>. If you only generate or burn your own used oil, leave this line blank.
- 27. Printed name and title:** Enter the name and title of the person who signed this form.
- 28. Signature:** Read the Certification statement. Your owner, chief executive, or their authorized employee must sign this form. You may not sign this form if you are a contractor or consultant to the business or government agency operating the site.
- 29. Date:** Enter the date this form was signed.

More Information

The MPCA and your metropolitan county hazardous waste offices have staff that can help you. Contact your metropolitan county or the MPCA office nearest your facility at the numbers below.

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	651-266-1199
Scott County	952-496-8475
Washington County	651-430-6655
Website	http://www.co.[county].mn.us

Minnesota Pollution Control Agency

Toll free (all offices)	1-800-657-3864
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	651-296-6300
Willmar	320-214-3786
Website	http://www.pca.state.mn.us



APPENDIX I
MDA HAZARDOUS, INFECTIOUS AND DUAL WASTE
RESOURCE LIST

MDA *Hazardous, Infectious, and Dual Waste* Resource List

This is *not* an all inclusive list of all of the waste disposal companies that serve Minnesota Dental Clinics. The purpose of this list is to provide resources for dental clinics for disposing of hazardous, infectious or dual waste. Inclusion on this list does not indicate endorsement by the Minnesota Dental Association.

Dual Waste, Hazardous and/or Infectious Waste

Dental Recycling North America

1-800-360-1001

www.drna.com

Sharps, "Red Bag" Waste, Amalgam Waste, Pharmaceutical Waste and Other Hazardous Waste
Mail Back Programs Available

Veolia Environmental Services

1-888-669-9725

www.veoliaes.com

Sharps, Hazardous Waste, and Amalgam Waste Options
Mail Back Programs Available

MedPro Disposal

Biohazard Waste and Compliance Services

1-888-641-6131

www.medprodisposal.com

Sharps, "Red Bag" Waste and Pharmaceutical Waste
Mail Back Programs Available

Bay West

1-800-279-0456

www.baywest.com

Hazardous Waste, Amalgam and Pharmaceutical Waste
Call for available options

Clean Harbors and Safety Kleen (Newly acquired)

1-800-444-4244 or 1-800-669-5740

www.cleanharbors.com

Hazardous Waste, Amalgam and Pharmaceutical Waste
Call for available options

XMed Disposal

1-866-735-9709

www.xmeddisposal.com

Sharps, "Red Bag" Waste and Pharmaceutical Waste

Mail Back Programs Available

Waste Management

Go on website to locate telephone number for your nearest facility using your zip code.

www.wm.com

Sharps, Hazardous Waste, Amalgam Waste

Mail Back Programs Available

Stericycle

Biohazard Waste and Compliance Services

1-866-783-7422

www.stericycle.com

Sharps, "Red Bag" Waste, Pharmaceutical Waste, and Amalgam Waste Options

Mail Back Programs Available

Solmetex Inc.

1-800-216-5505

www.solmetex.com/dental

Sharps, "Red Bag" Waste, Amalgam Waste and Separators, Other Hazardous Waste

Mail Back Programs Available

Sharps and "Red Bag" Waste (Infectious, biohazard, blood soaked gauze, extracted teeth etc.)

GRP & Associates

1-800-207-0976

www.sharpsdisposal.com

Sharps and "Red Bag" Waste

Mail Back Programs Available

Medical Disposal Systems

952-445-7440

www.mds-mn.com

Sharps and "Red Bag" Waste

Call for available options

Amalgam/ Mercury Waste

Maguire Refining

1-800.486.2858

www.maguireref.com

Amalgam Waste

Mail Back Programs Available

Amalgaway

1-800-267-1467

www.amalgaway.com

Amalgam Waste and Separators

Mail Back Program Available

Bethlehem Apparatus Company

1-610-838-7034

www.bethlehemapparatus.com

Amalgam Waste

Mail Back Program Available

Doral Refining

1-800-645-2794

www.doralrefining.com

Amalgam Waste

Mail Back Program Available

Other Hazardous Waste Resources

Electronic Equipment, Batteries, Fluorescent Lamps, Gas/Oil, Lead, etc.

For an example of a very comprehensive list of vendors visit:

www.co.ramsey.mn.us/ph/hw/hazardous_waste.htm

MNOSHA

Phone: (651) 284-5050

Toll-free: 1-877-470-6742

<http://www.dli.mn.gov/mnosha.asp>

If you are unable to locate a company that suits your needs or have additional questions please contact: Bridgett Anderson, MDA Regulatory Affairs Manager at 612-767-4256.