BOWDOIN COLLEGE
BIOMEDICAL WASTE MANAGEMENT PLAN

This document meets the requirements of Maine DEP 38 MRSA Chapter 900 for the development, implementation and maintenance of a written biomedical waste management plan (BWMP; the Plan).

Purpose

The purpose of the BWMP is to provide information to the employees of Bowdoin College regarding the segregation, packaging, labeling, handling, storage, transport and disposal of biomedical wastes generated in the workplace.

Scope

The BWMP applies to all employees of Bowdoin College (including part-time, contract and student employees, and contracted vendors working onsite) who generate, handle and/or manage biomedical wastes in the course of their work.

Program Components

1. **Registration.** Bowdoin College is registered as a generator of biomedical wastes.

2. **Assignment of Responsibilities.** Each Department or Group generating biomedical wastes will designate at least one Responsible Person to oversee the implementation of the BWMP for their particular operations, specifically:

   - Supervising the identification, collection, and containment of biomedical wastes;
   - Maintenance of the workplace satellite accumulation area (SAAs);
   - Arranging for the transfer of full waste containers to the central accumulation area (CAA) for disposal; and
   - Participating in the annual Plan review.

A current list of designated Responsible Persons is included in the attached *BWMP Summary*, and will be updated at least annually during the periodic review of the Plan.

The Science Center Laboratory Manager is the default Biomedical Waste Coordinator (BWC) for the College, in cooperation with the Environmental Health and Safety (EHS) Manager. The BWC and EHS Manager will jointly be responsible for:

   - Maintenance of the biomedical waste CAA, including receipt inventory;
   - Coordinating the operations of the SAA’s with the designated Responsible Persons;
   - Providing guidance, materials, and training on the BWMP to designated Responsible Persons and other identified employees (i.e., Security Officers and Housekeeping Blood Spill Team);
   - Conducting an annual review and update of the Plan to reflect current operations;
   - Preparing containers and arranging for the disposal of biomedical wastes on a regular schedule; and
   - Maintaining regulatory compliance.
3. **Biomedical Waste Determination.** The following classifications of biomedical wastes are to be used for the purpose of storage and disposal:

- **Sharps**, inclusive of syringes and broken pipettes.
- **Cultures and stocks** of infectious agents or biological research materials, including animal parts or carcasses.
- **Human blood or bodily fluids**, including materials saturated with same such as medical dressings or spent personal protective equipment (PPE).

The designated Responsible Persons will: identify the biomedical wastes produced by the operations of their Department or Group; notify the BWC and EHS Manager of this waste generation; and regularly review their operations to identify changes in this information. It is the generator’s responsibility to ensure that their biomedical wastes do **not** contain hazardous, universal, radioactive, or other regulated wastes.

Currently identified biomedical waste streams are listed in the attached *BWMP Summary*.

4. **Satellite Accumulation Areas (SAA).** The designated satellite accumulation areas are listed on the attached *BWMP Summary*, and will be managed as follows:

- Storage areas will be maintained at or near the point of generation, demarcated as such with a sign (i.e., “Biomedical Waste Storage”), and kept secured from public access.
- Each individual storage container (sharps box or redbag) will be labeled as biomedical wastes, using the international biohazard symbol and the words “Biomedical Wastes”.
- Biomedical wastes will be segregated by type (as outlined above), with containers in good condition and of the appropriate material for the waste being stored (i.e., sharps versus soft goods).
- SAA containers will be transferred to the CAA in the Science Center (Druckenmiller 55-C) within 72-hours after becoming full. Only sealed and properly labeled containers may be transferred between buildings, and may not leave the campus in any case except under manifest by a licensed transporter. Materials from SAAs at off-campus locations may not be transferred by College staff, and will be addressed individually by the disposal vendor. On-campus transfers may be arranged by the Responsible Person by filing a workorder with Facilities Management (x3333).
- Temporary or intermittent satellite accumulation areas (i.e., from a laboratory operation of limited scope) must be pre-approved by the BWC, and are subject to the same management requirements as outlined above for designated SAAs for the duration of their use.

5. **Central Accumulation Area (CAA).** The BWC will manage the storage area as follows:

- Only the BWC, the EHS Manager, or their designee will have access to the CAA proper. All wastes arriving from SAAs will be inspected for container integrity and proper labeling, consolidated into over pack containers by compatible materials, weighed, labeled, and stored by the BWC.
• Cardboard overpack containers will be labeled as follows:

  *Generator:* Bowdoin College Science Center  
  6600 College Station  
  Brunswick, ME  04011  
  (207) 725-3162  
  Maine Registration No. 1625

  *Contents:* BIOMEDICAL WASTE (with international symbol)

  *Disposal Vendor:* Contact information and state registration number

  In addition, the DATE the container was sealed must be clearly labeled.

• Containers will be stored so as to restrict access, allow for ready inspection, and be segregated from other wastes. The containers will be stored on an impervious surface in an appropriate location, to allow sanitary maintenance and prevent damage to the packaging. The storage location will be clearly demarcated as such with a sign (i.e., “Biomedical Waste Storage”) and the international biohazard symbol.

6. **Manifesting and Transportation Requirements.** Shipments will be managed by the BWC and a licensed waste transporter as follows:

  • Wastes will be intact, segregated by type, properly packaged and labeled for transport, and the transporting vehicle placarded according to DOT 49 CFR 171-180 guidelines.

  • Wastes will be documented for transport using a uniform hazardous waste manifest (UHWM). Only the HWC or the EHS Manager may sign the manifest on behalf of the generator.

7. **Recordkeeping and Reporting.** Biomedical waste documentation will be maintained as follows:

  • Original disposal manifests will be provided by the vendor to the BWC or EHS Manager, and maintained on file for at least 3 years.

  • Certificates of Disposal will be returned by the handling facility within 35 days of receipt.

  • Records of employee training, shipping manifests, and certificates of disposal will be maintained at the facility by the HWC and EHS Manager for at least 3 years.

8. **Employee Information and Training.** Responsible Persons and other identified employees will receive initial training specific to their work areas, including at least the following:

  • The provisions of the biomedical waste regulations;

  • The location and availability of the written Plan;

  • Biomedical waste determinations and types;

  • Onsite waste storage and transfer procedures; and

  • Manifesting and recordkeeping.
Employee training will be conducted by the BWC or EHS Manager, and may include written, video, or web-based materials, so long as it meets the minimum requirements listed and addresses the specific conditions of each workplace. Employees to be trained will include the Responsible Person(s) representing each Department or Group, and other employees so designated by the BWC or EHS Manager (i.e., Security Officers and Housekeeping Blood Spill Team).

General informational training of all College employees will be accomplished during initial orientation.

9. **Spill Containment and Cleanup.** Disinfecting agents and disposable cleanup materials are maintained in all accumulation areas for use by the Responsible Persons as needed. Universal precautions will be used during any cleanup activities. Debris and cleanup materials generated will be packaged, handled and disposed as biomedical wastes.

10. **Program Review.** The BWMP will be reviewed annually by the EHS Manager, BWC, and the designated Responsible Persons, and updated as needed to maintain regulatory compliance and meet the perceived needs of the College’s workplaces.
# BIOMEDICAL WASTE MANAGEMENT PLAN SUMMARY

<table>
<thead>
<tr>
<th>Department/Group</th>
<th>SAA Location</th>
<th>Wastestreams</th>
<th>Responsible Person</th>
<th>Contact</th>
</tr>
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<tr>
<td>Science Center</td>
<td>Druckenmiller 014G (CAA)</td>
<td>All</td>
<td>Rene Bernier (BWC)</td>
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<td>Athletics</td>
<td>Farley Fieldhouse Training Room</td>
<td>B</td>
<td>Dan Davies</td>
<td>x3018</td>
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<td>Buck Health Center</td>
<td>S,B</td>
<td>Wendy Sansone</td>
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</table>

**Notes:**  
BWC = Biomedical Waste Coordinator; SAA = Satellite Accumulation Area; CAA = Central Accumulation Area.  
S = sharps, C = cultures and stocks, B = blood or bodily fluids