



County of San Diego

DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
P.O. BOX 129261, SAN DIEGO, CA 92112-9261
(858) 505-6880 FAX (858) 505-6848
<http://www.sdcdelh.org>



Medical Waste Management Plan

Facility Information	
Business Name San Diego Unified School District	Unified Program Facility Permit #
Type of Business K-12 Higher Education	Date 07/09/2019
Street Address 4860 Ruffner Street	City/ZIP San Diego 92111
Person Responsible for implementing the Medical Waste Management Plan (MWMP)	
Name Lori Sherman	
Title Environmental Health and Safety Program Supervisor, T.O.C.	Phone (858) 627-7174
Types of medical wastes (MW) generated	
<input checked="" type="checkbox"/> MW Sharps - e.g., needles, blades, scalpels, or broken glass or syringes contaminated with biohazardous waste. (human or animal) <p style="text-align: right;">Estimated monthly amount <u>60</u> lbs</p>	<input type="checkbox"/> Blood or blood products - liquid blood or blood products, or other regulated body fluids, or articles contaminated with liquid blood or body fluids. <p style="text-align: right;">Estimated monthly amount <u> </u> lbs</p>
<input checked="" type="checkbox"/> Laboratory wastes – infectious specimens or microbiological cultures, stocks of infectious agents, live and attenuated vaccines, biologicals, and culture media. <p style="text-align: right;">Estimated monthly amount <u>20</u> lbs</p>	<input checked="" type="checkbox"/> Pathology waste – human or animal tissues suspected to be infectious to humans <p style="text-align: right;">Estimated monthly amount <u>20</u> lbs</p>
<input type="checkbox"/> Liquid or semi-liquid biohazardous laboratory waste - treated on site by chemical disinfection* and discharged to sewer. <p style="text-align: right;">Estimated monthly amount <u> </u> lbs</p>	<input type="checkbox"/> Isolation waste - waste contaminated with excretion, exudates or secretions from humans or animals who are isolated due to highly communicable diseases. <p style="text-align: right;">Estimated monthly amount <u> </u> lbs</p>
<input type="checkbox"/> Trace chemotherapeutic waste <p style="text-align: right;">Estimated monthly amount <u> </u> lbs</p>	<input type="checkbox"/> Contaminated animals w/Highly communicable animal carcasses, body parts, tissues or fluids suspected to be contaminated by agents which are contagious. <p style="text-align: right;">Estimated monthly amount <u> </u> lbs</p>
<input checked="" type="checkbox"/> California-regulated pharmaceutical waste (non-RCRA, non-radioactive) <p style="text-align: right;">Estimated monthly amount <u>20</u> lbs</p>	<input type="checkbox"/> Other (specify): _____ <p style="text-align: right;">Estimated monthly amount <u> </u> lbs</p>
Estimate of <u>TOTAL</u> monthly medical waste for generator classification: <u>120</u> lbs	
Estimate of other monthly medical wastes (does not count towards generator class):	
<input type="checkbox"/> Home Generated MW Sharps <p style="text-align: right;">Estimated Monthly Amount <u> </u> lbs.</p>	<input type="checkbox"/> Home Generated Pharmaceutical Waste <p style="text-align: right;">Estimated monthly amount <u> </u> lbs.</p>
ONSITE MEDICAL WASTE TREATMENT ONLY: Method & capacity of medical waste treatment <i>if performed onsite</i>:	
<input type="checkbox"/> Steam Autoclaving <input type="checkbox"/> Other state approved alternative technology (specify below): <hr/>	
Treatment records must be maintained for three years for small quantity generators, and maintained two years for large quantity generators. (HSC§117943; HSC§117975)	


*Per HSC §118215(c), for liquid or semi-liquid biohazardous laboratory waste (§117690(b)(1)(B)), the treatment method must be recognized by the NIH, the CDC, or the American Biological Safety Association. If the chemical disinfection of the medical waste causes the waste to become a hazardous waste, the waste shall be managed in accordance with the requirements of HSC Chapter 6.5 (commencing with §25100) of Division 20.

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The following requirements apply to LQGs (HSC§117960), and SQGs that treat MW on-site, or use the Pharmaceutical Waste Hauling Exemption. (HSC§118032)

Emergency Action Plan

This plan is to be followed to ensure the proper disposal of medical waste, including controlled substances in compliance with DEA, approved incineration of pharmaceutical and trace chemotherapy in the event of a natural disaster, spill, treatment system break down, power failure, etc., and closure plan at termination (600 characters max. for WORD interactive form - use additional sheets if necessary). (LQG HSC§117960(h); SQG HSC§117935).

Registered hazardous waste hauler/common carrier used to remove untreated medical waste (if applicable)	
Primary Hauler Name Pacific Trans Environmental Services, Inc.	Phone # (619) 441-1818
Street Address 1452 N. Johnson Ave	City/ZIP El Cajon 92020
Contact Person Trevor Hembera	Contact Phone # (619) 988-2370
Offsite treatment facility to which medical waste is transported (if applicable)	
Facility Name Medical Environmental Technologies, LLC	Phone # (619) 448-2000
Street Address 1463 Fayette Street	City/ZIP El Cajon 92020
Contact Person David Fink	Contact Phone # (619) 448-2000
<u>Pharmaceutical Waste Categorization</u> If applicable, the steps taken to categorize the pharmaceutical wastes generated at the facility to ensure that the wastes are properly disposed of as follows: (1) Pharmaceutical wastes classified by the federal Drug Enforcement Administration (DEA) as "controlled substances" are disposed of in compliance with DEA requirements. (2) <u>The name and business address of the registered hazardous waste hauler used by the generator to have wastes that are not regulated pursuant to the federal Resource Conservation and Recovery Act of 1976 and nonradioactive pharmaceutical wastes regulated as medical waste safely removed for treatment in compliance with subdivision (b) of Section 118222 as waste requiring specific methods.</u> (LQG:HSC§117960(i); SQG:HSC§117935(i))	
<u>Closure Plan</u> A closure plan for the termination of treatment at the facility using, at a minimum, one of the methods of decontamination specified in subdivision (a) or (b) of Section 118295, thereby rendering the property to an acceptable sanitary condition following the completion of treatment services at the site. (LQG: HSC§117960(j); SQG: HSC§117935(j))	
<i>I hereby certify to the best of my knowledge and believe the statements made herein are correct and accurate.</i>	
Name Lori Sherman	
Title Environmental Health and Safety Program Supervisor, T.O.C.	
Signature 	Date 7-10-2019

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Registered Medical Waste Hauler used to remove untreated medical waste (if applicable):

Name: Clean Harbors Environmental Services, Inc.
Address: 3495 Kurtz Street
City: San Diego State: CA Zip Code: 92110
Phone: (858) 204-9255
Contact: Kim Carter Burgess

Offsite treatment facility to which medical waste is transported (if applicable):

Facility Name: Waste Management Healthcare Solutions, Inc. Permit No.: TS/OST 81
Address: 4280 Bandini Blvd.
City: Vernon State: CA Zip Code: 90058
Phone: (323) 307-0514
Contact: David Koerner Phone: (760) 317-6261