

## Texas Commission on Environmental Quality

### CHECKLIST WORKSHEET

MSW MEDICAL WASTE GENERATOR

Regulating Entity Name

Date:

Additional I D:

Investigator Name:

|                |                    |   |           |              |
|----------------|--------------------|---|-----------|--------------|
| Item Number 1  | <b>Description</b> | SECTION A: MANIFESTING<br>If untreated MW is shipped off-site, did the generator obtain from the transporter a signed receipt for each shipment?  |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.23(b) | <b>Notes</b> |
| Item Number 2  | <b>Description</b> | Are the MW shipment receipts available for inspection by commission personnel?  |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.23(d) | <b>Notes</b> |
| Item Number 3  | <b>Description</b> | Are the MW shipment receipts retained for at least three years?   |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.23(c) | <b>Notes</b> |
| Item Number 4  | <b>Description</b> | SECTION B - PACKAGING<br>Was the MW generated at the health care-related facility identified and segregated from the ordinary rubbish and garbage produced at the site?   |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.17    | <b>Notes</b> |
| Item Number 5  | <b>Description</b> | Are all untreated medical wastes from health care-related facilities packaged and labeled in accordance with commission requirements?   |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.19    | <b>Notes</b> |
| Item Number 5A | <b>Description</b> | Did the generator place the container which contains medical waste in an outer container that is rigid, leak resistant, impervious to moisture, of sufficient strength to prevent tearing and bursting under normal conditions of use and handling, and sealed to prevent leakage or as otherwise required by the US DOT as set forth in 49 CFR §173.134 and 49 CFR §173.196 which include infectious substances? |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.19(a) | <b>Notes</b> |
| Item Number 5B | <b>Description</b> | Did the generator place sharps in a rigid, marked, and puncture-resistant container designed for sharps as described in 49 CFR §173.134?  |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.19(b) | <b>Notes</b> |
| Item Number 5C | <b>Description</b> | Are sides of the outer container marked twice in English and twice in Spanish, along with the international for biohazard material, with "CAUTION, contains medical waste which may be biohazardous" and "PRECAUCIÓN, contiene desechos medicos que pueden ser peligro biológico"?  |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.21(a) | <b>Notes</b> |
| Item Number 5D | <b>Description</b> | Are labels placed on each container showing the name and address of the generator, and the shipment date?   |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.21(b) | <b>Notes</b> |
| Item Number 5E | <b>Description</b> | Did the generator record the weight or volume on the manifest for reporting and fee purposes?   |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.21(d) | <b>Notes</b> |
| Item Number 5F | <b>Description</b> | Did the generator ensure that each container has a label or has been printed with the transporter name, address, telephone number, and state registration number?   |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.21(e) | <b>Notes</b> |
| Item Number 5G | <b>Description</b> | Are labels printed in indelible ink with letters at least 0.25 inch in height?  |           |              |
|                | <b>Answer</b>      | <b>Citations</b>  | 326.21(f) | <b>Notes</b> |

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**MSW MEDICAL WASTE GENERATOR (Cont)**

|                       |                    |  |              |
|-----------------------|--------------------|--|--------------|
| <b>Item Number</b> 6  | <b>Description</b> | SECTION C: STORAGE<br>Was the generator's MW storage facility used only to store MW that was generated on-site?  |              |
|                       | <b>Answer</b>      | <b>Citations</b> 326.31  | <b>Notes</b> |
| <b>Item Number</b> 7  | <b>Description</b> | Was the medical waste stored in a secure and protected manner and managed so as not to provide a breeding place or food for insects or rodents, and not generate noxious odors?  |              |
|                       | <b>Answer</b>      | <b>Citations</b> 326.31(a)   | <b>Notes</b> |
| <b>Item Number</b> 8  | <b>Description</b> | SECTION D: OFF-SITE TRANSPORT OF MW FOR TREATMENT OR DISPOSAL<br>If an entity generates greater than 50 lbs. per month and transports their own MW to a transfer station, a storage facility, or a processing facility, did the generator notify the commission of the transport activities, provide the commission with the information required in 326.53(a), and submit an annual summary report? |              |
|                       | <b>Answer</b>      | <b>Citations</b> 326.53  | <b>Notes</b> |
| <b>Item Number</b> 9  | <b>Description</b> | (Note: If a MW generator generates more than 50 pounds per month of medical waste and transports its own waste, then the MW Transporter Checklist must be attached to the report and applicable sections must be answered.)  |              |
|                       | <b>Answer</b>      | <b>Citations</b>   | <b>Notes</b> |
| <b>Item Number</b> 10 | <b>Description</b> | (Note: If a MW generator treats special waste on-site or contracts the on-site treatment of special waste from health care related facilities, the MW On-site Treatment Checklist must be attached to the report and applicable sections must be answered.)  |              |
|                       | <b>Answer</b>      | <b>Citations</b>   | <b>Notes</b> |