

Blood Spills and Trauma Scenes Management Procedures

Purpose

The purpose of the procedure is to protect the University and surrounding environment from health hazards associated with non-research laboratory bloodborne pathogens and special medical waste.

Scope

The procedure has been developed by Environmental Health & Safety to assist University employees and contractors in safely responding to non-research laboratory blood spills and trauma scenes. The scope of the procedure applies to the cleanup, decontamination, and disposal of human blood spills, spills of other potentially infectious materials (OPIM), and crime scenes or other trauma scenes involving blood spills and/or OPIM. The scope is limited to such events taking place on University property and in University vehicles.

Definitions

Antiseptic: Destroy microorganisms on living tissue.

Biohazardous Waste: Any waste material contaminated with blood or other potentially infectious material (OPIM).

Blood: Human blood, human blood components, and products made from human blood. (Also See **Feminine Hygiene Products.**)

Bloodborne Pathogens: Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Contaminated: The presence or the reasonably anticipated presence of blood or OPIM on an item or surface.

Decontamination: The use of physical or chemical means to remove, inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.

Disinfectant: Destroys microorganisms on inanimate objects.

Feminine Hygiene Products: OSHA has issued a letter stating that they do not include soiled sanitary napkins and other feminine hygiene products in the definition of regulated waste because they are designed so as to prevent the release of liquid or semi-liquid blood or the flaking off of dried blood. Therefore, employees handling such wastes are not covered by the Bloodborne Pathogens Rule solely due to that duty. However, OSHA does expect that containers for soiled sanitary products be lined with a plastic or wax paper bag and that employees will be provided suitable gloves for removal of the bags from the waste container.

Micro-Encapsulation Absorbent: A dry material that rapidly converts a liquid into a solid. This material greatly simplifies blood spill clean-up and can be obtained through any lab safety vendor.

Other Potentially Infectious Materials (OPIM):

- The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids. Feces and urine are only potentially infectious if visibly contaminated with blood;
- Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and
- HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

Personal Protective Equipment (PPE): Specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g., uniforms, pants, shirts, or blouses) are not intended to function as protection against a hazard are not considered to be PPE. Examples of PPE include the following: safety glasses, splash goggles, disposable gloves, respirators, disposable coveralls, and disposable shoe covers.

Regulated Waste/Special Medical Waste (SMW): Liquid or semi-liquid blood or OPIMs; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

Sanitizing: Reduces the number of surface microbes to an acceptable level.

Sharps: Any object contaminated by blood or other potentially infectious material that can cut or penetrate human skin including, but not limited to, broken glass; capillary tubes; knives; razors, etc.; needles; surgical instruments; and syringes with attached needles.

Sharps Container: A leak and puncture-proof container capable of being tightly closed that is red and is labeled with the word “Biohazard” and the biohazard symbol. Filled sharps containers are regulated for disposal and must be disposed of through TU Health Center or EHS and not as domestic waste.

Source Individual: Any individual, living or dead, whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospital and clinic patients; clients in institutions for the developmentally disabled; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

Spill: Any unintentional release of human blood, OPIM and/or tissue into a non-controlled environment.

- **Small Spill:** A volume that is easily managed with a minimal amount of decontamination equipment and materials.
- **Large Spill:** A volume that would require more than one person, large amounts of decontamination equipment and material, and/or contamination of objects that would prove difficult to decontaminate, (i.e., a large area blood splatter, carpeting, rugs, mattresses, furniture, electronic gear).
- **Major Spill:** Large amounts of blood and/or tissue (usually as a result of a homicide or suicide).

Sterilization: Treatment which kills all surface microbes.

Trained Personnel: An individual who has successfully completed Bloodborne Pathogens (BBP) training in accordance with OSHA 29 CFR 1910.1030(g)(2) in the last 365 days.

Universal Precautions: An approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

Responsibilities

A. Environmental Health & Safety (EHS)

1. EHS will assist in blood spill/trauma scene cleanup, decontamination, and disposal.
2. EHS will maintain biological spill kit materials and personal protective equipment for major spills involving blood spills/trauma scenes.
3. EHS will provide biological safety training.

B. Department Supervisor

1. The Supervisor will follow procedures for reporting contained in the TU Bloodborne Pathogens Exposure Control Plan.

C. Other Personnel

1. It is the responsibility of personnel to report emergencies/injuries related to blood spills/trauma scenes to the Department Supervisor, 911, TUPD, EHS, TU Health Center, and if applicable, Facilities Management.
2. It is the responsibility of personnel to report blood spills/trauma scenes to EHS for spill assistance, decontamination, and disposal, and notify other personnel of the spill area/trauma scene.
3. The employee(s) who clean the spill must notify other personnel of the spill area/trauma scene, isolate the area, and restrict all entry.
4. Only biosafety-trained personnel will respond to blood spills/trauma scenes.

Introduction

Blood, OPIM spills, and crime or trauma scenes that occur indoors, in University vehicles, or in the outside environment must be immediately decontaminated to prevent the potential transmission of communicable disease. The circumstances associated with these events can vary greatly depending on the source, the volume, and the type of contact surface. A small amount of blood, if splashed, can cover a large surface area. A large volume, if undisturbed on a flat surface, can pool in a relatively small area.

Because of the unpredictable nature of spills and the various volumes, each incident must be quickly and carefully evaluated by a designated and trained individual (e.g. EHS or a trained Housekeeping Supervisor) for potential risks to cleanup personnel and the environment.

Note: A minimum of two (2) trained individuals are required to safely perform these procedures at all times. Blood, OPIM spills, and crime/trauma scene cleanup should only be performed by trained employees who are current with their annual OSHA Bloodborne Pathogens training and have appropriate personal protective equipment (PPE) and cleanup materials.

Immediately contact EHS during normal business hours at (410) 704-2949 or through TUPD after duty hours, on weekends or holidays for assistance in managing large spills, and crime or trauma scenes.

Do not attempt to begin decontamination if the size or complexity of the contamination is beyond the capacity of immediately available campus resources. If, at any time, the cleanup or decontamination exceeds available resources:

- Physically (and visually, if required) isolate the area with barrier tape or other warning materials;
- Restrict all entry; and
- Immediately contact EHS for assistance.

Applicable Regulations

- 29 CFR 1910.1030 – Bloodborne Pathogens
- COMAR 10.06.06 – Communicable Disease Prevention—Handling, Treatment, and Disposal of Special Medical Waste
- COMAR 26.13.11 – Special Medical Wastes
- COMAR 26.13.12 – Standards Applicable to Generators of Special Medical Wastes

Procedure

A. Recommended Spill Kit Supplies

1. Personal Protective Equipment

As a minimum, the following PPE should be worn by cleanup personnel when responding to a blood spill, OPIM spill, or a crime/trauma scene:

- a) Two pairs of disposable gloves,
- b) Eye protection such as a face shield or splash goggles,
- c) Protective clothing such as a laboratory coat or disposable coveralls,
- d) Disposable shoe covers or rubber boots, and
- e) N-95 disposable particulate respirator or equivalent respiratory protection (if required). Note: Any personnel wearing a respirator should have a valid fit test for that respirator within the last 365 days per the TU Respiratory Protection Program.

2. Cleanup Materials

- a) Disinfectant
 - i. *A freshly prepared 3% solution of DuPont RelyOn Multipurpose Disinfectant Cleaner;*
 - ii. *A freshly prepared (< 24 hrs old) 10% bleach solution (1 part household bleach: 9 parts clean water); or*
 - iii. *Another EPA registered disinfectant*
 - When the spill is on carpeting or other fabric surfaces that cannot be disposed of, use an alternate EPA registered disinfectant that will not damage the fabric.
 - **DO NOT use RelyOn or bleach on carpeting or other fabric surfaces unless carpeting or fabric covered surfaces will be disposed. These products will damage carpeting and fabrics.**
- b) Spray bottles for applying disinfectant to small areas of contamination
- c) Garden pump sprayers for applying disinfectant to large contaminated areas
- d) Micro-encapsulated absorbent (kitty litter, diatomaceous earth, or sorbent pads, etc.)
- e) Mops and buckets
- f) Nylon scrub pads and brushes
- g) Paper towels or other appropriate cleaning material
- h) Red biohazard waste bags (large & small sizes) & fiber boxes
- i) Scrapers or putty knives
- j) Box cutters or carpet knives for cutting out contaminated areas of fabrics and other porous materials

- k) Biohazard warning signs and labels
- l) Leakproof red biohazard sharps containers
- m) Dustpan and brush and/or tongs/forceps for picking up contaminated sharps and/or human body parts or tissue
- n) Disinfectant liquid hand sanitizer or hand sanitizer wipes.
- o) Barrier Tape (reads "CAUTION - Do Not Enter")
- p) Duct tape
- q) Opaque 6-Mil polyethylene plastic sheeting for wrapping large contaminated objects and for use as a visual barrier, if required
- r) Other tools and materials as required

Note: If at any time there is an accidental blood or OPIM contact with unprotected skin, immediately wash the area with soap and water. If the exposure is on abraded skin, in the eyes, mouth, or nose, immediately notify your supervisor and follow procedures for reporting contained in the TU Bloodborne Pathogens Exposure Control Plan.

B. Cleanup Procedures

1. Indoor or Outdoor Spills

- a) Identify and clearly mark all areas of suspected contamination with barrier tape or other warning materials.
- b) Immediately restrict all entry into the areas of interest to avoid spreading contamination.
 - To prevent additional contamination, all individuals who enter the area of contamination without appropriate PPE (i.e. TUPD, EMS, Facilities Management, etc.) should remain in the immediate area until thoroughly inspected to ensure they have not been contaminated, especially footwear. Decontaminate clothing as required or remove contaminated clothing, place it into a red biohazard bag, and give it to the owner.
- c) Don appropriate PPE.
- d) As you enter the area, do not step on any obvious contamination.
- e) Inspect the scene.
 - i. Sharp objects such as glass, knives, needles etc., which may be contaminated with blood or OPIM. These items should be collected with tongs or forceps and placed into an appropriate puncture resistant sharps container.*
 - ii. Tissue or other small body parts. These should be collected with tongs or forceps and placed into an appropriate biohazard bag.*
- f) Saturate the blood contaminated surfaces with a freshly prepared disinfectant solution using a garden sprayer or spray bottle. Allow at least 20 minutes disinfectant contact time for effective disinfection.
 - i. On hard surfaces, an approved micro-encapsulating agent may be applied to pooled blood or liquid OPIM so that the bulk of the contamination can be removed before disinfecting the surface.*

- ii. *Carpets, rugs, curtains, mattresses, pillows, furniture cushions, upholstery, cloth car seats, and other fabrics saturated with blood or OPIM should be discarded and replaced, if possible.*
 - 1) *On large areas of fabric covered materials such as carpeting, upholstered furniture, etc., after thoroughly saturating contaminated areas with disinfectant, cut and remove all blood/OPIM contaminated sections and place into a red biohazard bag.*
- g) Absorb and remove all traces of the spill with paper towels or other acceptable materials (micro-encapsulation absorbent). Be careful not to contaminate the outside of the spray bottle.
- h) Use procedures to minimize any aerosolization of blood or contaminated items.
- i) Re-spray the cleaned area with the disinfectant solution and allow to air dry completely.
- k) Place all waste materials, including used cleaning materials and disposable PPE, into a red plastic biohazard bag. Tightly seal with duct tape. Be careful not to contaminate the outside of the bag. Place the sealed biohazard bag into another biohazard bag and tightly seal (e.g., double-bag). Mattresses, rugs, and other large items that cannot fit into a biohazard bag should be tightly wrapped and sealed in 2 layers of 6 mil poly sheeting after being decontaminated. Place biohazard labels in multiple conspicuous locations as needed.
 - i. *Non-disposable cleaning materials such as mops, nylon scrub pads and brushes, buckets, spray bottles, and garden sprayers should be disinfected by saturating with bleach solution and air dried.*
 - ii. *Carpet/Upholstery Machine Hoses, Wands & Tanks*
 - 1) *Mist or spray disinfectant solution into wand head while vacuum unit is running to decontaminate the interior surfaces of hoses and wands. Spray and wipe exterior wand and hose surfaces clean with disinfectant solution and allow to air dry.*
 - 2) *Wastewater should be drained and disposed via the sanitary sewer system.*
 - 3) *Waste tank surfaces should be decontaminated by spraying with disinfectant solution, wiping clean, re-spraying all interior surfaces with disinfectant solution, and allowing to air dry.*
- l) Once the scene has been decontaminated and the disinfectant has completely air dried, the area is safe for entry.
- m) Biohazardous waste is a regulated waste and must be disposed of in a controlled manner. See Step C below for proper biohazard waste disposal procedures.
- n) Wash hands and all exposed skin with soap and water when cleanup is complete. If soap and water are not immediately available, use an alcohol-based hand sanitizer.

Note: Never wash large amounts of blood or other OPIM down a sewer or storm drain. These materials should be solidified with an appropriate micro-encapsulation absorbent, swept up, and placed into a red, plastic biohazard bag for disposal.

Note: After the spill/scene has been properly decontaminated and disinfected, thoroughly re-inspect for any residual or missed contamination. Re-decontaminate as necessary.

2. University Vehicles

- a) Immediately take the vehicle out of service. Move or tow to a safe location for decontamination as necessary.
- b) Identify and clearly mark all contaminated areas.
- c) Restrict all entry into the contaminated vehicle to avoid spreading contamination.
 - To prevent additional contamination, all individuals who enter the area of contamination without appropriate PPE (i.e. TUPD, EMS, Facilities Management, etc.) should remain in the immediate area until thoroughly inspected to ensure they have not been contaminated, especially footwear. Decontaminate clothing as required or remove contaminated clothing, place it into a red biohazard bag, and give it to the owner.
- d) Don appropriate PPE.
- e) As you enter the vehicle, avoid any obvious contamination.
- f) Inspect the vehicle.
 - i. *Sharp objects such as glass, knives, needles etc., which may be contaminated with blood or OPIM. These items should be collected with tongs or forceps and placed into an appropriate puncture resistant sharps container.*
 - ii. *Tissue or other small body parts. These should be collected with tongs or forceps and placed into an appropriate biohazard bag.*
- g) Saturate the blood contaminated surfaces with a freshly prepared disinfectant solution using a garden sprayer or spray bottle. Allow at least 20 minutes disinfectant contact time for effective disinfection.
 - i. *On hard surfaces, an approved micro-encapsulating agent may be applied to pooled blood or liquid OPIM so that the bulk of the contamination can be removed before disinfecting the surface.*
 - ii. *Fabric covered car seats or trim saturated with blood or OPIM should be removed, discarded, and replaced.*
- h) Using paper towels or other appropriate cleaning materials, wipe up all visible contamination residue and dispose of in a small biohazard bag. Repeat as often as necessary.
- i) Be careful not to contaminate the outside of the spray bottle.
- j) Use procedures to minimize any aerosolization of blood or contaminated items.
- k) Re-spray the cleaned area with the disinfectant solution and allow to air dry completely.
 - i. *Open vehicle windows to accelerate the drying process.*
 - ii. *If contamination has gotten into inaccessible areas of the vehicle, leave the vehicle out of service and contact EHS for guidance.*

- m) Place all waste materials, including used cleaning materials and disposable PPE, into a red plastic biohazard bag. Tightly seal with duct tape. Be careful not to contaminate the outside of the bag. Place the sealed biohazard bag into another biohazard bag and tightly seal (e.g., double-bag). Mattresses, rugs, and other large items that cannot fit into a biohazard bag should be tightly wrapped and sealed in 2 layers of 6 mil poly sheeting after being decontaminated. Place biohazard labels in multiple conspicuous locations as needed.
 - i. *Non-disposable cleaning materials such as mops, nylon scrub pads and brushes, buckets, spray bottles, and garden sprayers should be disinfected by saturating with bleach solution and air dried.*
 - ii. *Carpet/Upholstery Machine Hoses, Wands & Tanks*
 - 1) *Mist or spray disinfectant solution into wand head while vacuum unit is running to decontaminate the interior surfaces of hoses and wands. Spray and wipe exterior wand and hose surfaces clean with disinfectant solution and allow to air dry.*
 - 2) *Wastewater should be drained and disposed via the sanitary sewer system.*
 - 3) *Waste tank surfaces should be decontaminated by spraying with disinfectant solution, wiping clean, re-spraying all interior surfaces with disinfectant solution, and allowing to air dry.*
- n) Once the vehicle has been decontaminated and the disinfectant has completely air dried, the vehicle is safe and may be placed back in service.
- o) Biohazardous waste is a regulated waste and must be disposed of in a controlled manner. See Step C below for proper biohazard waste disposal procedures.
- p) Wash hands and all exposed skin with soap and water when cleanup is complete. If soap and water are not immediately available, use an alcohol-based hand sanitizer.

Note: Never wash large amounts of blood or other OPIM down a sewer or storm drain. These materials should be solidified with an appropriate micro-encapsulation absorbent, swept up, and placed into a red, plastic biohazard bag for disposal.

Note: After the spill/scene has been properly decontaminated and disinfected, thoroughly re-inspect for any residual or missed contamination. Re-decontaminate as necessary.

3. Crime or Trauma Scenes

- a) If the scene has been designated as a “crime scene” by TUPD or other police agency, decontamination will be restricted until such time as the official investigation has concluded. Check with the Police Incident Commander prior to entertain the area to begin decontamination.
- b) Identify and clearly mark all areas of suspected contaminated areas with barrier tape or other warning materials. Depending on the situation, it may be necessary to visually isolate the contaminated area until such time as decontamination and cleanup have been completed.

- c) Restrict all entry into the contaminated vehicle to avoid spreading contamination.
 - To prevent additional contamination, all individuals who enter the area of contamination without appropriate PPE (i.e. TUPD, EMS, Facilities Management, etc.) should remain in the immediate area until thoroughly inspected to ensure they have not been contaminated, especially footwear. Decontaminate clothing as required or remove contaminated clothing, place it into a red biohazard bag, and give it to the owner.
- d) Don appropriate PPE. Depending on the scope of the contamination, a disposable N-95 respirator may be required.
- e) As you area, do not step on any obvious contamination.
- f) Inspect the scene.
 - i. Sharp objects such as glass, knives, needles etc., which may be contaminated with blood or OPIM. These items should be collected with tongs or forceps and placed into an appropriate puncture resistant sharps container.*
 - ii. Tissue or other small body parts. These should be collected with tongs or forceps and placed into an appropriate biohazard bag.*
- g) Saturate the blood contaminated surfaces with a freshly prepared disinfectant solution using a garden sprayer or spray bottle. Allow at least 20 minutes disinfectant contact time for effective disinfection.
 - i. On hard surfaces, an approved micro-encapsulating agent may be applied to pooled blood or liquid OPIM so that the bulk of the contamination can be removed before disinfecting the surface.*
 - ii. Carpets, rugs, curtains, mattresses, pillows, furniture cushions, upholstery, cloth car seats, and other fabrics saturated with blood or OPIM should be discarded and replaced, if possible.*
 - 1) On large areas of fabric covered materials such as carpeting, upholstered furniture, etc., after thoroughly saturating contaminated areas with disinfectant, cut and remove all blood/OPIM contaminated sections and place into a red biohazard bag.*
- h) Using paper towels or other appropriate cleaning materials, wipe up all visible contamination residue and dispose of in a small biohazard bag. Repeat as often as necessary.
- i) Absorb and remove all traces of the spill with paper towels or other acceptable materials (micro-encapsulation absorbent). Be careful not to contaminate the outside of the spray bottle.
- j) Use procedures to minimize any aerosolization of blood or contaminated items.
- k) Re-spray the cleaned area with the disinfectant solution and allow to air dry completely.
- l) Place all waste materials, including used cleaning materials and disposable PPE, into a red plastic biohazard bag. Tightly seal with duct tape. Be careful not to contaminate the outside of the bag. Place the sealed biohazard bag into another biohazard bag and tightly seal (e.g., double-bag). Mattresses, rugs, and other large

items that cannot fit into a biohazard bag should be tightly wrapped and sealed in 2 layers of 6 mil poly sheeting after being decontaminated. Place biohazard labels in multiple conspicuous locations as needed.

- i. *Non-disposable cleaning materials such as mops, nylon scrub pads and brushes, buckets, spray bottles, and garden sprayers should be disinfected by saturating with bleach solution and air dried.*
- ii. *Carpet/Upholstery Machine Hoses, Wands & Tanks*
 - 1) *Mist or spray disinfectant solution into wand head while vacuum unit is running to decontaminate the interior surfaces of hoses and wands. Spray and wipe exterior wand and hose surfaces clean with disinfectant solution and allow to air dry.*
 - 2) *Wastewater should be drained and disposed via the sanitary sewer system.*
 - 3) *Waste tank surfaces should be decontaminated by spraying with disinfectant solution, wiping clean, re-spraying all interior surfaces with disinfectant solution, and allowing to air dry.*
- m) Once the scene has been decontaminated and the disinfectant has completely air dried, the area is safe for entry.
- n) Biohazardous waste is a regulated waste and must be disposed of in a controlled manner. See Step C below for proper biohazard waste disposal procedures.
- o) Wash hands and all exposed skin with soap and water when cleanup is complete. If soap and water are not immediately available, use an alcohol-based hand sanitizer.

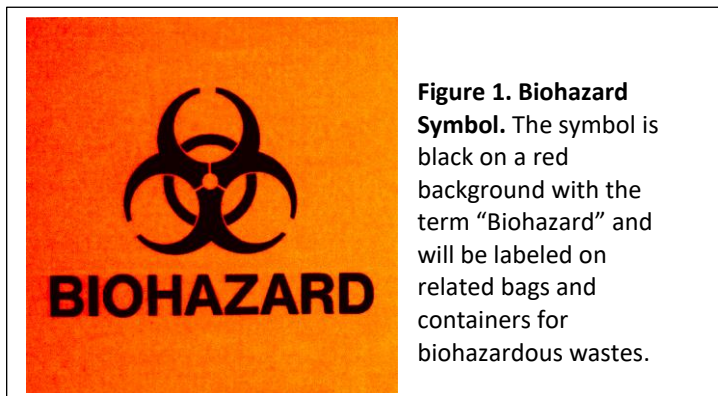
Note: Never wash large amounts of blood or other OPIM down a sewer or storm drain. These materials should be solidified with an appropriate micro-encapsulation absorbent, swept up, and placed into a red, plastic biohazard bag for disposal.

Note: After the spill/scene has been properly decontaminated and disinfected, thoroughly re-inspect for any residual or missed contamination. Re-decontaminate as necessary.

C. Disposal of Contaminated Waste

1. All regulated medical waste will be disposed of in properly labeled, leakproof, red biohazard bags. All biohazard bags will be double-bagged and tightly sealed. Be careful not to contaminate the outside of the bags and do not overfill biohazard bags. Keep each bag less than 40 lb.
2. Sharps will be placed inside tightly sealed puncture- and leakproof plastic containers before being placed inside biohazard bags for disposal.
3. Any free-flowing contaminated liquids will be solidified with an approved micro-encapsulation agent or other suitable absorbent prior to being disposed of in biohazard bags. No free liquids will be disposed of in biohazard bags.
4. Large contaminated waste objects (mattresses, rugs, etc.) that will not fit into commercially available biohazard bags will be securely wrapped in two (2) layers of

tightly duct-taped 6 mil polyethylene sheeting, preferably opaque. Appropriate biohazard labels (see Figure 1 below) will be placed in multiple conspicuous locations.



5. All regulated biohazard waste must be disposed of through either the TU Health Center or EHS. No regulated biohazard waste will be disposed of as nonhazardous domestic waste.
 - a) Properly sealed and labeled biohazard bags weighing less than or equal to ≤ 40 lbs. will be disposed of through TU Health Center.
 - Normal TU Health Center at Ward & West business hours are Monday–Friday, 8:00AM-5:00PM. Contact the Health Center Lab at (410) 704–2431 prior to dropping off biohazard bags for disposal.
 - After duty hours and on weekends or holidays, temporarily store properly sealed and labeled biohazard bags in a secure location pending disposal at the TU Health Center.
 - b) Properly sealed and labeled biohazard bags weighing more than > 40 lbs. or large regulated medical waste not capable of fitting into biohazard bags will be disposed of through EHS.
 - Normal EHS business hours are Monday–Friday, 8:00AM-5:00PM. Contact EHS at (410) 704-2949 to coordinate the disposal of large contaminated waste items.
 - After duty hours and on weekends or holidays, temporarily store properly sealed and labeled biohazard bags in a secure location pending disposal through EHS.
6. Waste bleach or other disinfectant solutions may be safely disposed of via the sanitary sewer system. Do not dispose via the storm water sewer system. After disposal, thoroughly rinse the disinfectant container with clean water and allow to air dry.

Resources

For general inquiries on special medical waste or to report biohazard spills, contact EHS at 410-704-2949 or safety@towson.edu. Additional SMW containers and bags can be obtained upon request. These items may also be supplied by the SMW Disposal Contractor.

For needlestick injuries/cuts from SMW, go the TU Health Center (for students; call 410-704-2466) or go to the nearest Concentra Urgent Care (for employees; (410) 252-4015) at 1830 York Road, Suite F, Timonium, MD 21093.