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San Diego County DEPARTMENT OF ENVIRONMENTAL HEALTH SELF-CERTIFICATION PROCESS (GUIDE)

San Diego Medical Waste Services has developed this guide to help our customers understand what is being asked of you in order to comply with the self-certification process.

This guide is divided up into two sections. **Section 1** of this guide will cover the first steps of self-certification, **section 2** of this guide will cover the second steps of self-certification.

1. Complete and submit the attached Medical Waste Management Plan for Small Quantity Generators(MWMP SQG). Please see pages 3-4.
2. Provide the following supporting documentation to verify compliance:
 - Copies of the last 2 years of medical waste disposal receipts. If you have not yet had a pick-up, please provide a copy of your contract with your registered medical waste hauler.
 - Photos of your medical waste storage area(s) with required signage and security.
 - Photos of your medical waste container(s) with required labeling.



County of San Diego
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
P.O. BOX 50001, SAN DIEGO, CA 92162-0001
(619) 595-6990 FAX (619) 595-6948
<http://www.sdhhs.org>

**SMALL QUANTITY MEDICAL WASTE GENERATOR REGISTRATION
SELF-CERTIFICATION PROCESS**

Dear Business Owner/Operator:

Thank you for your application. In order to approve your self-certification, you will need to demonstrate that the medical waste generated by your facility will be managed in accordance with the [California Medical Waste Management Act \(MWMA\)](#).

To [view this requirement, visit CERS](#).

1. Complete and submit the attached Medical Waste Management Plan for Small Quantity Generators (MWMP SQG). Please see pages 3-4.

2. Provide the following supporting documentation to verify compliance:

- ☐ Copies of the last 2 years of medical waste disposal receipts. If you have not yet had a pick-up, please provide a copy of your contract with your registered medical waste hauler. If you are using a mail back service or encapsulation device (e.g., Isolzyzer), please note that in your MWMP SQG.
- ☐ Photos of your medical waste storage area(s) with required signage and security.
- ☐ Photos of your medical waste container(s) with required labeling.
- ☐ If you generate photographic/x-ray processing waste containing silver, provide evidence of your annual notification in CERS per San Diego County Code 68.909.5. If you need assistance with the CERS notification, please contact the CERS Help Desk at: (619) 595-6990.


3. In lieu of step 2, you can call the CERS Help Desk to schedule an onsite inspection of your facility. An hourly rate will be assessed for an onsite inspection.

Please refer to Chapters 2 and 9 of the MWMA for definitions and specific requirements for small quantity medical waste generators. A handout has also been included with this letter for additional assistance.

Once your documentation has been reviewed, an HMD representative will contact you with the status of your self-certification. If approved, an invoice will be sent for the registration fee. Upon payment of the invoice, the registration will be mailed and the period the registration is valid will be indicated. For questions, please call the HMD Permits Line at: 619-595-6961.

In accordance with the California Health and Safety Code §117940, you must notify the HMD within 30 days of any changes that occur. To submit changes or renew this permit you must submit an updated MWMP SQG at least 30 days prior to the expiration date on the current registration. A copy of your current MWMP SQG will be sent to you along with your invoice for confirmation.

Be advised: Failure to complete the Self-Certification Process and/or pay your invoice may result in an onsite verification and inspection fees. If you have any questions, please call the CERS Help Desk at (619) 595-6990 or email: inbox.CERS@sdcounty.ca.gov.

 **HMF-0033 COMBINED (04/03)** Department of Environmental Health-Hazardous Materials Division 1

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Section 1: Medical Waste Management Plan for Small Quantity Generators (Page 3)

1. Fill out Page 3 with all applicable information for “Facility Information” and the person at your facility responsible for implementing the Medical Waste Management Plan (MWMP)
 - 1.1. Use the data from Section 2, Step 2 of this guide to fill out the information needed for the “Types of Medical Wastes (MW) Generated” section of the Medical Waste Management Plan for Small Quantity Generators.
 - 1.1.1. Using the “Total Weight” column, calculate your facility’s estimated total weight of medical waste generated and enter it into the “Estimate of TOTAL monthly medical waste generated: ___ lbs” section at the bottom of Page 3
 - 1.1.2. Take the estimated total weight of medical waste generated from your facility from Section 2, Step 2.3.2 of this guide and assign each waste stream a percentage of use.
 - 1.1.2.1. Take the estimated percentage of each waste stream and multiply by the total monthly medical waste generated to assign an “Estimated monthly amount” in pounds for each waste stream that your facility generates.

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§1 1.1

§1 1.1.2.1

County of San Diego
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
P.O. BOX 120591, SAN DIEGO, CA 92112-0591
(619) 595-4985 FAX (619) 595-6548
DE-EMW-00000002

Medical Waste Management Plan for Small Quantity Generators

Facility Information

Business Name	Registration #
Type of Facility	Date
Street Address	City/ZIP

Person Responsible for implementing the Medical Waste Management Plan (MWMP)

Name	Phone
Title	

Please check the box for all types of medical waste that will be generated by your facility. Also estimate the number of pounds (lbs.) that will be generated each month. Definitions are in Chapter 2 of the Medical Waste Management Act in the California Health and Safety Code (HSC) §117925-117780.

In order to approve your self-certification, a representative photo or EACN waste stream must also be submitted with your updated Medical Waste Management Plan.

<input type="checkbox"/> Sharps waste - a device that has acute rigid corners, edges, or protruberances capable of cutting or piercing. (see page 2 for full definition from § 117960 of the MWMA) Estimated monthly amount _____ lbs	<input type="checkbox"/> Biohazardous waste - regulated medical waste, clinical waste, or biomedical waste from the medical treatment of a human or from an animal that is suspected to be infected with a pathogen that is infectious to humans. Biohazardous waste also includes: Highly Communicable waste - waste contaminated with excretions, exudates or secretions from humans or animals who are isolated due to highly communicable diseases. Laboratory waste - infectious specimens or microbiological cultures, stocks of infectious agents, live and attenuated vaccines, biologicals, and culture media. Fluid Blood or Blood Products - recognizable fluid human blood or blood products, containers, equipment containing human blood or blood from animals. Estimated monthly amount _____ lbs
<input type="checkbox"/> Non RCRA Pharmaceutical waste - a prescription or over-the-counter human or veterinary drug that is not RCRA hazardous waste nor radiological waste. Estimated monthly amount _____ lbs	<input type="checkbox"/> Liquid/Semi-liquid biohazardous waste - treated onsite by chemical disinfection and discharged to sewer. Estimated monthly amount _____ lbs
<input type="checkbox"/> Trace Chemotherapeutic waste - waste that is contaminated through contact or contained, chemotherapeutic agents (e.g. gloves, disposable gowns, towels, and IV bags and attached tubing that are empty) Estimated monthly amount _____ lbs	<input type="checkbox"/> Other (specify): _____ Estimated monthly amount _____ lbs
<input type="checkbox"/> Pathology waste - human body parts or animal tissues suspected to be infectious to humans or have been fixed in formaldehyde or other fixative Estimated monthly amount _____ lbs	
<input type="checkbox"/> Trauma Scene waste - waste that has been removed, is to be removed, or is in the process of being removed, from a trauma scene by a trauma scene waste management practitioner. Estimated monthly amount _____ lbs	

Estimate of TOTAL monthly medical waste generated: _____ lbs

Per CDC § 117925(c), for liquid or semisolid biohazardous laboratory waste § 117960(c)(1)(B), the treatment method must be recognized by the CDC, the CDC of 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 § 117910, or Chapter 20.

HMP-853 COMBINED (04/05) Department of Environmental Health-Hazardous Materials Division

Section 1: Medical Waste Management Plan (Page 4)

2. Fill out information on Page 4 as follows
 - 2.1. Registered Medical Waste Hauler or Common Carrier
 - 2.1.1. **Primary Medical Waste Transporter:** San Diego Medical Waste Services, LLC
 - 2.1.1.1. **Street Address:** 7630 Miramar Rd. Suite 2200
 - 2.1.1.2. **City/Zip:** San Diego, CA 92126
 - 2.1.1.3. **Contact Person:** Service Department
 - 2.1.1.4. **CA Registration #:** 6349
 - 2.1.2. **Secondary (backup) Medical Waste Transporter:** "Not Applicable"
 - 2.1.2.1. **Street Address:** "Not Applicable"
 - 2.1.2.2. **City/Zip:** "Not Applicable"
 - 2.1.2.3. **Contact Person:** "Not Applicable"
 - 2.1.2.4. **CA Registration #:** "Not Applicable"
 - 2.2. Decontamination Procedure
 - 2.2.1. Check "Exposure to hot water 180°F for ≥ 15 seconds"
 - 2.3. Sign and date the "Self-Certification Statement"

Medical Waste Management Plan
Registered Medical Waste Hauler or Common Carrier

In accordance with HSC§117945, a small quantity of medical waste shall maintain on file in its office all of the following:
(1) An information document stating how the generator contains, stores, treats, and disposes of any medical waste generated through any act or process of the generator.
(2) Records required by the United States Postal Service of any medical waste shipped offsite for treatment and disposal. The small quantity generator shall maintain or have available electronically at the facility or from the medical waste hauler or common carrier, these records for no less than three years.
Documentation shall be made available to the enforcement agency onsite.

Primary Medical Waste Transporter	San Diego Medical Waste Services, LLC	CA Registration #	6349
Street Address	7630 Miramar Rd, Suite 2200	City/Zip	San Diego
Contact Person	Service Department	Phone #	619-990-4604
Secondary (backup) Medical Waste Transporter	N/A	CA Registration #	N/A
Street Address	N/A	City/Zip	N/A
Contact Person	N/A	Phone #	N/A

How frequently will the waste be disposed? (e.g. weekly, monthly, quarterly):

Decontamination Procedure
In accordance with HSC§11826 and 11830, the following decontamination procedure is to be followed in the event of a biohazardous spill or contamination: ☒ Rinse or immerse in hot water or other liquid for 15 minutes or more.


Indicate which method of disinfection you will use:

- ☒ Rinse/immersion in hot water 180°F for ≥ 15 seconds (500 ppm available chlorine)
- ☐ Rinse/immersion in phenolic solution for ≥ 3 minutes (500 ppm active agent)
- ☐ Rinse/immersion in iodine solution for ≥ 3 minutes (100 ppm available iodine)
- ☐ Rinse/immersion in Quaternary ammonium solution for ≥ 3 minutes (400 ppm available active agent)

Acknowledgement
I have read and understood, as a small quantity medical waste generator, I am required to comply with the applicable requirements in the Medical Waste Management Act found in the California Health and Safety Code, Sections 117600-118360. ☒ Yes

Self-Certification Statement
I declare under penalty of law that to the best of my knowledge and belief, the statements made herein are correct and true. I hereby consent to all necessary inspections made pursuant to the California Medical Waste Management Act and acknowledge the suspension of my registration and the operation of this business.

Name _____
Title _____
Signature _____ Date _____

HMP-003 COMBINED (04/20) Department of Environmental Health-Hazardous Materials Division  4

Section 2: Copies of the last 2 years of medical waste disposal receipts.

1. Copies of the last 2 years of medical waste disposal receipts.
 - 1.1. Go to the “Customer Login” in the footer section (bottom) of any page on our website: <https://www.sdmedwaste.com/>
 - 1.2. In the red box, enter your facility’s Username and Password

§2 1.2

SAN DIEGO MEDICAL WASTE SERVICES, LLC
9410 Miramar Road, Suite 200
San Diego, CA 92126
(619) 990-4604
info@sdmedwaste.com

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extremely instrumental in assisting us with our surgery center accreditation. Will always use their services!

and his team has provided us with an excellent service in the past few years. Strongly recommend!

GOOGLE REVIEWS

Contact The Medical Waste Disposal Experts. **LET'S GET STARTED!!!**

Contact Us
San Diego Medical Waste Services
9410 Miramar Road, Suite 200
San Diego, CA 92126
619-990-4604
info@sdmedwaste.com

Customer Login
Username:
Password:
Login

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Section 2: Copies of the last 2 years of medical waste disposal receipts.

2. Once logged into the “Compliance Program”
 - 2.1. Click on the “MYDOCS” menu option
 - 2.2. Click on the “Service Reports” tab
 - 2.3. Click on the “Medical Waste Report” button
 - 2.3.1. Choose the 2 year period using the “From” and “To” dates
 - 2.3.2. Click on the “View” button
 - 2.3.3. Click on the “Download Medical Waste Manifest” to download the corresponding medical waste manifests
 - 2.4. Save each of the manifests so that you may send them (electronically or paper copy) to County of San Diego DEPARTMENT OF ENVIRONMENTAL HEALTH
 - 2.4.1. Electronically:
DEH.HMDUTYEH@sdcounty.ca.gov

The screenshot shows the 'Compliance Program' interface for 'Example Doctor's Office'. The interface includes a header with the 'UNITED STATES MEDICAL WASTE SERVICES' logo and a 'Sign Out' button. A navigation bar contains 'TRAINING', 'MYDOCS', and 'SETTINGS'. Below this, a row of tabs includes 'MyDocs', 'Service Reports', 'Invoices & Payments', 'Forms', and 'Infectious Diseases'. The 'Service Reports' tab is active, showing 'Medical Waste Report' and 'Delivery Report' buttons. The 'Medical Waste Report' section has a 'From' date of 03/01/2019, a 'To' date of 03/30/2021, and a 'View' button. Below this, it states '54 records found.' and 'Results' with links for 'Print Results' and 'Download CSV'. A table of results is displayed with columns for 'Pickup Date', 'Details', 'Number of Containers', 'Total Weight', and 'Download'. Red boxes and arrows on the left side of the screenshot correspond to the steps in the list on the left, pointing to specific elements in the interface.

Pickup Date	Details	Number of Containers	Total Weight	Download
03/24/2021	Medical Waste	1	29.40 lbs	Download Medical Waste Manifest
03/10/2021	Medical Waste	1	32.10 lbs	Download Medical Waste Manifest
02/24/2021	Medical Waste	1	37.00 lbs	Download Medical Waste Manifest
02/10/2021	Medical Waste	1	40.00 lbs	Download Medical Waste Manifest
01/27/2021	Medical Waste	1	35.00 lbs	Download Medical Waste Manifest
01/13/2021	Medical Waste	1	85.00 lbs	Download Medical Waste Manifest
12/30/2020	Medical Waste	1	45.00 lbs	Download Medical Waste Manifest
12/16/2020	Medical Waste	1	45.00 lbs	Download Medical Waste Manifest
12/02/2020	Medical Waste	1	45.00 lbs	Download Medical Waste Manifest

Section 2: Photos of your medical waste storage area(s) with required signage and security.

3. Photos of your medical waste storage area(s) with required signage and security.

- 3.1. Take a picture of the "CAUTION—BIOHAZARDOUS WASTE STORAGE AREA" caution sign that has been provided to you on your initial setup.
- 3.2. Take a picture of the Regulated Medical Waste (RMW) storage container(s) That is behind the "CAUTION—BIOHAZARDOUS WASTE STORAGE AREA" (from Section 2.1 of this guide) used at your facility.
- 3.3. Save each of the pictures so that you may send them (electronically or paper copy) to County of San Diego DEPARTMENT OF ENVIRONMENTAL HEALTH (DEH)
 - 3.3.1. Electronically:
DEH.HMDUTYEH@sdcounty.ca.gov



Section 2: Photos of your medical waste container(s) with required labeling.

4. Photos of your medical waste container(s) with required labeling.

- 4.1. Take a picture of the sharps containers that are being used at your facility with required Generator Labeling (Name, Address, Phone).
- 4.2. Take a picture of the pharmaceutical waste container(s) that are being used at your facility with required Generator Labeling (Name, Address, Phone)



Storage requirements for designated medical waste accumulation area

- Shall be secured to prevent unauthorized access.
- Shall have warning signs in English and Spanish and be visible during daylight hours from at least 25 feet.
 - “CAUTION-BIOHAZARDOUS WASTE STORAGE AREA-UNAUTHORIZED PERSONS KEEP OUT”
 - “CUIDADO-ZONA DE RESIDUOS-BIOLÓGICOS PELIGROSOS PROHIBIDA LA ENTRADA A PERSONAS NO AUTORIZADAS”



Sharps & Biohazard Disposal Service Procedure For:

Any waste that does not make it into the medical waste container prior to our arrival may be placed into the new container for pickup on your next scheduled service day.



STEP 5

On your scheduled service day, we will perform a one for one exchange of your onsite regulated medical waste (RMW) and deliver any pre-ordered products (sharps containers, biohazard bags, etc).

NO Loose Sharps can be placed into this container.
NO PHARMACEUTICALS can be placed into this container.



STEP 4

Continue to repeat this process during your **accumulation period** and prior to your scheduled service day. Sharps waste must be placed into a sharps container prior to being placed into the regulated medical waste (RMW).

It is the **generators** responsibility to remove sharps containers and biohazard bags from patient rooms and to place them next to the medical waste container prior to our arrival on their scheduled service day.

	Generator Name
	Generator Address
	Generator Phone #

Prior to use, label each sharps container with your facility's name, address, and phone number.

STEP 1

Place sharps containers inside of wall mounts or on countertops and line biohazard waste containers with biohazard bags.



THE FOLLOWING ARE **NOT** SHARPS WASTE

- Pharmaceuticals
- Controlled Substances
- Chemicals

STEP 2

Immediately after use, properly segregate waste as follows:

- **Sharps Waste Container (Red/Translucent Red)**
 - A device that has acute rigid corners, edges, or protuberances capable of cutting or piercing
 - Vials with **NO** remaining vaccine
 - Syringes (needle attached) with **NO** remaining vaccine
- **Biohazardous Waste Container (Lined with Biohazard Bag)**
 - Highly communicable waste
 - Laboratory waste
 - Fluid blood or blood products
 - Other potentially infectious materials (OPIM)
- **Pharmaceutical Waste Container (White/Blue)**
 - Human or veterinary drugs
 - Vials with remaining pharmaceuticals
 - Syringes with remaining pharmaceuticals

STEP 3



Once full or ready to dispose, tightly close the lid. Use locking tabs and tape when available. Place the entire sharps container in an **upright position** inside of the regulated medical waste (RMW) container ensuring that no needles spill out.



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Non-Hazardous Pharmaceutical Disposal Service Procedure For:

Any waste that does not make it into the medical waste container prior to our arrival may be placed into the new container for pickup on your next scheduled service day.



STEP 5

On your scheduled service day, we will perform a one for one exchange of your onsite medical waste container and deliver any pre-ordered products (sharps containers, biohazard bags, etc).

NO Loose Sharps can be placed into this container.
NO PHARMACEUTICALS can be placed into this container.



STEP 4

Continue to repeat this process during your accumulation period and prior to your scheduled service day. Sharps waste must be placed into sharps containers prior to being placed into the medical waste container.

It is the **generators** responsibility to remove pharmaceutical containers from patient rooms and to place them next to the medical waste container prior to our arrival on their scheduled service day.

STEP 3



Once ready for disposal, place pharmaceutical waste containers next to (**NOT INSIDE OF**) the regulated medical waste (RMW) container to be picked up during your scheduled service day.

STEP 1



Prior to use, label each pharmaceutical container with your facility's name, address, phone number and date of first use.

Place pharmaceutical waste containers (white/blue) in a secure location within the immediate area of use.

STEP 2



THE FOLLOWING ARE PHARMACEUTICAL WASTE

- Syringes w/residual pharmaceuticals
- Pills/Pill Bottles
- Dental Ampule
- Medication Vials
- Unused/Expired Medications
- Supplements/Vitamins

Immediately after use, properly segregate waste as follows:

- **Sharps Container (Red/Translucent Red)**
 - A device that has acute rigid corners or edges
 - Vials with **NO** remaining vaccine
 - Needle/Syringes with **NO** remaining vaccine
- **Biohazardous Container (Lined with Biohazard Bag)**
 - Highly Communicable waste
 - Laboratory waste
 - Fluid Blood or Blood Products
 - Other potentially infectious materials (OPIM)
- **Pharmaceutical Waste Container (White/Blue)**
 - Human or veterinary drug
 - Vials with remaining pharmaceuticals
 - Syringes with remaining pharmaceuticals



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Medical Waste Segregation Chart

Sharps Waste: Any device that has acute rigid corners, edges or protuberances capable of cutting or piercing, including, but not limited to:

- Hypodermic needles
- Hypodermic needles with syringes
- Blades
- Needles with attached tubing
- Acupuncture needles
- Root canal files
- Broken glass (from health care use)
- Pipettes
- Blood vials

Sharps Containers



Biohazardous Waste: Also known as "Other Potentially Infectious Materials (OPIM)" is the portion of the healthcare wastestream that may be contaminated by Blood Borne Pathogens (BBP) including, but not limited to:

- Blood
- Bodily fluids
- Semen & vaginal secretions
- Cerebrospinal fluid
- Saliva in dental procedures
- Any body fluid that is visibly contaminated with blood

Biohazard Containers



Medical Waste Container



Pharmaceutical Waste: Any prescription or over-the-counter human or veterinary drug, including, but not limited to:

- Syringes w/residual pharmaceuticals
- Pill Bottles
- Pills
- Dental Ampule
- Medication Vials
- Unused Medications
- Expired Medications
- Dietary Supplements and Vitamins
- Anything with an NDC#

Pharmaceutical Containers



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