

NORTH DAKOTA HEALTHCARE FACILITY CHECKLIST

This checklist is to be used for all healthcare facilities that are above VSQG limits for both hazardous waste pharmaceuticals and non-pharmaceutical hazardous waste or if the facility has opted into the Subpart P rule.

VSQG: $\leq 100\text{Kg}$. (Approximately 25-30 gallons) of waste in a calendar month or $< 1\text{ Kg}$. of acutely hazardous waste. *NOTE: To convert from gallons to pounds: Amount in gallons. \times Specific Gravity = Amount in pounds*

Safety Equipment Used:

GENERAL REQUIREMENTS

1.	<p>Has the healthcare facility notified NDDEQ using the 8700-12 form that the facility is a healthcare facility? Section 33.1-24-05-312(1)(a)(1) NDAC</p> <p>Note: The notification needs to be submitted by September 1, 2021, or within 60 days of the healthcare facility becoming subject to the rule.</p> <p>If a healthcare facility is an LQG, the notification can be submitted as part of the next biennial report due March 1st of every even numbered year. Section 33.1-24-05-312(1)(a)(2) NDAC. The notification needs to be kept on file as long as the healthcare facility is subject to the rule. Section 33.1-24-05-312(1)(a)(3) NDAC</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
2.	<p>Has the healthcare facility discharged hazardous waste pharmaceuticals to a sewer system that passes through to a publicly owned treatment works? Section 33.1-24-05-315 NDAC</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
3.	<p>Has the healthcare facility sent hazardous waste other than potentially creditable hazardous waste pharmaceuticals to a reverse distributor? Section 33.1-24-05-313(3) NDAC</p> <p>Note: Shipping non-creditable hazardous waste pharmaceuticals requires the use of a manifest. Non-pharmaceutical hazardous wastes must be managed as normal.</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
4.	<p>Have test results, waste analyses, or other determinations made to support the healthcare facility's hazardous waste determinations been retained for at least three years? Section 33.1-24-05-312(10)(c) NDAC.</p> <p>Note: Individual determinations are not required if managing all pharmaceuticals as hazardous</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

MANAGEMENT OF NON-CREDITABLE HAZARDOUS WASTE PHARMACEUTICALS (NC HWP's)

5.	<p>Does the healthcare facility ensure all personnel managing NC HWP's are thoroughly familiar with proper waste handling and emergency procedures relevant to the personnel's responsibilities during normal facility operations and emergencies? Section 33.1-24-05-312(2) NDAC</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
7.	<p>Has the healthcare facility determined whether a non-creditable pharmaceutical is a hazardous waste pharmaceutical (i.e., the waste exhibits a characteristic identified in rules Sections 33.1-24-02-10 through 33.1-24-05-14 or is listed in rules Section 33.1-24-02-15 through 19)? Section 33.1-02-05-312(3) NDAC</p> <p>Note: Individual determinations are not required if managing all waste pharmaceuticals as NC HWP's.</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

CONTAINER STANDARDS for NC HWPs				
8.	Are NC HWPs placed in containers that are structurally sound, compatible with the contents, and that lack evidence of leakage, spillage, or damage that could cause leakage under reasonably foreseeable conditions ? Section 33.1-24-05-312(4) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
9.	Are containers that hold ignitable or reactive NC HWPs, or that mix or commingle incompatible NC HWPs managed so that the containers do not have the potential to do any of the following:			
	a.	Generate extreme heat or pressure, fire or explosion, or violent reaction? Section 33.1-24-05-312(4)(b)(1) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Produce uncontrolled toxic mists, fumes, dusts, or gases in sufficient quantities to threaten human health? Section 33.1-24-05-312(4)(b)(2) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Produce uncontrolled flammable fumes or gases in sufficient quantities to pose a risk of fire or explosions? Section 33.1-24-05-312(4)(b)(3) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Damage the structural integrity of the container? Section 33.1-24-05-312(4)(b)(4) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
10.	Are containers of NC HWPs closed and secured in a manner that prevents unauthorized access to the contents? Section 33.1-24-05-312(4)(c) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
11.	Are NC HWPs prohibited from being combusted because of the dilution prohibition of Section 33.1-24-05-252 stored in a separate container and labeled with all applicable hazardous waste numbers? Section 33.1-24-05-312(4)(d) NDAC Note: NC HWPs and non-hazardous non-creditable waste pharmaceuticals may be accumulated in the same container.		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
12.	Are containers labeled or clearly marked with the phrase "Hazardous Waste Pharmaceuticals?" Section 33.1-24-05-312(5) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
13.	Are containers accumulated on-site for one year or less? Section 33.1-24-05-312(6)(a) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
14.	Has the healthcare facility demonstrated the length of time that the NC HWPs have been accumulating, starting from the date the NC HWP first becomes a waste? Section 33.1-24-05-312(6)(b) NDAC This demonstration can be made by any of the following methods: A. Marking or labeling the container of NC HWPs with the date that it became a waste. B. Maintaining an inventory system that identifies the date the NC HWPs being accumulated first became a waste. C. Placing the NC HWPs in a specific area and identifying the earliest date that any of them in the area became a waste.		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
MANIFEST REQUIREMENTS for NC HWPs				
15.	Are all NC HWPs shipped off-site accompanied by a manifest (U.S. EPA Form 8700-22)? Section 33.1-24-05-318(1)(b) NDAC [Section 33.1-24-03-04 NDAC]		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>

16.	Have the manifest requirements in Section 33.1-24-03-04 through 33.1-24-03-07 been complied with? 33.1-24-05-318(1)(b) NDAC Note: Waste codes do not need to be identified, only write the word PHARMS in item 13 of environmental protection agency form 8700-22		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
17.	Does each manifest designate at least one facility which is permitted to handle the waste? Section 33.1-24-03-04(2) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
18.	If the transporter was unable to deliver a shipment of hazardous waste to the designated facility did the generator designate another facility or instruct the transporter to return the waste? Section 33.1-24-03-04(3) or (4) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
19.	Have the manifests been signed by the generator and initial transporter? Section 33.1-24-03-07(1)(a)&(b) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
20.	Are signed copies of manifests being retained for at least three years? Section 33.1-24-03-13(1) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
21.	Has the healthcare facility complied with land disposal restriction requirements in accordance with Section 33.1-24-05-312(7) NDAC? (hazardous waste codes do not need to be identified) [See Sections 33.1-24-05-250 through 309 NDAC]		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
22.	Did the healthcare facility receive back a rejected load? If so, did it do all the following:		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Sign either item 18c of the original manifest or item 20 of the new manifest? Section 33.1-24-05-312(8)(a)(1)&(2) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Provide the transporter a copy of the manifest? Section 33.1-24-05-312(8)(b) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Within thirty days after receipt of the rejected shipment, send a copy of the manifest to the designated facility that returned the shipment? Section 33.1-24-05-312(8)(c) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Within ninety days after receipt of the rejected shipment, transport or offer for transport the returned shipment in accordance with the shipping standards of Sub-section 33.1-24-05-318(1). Section 33.1-24-05-312(8)(d) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
23.	If the healthcare facility did not receive a copy of the manifest with the signature of the owner or operator of the designated facility within 60 days after being accepted by the transporter, did the healthcare facility submit the following: Section 33.1-24-05-312(9)(b)(1) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	A legible copy of the original manifest, indicating that the healthcare facility has not received confirmation of delivery, to the Department ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	A handwritten or typed note on the manifest or on an attached sheet of paper, stating that the return copy was not received and explaining the efforts taken to locate and the results of those efforts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

24.	For shipments rejected by the designated facility and shipped to an alternate facility, if a healthcare facility does not receive a copy of the manifest for a rejected shipment of the non-creditable hazardous waste pharmaceuticals that is forwarded by the designated facility to an alternate facility, with the signature of the owner or operator of the alternate facility, within sixty days after the date the non-creditable hazardous waste was accepted by the initial transporter forwarding the shipment of non-creditable hazardous waste pharmaceuticals from the designated facility to the alternate facility, did the healthcare facility submit all of the following: Section 33.1-24-05-312(9)(b)(2) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	A legible copy of the original manifest, indicating that the healthcare facility has not received confirmation of delivery, to the Department ?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	A handwritten or typed note on the manifest or on an attached sheet of paper, stating that the return copy was not received and explaining the efforts taken to locate the non-creditable hazardous waste pharmaceuticals, and the results of those efforts?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
25.	Are signed copies of exception reports being maintained for at least three years? Section 33.1-24-05-312(10)(b) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
MISCELLANEOUS REQUIREMENTS for NC HWP					
26.	Has the healthcare facility immediately contained all spills of NC HWPs and manage the spill clean-up materials as NC HWPs? Section 33.1-24-05-312(11) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
27.	Has the healthcare facility accepted NC HWPs from an off-site healthcare facility that is a VSQG? If so, are the following conditions met?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	a.	Is the receiving healthcare facility under control of the same "person" as the VSQG? Section 33.1-24-05-312(12)(a) NDAC and Section 33.1-24-03-26 NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	b.	Is the receiving healthcare facility operating under Sections 33.1-24-05-310 through 320 for the management of NC HWPs? Section 33.1-24-05-312(b) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	c.	Does the healthcare facility manage NC HWPs it receives from off- site in compliance with Sections 33.1-24-05-310 through 320? Section 33.1-24-05-312(12)(c) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
	d.	Does the receiving healthcare facility keep records of shipments it receives from off-site for three years? Section 33.1-24-05-312(12)(d) NDAC.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

PRE-TRANSPORT REQUIREMENTS for NC HWP's				
28.	Does the healthcare facility package, label, and mark its hazardous waste in accordance with all applicable DOT regulations? Section 33.1-24-05-318 (1) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
29.	Does the healthcare facility mark each container of one hundred-nineteen gallons or less used in such transportation with the following words and information? "HAZARDOUS WASTE - Federal Law Prohibits Improper Disposal. If found, contact the nearest police or public safety authority or the U.S. Environmental Protection Agency. Healthcare Facility's or Reverse distributor's Name and Address _____. Healthcare Facility's or Reverse distributor's EPA Identification Number _____. Manifest Tracking Number _____. " Section 33.1-24-05-318(1)(a)(3)(b) NDAC Note: See federal rule <u>§266.508</u> for a container marking example.		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
30.	Are lab packs that will be incinerated marked with EPA hazardous waste codes- D004, D005, D006, D007, D008, D010, and D011, where applicable? Note: A nationally recognized electronic system may be used Section 33.1-24-05-318(1)(a)(3)(c)		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
31.	Before off-site transportation, does the healthcare facility placard or offer the appropriate DOT placards to the initial transporter? Section 33.1-24-05-318(1)(a)(4) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
MANAGEMENT OF POTENTIALLY CREDITABLE HAZARDOUS WASTE PHARMACEUTICALS (PC HWP's)				
32.	Has the healthcare facility accepted PC HWP's from an off-site healthcare facility that is a VSQG? If so, are the following conditions met?		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
	a.	Is the receiving healthcare facility under control of the same "person" as the VSQG or has a contractual or other documented business relationship? Section 33.1-24-05-313(2)(a) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Is the receiving healthcare facility operating under Sections 33.1-24-05-310 through 320 NDAC for the management PC HWP's? Section 33.1-24-05-313(2)(b)	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	Does the healthcare facility manage the PC HWP's it receives from off-site in compliance with Sections 33.1-24-05-310 through 320 NDAC? Section 33.1-24-05-313(2)(c) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	Does the healthcare facility keep records of shipments it receives from off-site for three years? Section 33.1-24-05-313(2)(d) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
33.	Has the healthcare facility retained copies of shipping papers and confirmation of deliveries for all shipments of PC HWP's for at least three years? Section 33.1-24-05-313(5) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>
34.	Did the healthcare facility comply with DOT regulations for any PC HWP's that meets the definition of "hazardous material?" Section 33.1-24-05-319(1) NDAC		Yes <input type="checkbox"/>	No <input type="checkbox"/> N/A <input type="checkbox"/>

35.	If delivery confirmation is not received within thirty-five calendar days after the date that the shipment of PC HWP's was sent, did the healthcare facility contact the carrier and the reverse distributor to report delivery confirmation was not received and to determine the status of the PC HWP's? Section 33.1-24-05-319(3) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
36.	Has the healthcare facility immediately contained all spills of potentially creditable hazardous waste pharmaceuticals and manage the spill clean-up materials as non-creditable hazardous waste pharmaceuticals? Section 33.1-24-05-313(6) NDAC	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>

Abbreviation Key:

Hazardous Waste Pharmaceuticals- HWP's

Non-Creditable- NC

Potentially Creditable- PC

Gray Shade – Non-Compliance

In General:

Reactives must be segregated from Ignitables

Acids must be segregated from Caustics

Corrosives should be segregated from Flammables

Oxidizers should be segregated from EVERYTHING.

Many corrosives are water reactive.

Most reactive organics must be segregated from inorganic reactive (metals).

INCOMPATIBLE WASTES - Some Deadly Combinations -

Acids + Oil or Grease = FIRE

Acids + Caustics = HEAT/SPATTERING

Caustics + Epoxies = EXTREME HEAT

Chlorine Gas + Acetylene = EXPLOSION

Flammable Liquids + Hydrogen Peroxide = FIRE/EXPLOSION

Aluminum Powder + Ammonium Nitrate = EXPLOSION