

 SOLID WASTE SERVICES POLICY & PROCEDURE	P&P No. Disp-003-26	Page 1 of 9
	Effective Date: June 9, 2026	
Subject: MEDICAL WASTE DISPOSAL POLICY	Supersedes No./ Date: N/A November 1, 2013	First Published: January 31, 1991
	Approved by: <i>Kelli J. [Signature]</i> 6-9-26	

1. AUTHORITY TO ESTABLISH DISPOSAL POLICY

The authority by which the Municipality of Anchorage, Solid Waste Services (SWS) Department establishes disposal policies and procedures and conducts disposal operations is contained within Anchorage Municipal Code (AMC 26.80) and the State of Alaska Administrative Code (18 AAC 60, Solid Waste Management Regulations as amended through July 2025) and Solid Waste Disposal Operating Permit SW1A001-28a issued by State of Alaska Department of Environmental Conservation (ADEC) dated August 1, 2025; or most current versions.

2. PURPOSE

The purpose of the **MEDICAL WASTE DISPOSAL POLICY** is to protect SWS' workers, the public, and the environment from exposure to pathogens which could cause diseases. Indiscriminate disposal of potentially infectious wastes in garbage may expose refuse workers to diseases. Since package integrity cannot be ensured during collection and land filling, loss of containment may result in releasing infectious waste into the environment, endangering the SWS' workers, the public, and the environment itself.

3. APPLICABILITY

This policy applies to any private or public medical, dental, or veterinary clinic, office, laboratory, hospital, or other facility or service within the Municipality of Anchorage which generates, collects, or processes medical wastes with the intent of disposing at the Anchorage Regional Landfill (ARL). Specific medical wastes generated from within the private home environment by the individual homeowner or by a commercial in-home health care service are addressed separately in Section VII of this policy. Only wastes material that is **generated within the Municipality of Anchorage** is accepted for disposal at the ARL. Medical waste material that has been generated outside of the Municipality of Anchorage, and processed within the Municipality, may on a case-by-case basis, and as determined by the SWS Engineering Department (907-343-6154, e-mail SWSEngineering@anchorageak.gov), be accepted at the ARL. A processor who desires to process medical waste generated outside the Municipality of Anchorage with the intent to dispose of the processed waste in the ARL, must contact SWS at the above number before proceeding.

4. GENERAL POLICY

Medical wastes shall not be disposed of at the ARL until they have been **EFFECTIVELY TREATED**, that is, rendered biologically harmless in accordance with acceptable treatment practices as described in this policy or current industry standards and methods and the wastes do not pose other hazards subject to Municipal, State, or Federal laws or regulations. Effectively treated medical wastes will be disposed of only at the ARL, located at Glenn Highway and Hiland Road. No medical waste, except that which is generated by the individual homeowner within the private home environment, will be accepted at the SWS' Central Transfer Station, located at 1208 East 56th Avenue in Anchorage, or the Girdwood Transfer Station, located on Ruane Road in Girdwood.

5. DEFINITIONS

For the purpose of this policy, SWS embraces the definition of MEDICAL WASTE as defined in Alaska Administrative Code 18 AAC 60.990(78)

" 'medical waste' means laboratory waste consisting of discarded cultures and stocks of infectious agents and associated microbiologicals; pathological wastes; selected isolation wastes; used and unused discarded sharps; animal waste; human blood, or blood products; and other wastes defined as 'regulated waste' in 29 CFR 1910.1030(b)"

"REGULATED WASTE" is defined by Code of Federal Regulation 29 CFR 1910.1030(b) as:

"liquid or semi-liquid blood or other potentially infectious materials; 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."

In addition to materials specifically defined as medical waste by 18 AAC 60 or regulated waste as defined by 29 CFR 1910.1030, this policy applies to the following as defined in 18 AAC 60.990 **Definitions**:

- (9) **ANIMAL WASTES:** *Discarded material originating from an animal inoculated with an infectious agent during research, production of biologicals, or pharmaceutical testing; includes the carcass, body parts, blood, and bedding of any animal known to have been in contact with an infectious agent;*
- (22) **BLOOD AND BLOOD PRODUCTS:** *Discarded waste human blood and blood components, including serum and plasma, and materials containing free-flowing blood and blood components;*

- (33) *CULTURES AND STOCKS: Discarded cultures and stocks of infectious agents and associated microbiologicals, including human and animal cell cultures from medical and pathological laboratories, cultures and stocks of infectious agents from research and industrial laboratories, waste from the production of biologicals, discarded live and attenuated vaccines, and culture dishes and devices used to transfer, inoculate, or mix cultures of infectious agents;*
- (89) *PATHOLOGICAL WASTES: Discarded pathological waste, including human tissues, organs, and body parts removed during surgery, autopsy, or other medical procedures;*
- (118) *SELECTED ISOLATION WASTE: Discarded waste material that is contaminated with excretions, exudates, and secretions from patients with highly communicable diseases, and that is treated in isolation, includes blood and blood components, and sharps; and*
- (122) *SHARPS: Discarded implements or parts of equipment used in animal or human patient care, medical research, or industrial laboratories, including hypodermic needles; syringes, Pasteur pipettes, scalpel blades, blood vials, needles with attached tubing, broken or unbroken glassware that has been in contact with an infectious agent, slides, cover slips, and unused, discarded implements or parts of equipment.*

Note: Per Alaska Department of Environmental Conservation communication dated April 13, 2026, tubing may be removed from needles and disposed of as solid waste if the tubing or needle has not had any contact with a bodily fluid or other regulated medical waste. It is the responsibility of the generator and hauler to ensure there is a zero chance of contamination for items to be disposed of as solid waste and provide proof of zero contamination if requested. SWS retains the right to reject loads and require proof of zero contamination. Tubing that has expired and is in original packaging may be disposed of as municipal solid waste. Tubing that has been opened in a room where medical treatment is occurring should be disposed of as medical waste.

6. ACCEPTABLE TREATMENT METHODS OF MEDICAL WASTE

An acceptable treatment method is any technique or process designed to change the biological character or composition of medical waste so that it is no longer infectious or otherwise biologically hazardous. The most commonly accepted treatment methods are incineration and active steam sterilization. Use of other treatment methods, including chemical disinfection, microwave radiation sterilization, and thermal inactivation, are either quite specific or unique in their applications and as such will require case-by-case prior review and written approval by SWS before such treated waste will be accepted for disposal at the ARL. Regardless of the method of sterilizing used, it is important for the treatment operator to be fully aware

that successful sterilizing treatment requires a thorough understanding that conditions for sterilization vary with load type and operating conditions.

- A. INCINERATION is the process of burning the medical waste at high temperatures in a controlled environment to convert the combustible materials to noncombustible residue or ash. Incinerators which are properly designed, constructed, maintained and operated can be used for processing all medical waste categories. For the purpose of this policy the definition of a medical waste incinerator, as defined by 18 AAC 60.990, shall be:

(79) "Medical waste incinerator" means

(A) a two-chambered incinerator that holds waste for at least one second at temperatures at or above 1700°F in the secondary chamber, and operates at 1200° or more in the primary chamber; or

(B) a thermal oxidation unit approved by the department;

- B. ACTIVE STEAM STERILIZATION is the process of subjecting medical wastes to the pressures and temperatures of saturated steam inside a pressure vessel (autoclave, retort, or steam sterilizer). Temperatures are maintained at the manufacturer's designed levels and time, normally at 250° F (121° C) for a minimum of 90 minutes, in order to kill infectious pathogens in the waste. It is the generator's responsibility to ensure the sterilization process is operated according to accepted or manufacturer's procedures. The generator shall perform appropriate testing and keep records fully documenting effective sterilization has occurred. Solid Waste Services will not accept the use of active steam sterilization as a means of treating the following waste categories:

1. Pathological waste;
2. Blood, feces, urine and/or other body fluids in the free liquid state;
3. Chemical Waste, including chemotherapeutic wastes; or
4. Hazardous wastes.

Active steam sterilization is an acceptable means of treating sharps, sharps containers, laboratory cultures and specimens and their containers, tubes, dishes and slides, **provided these items are rendered non- recognizable either through the treatment process such as melt down of the item, or after being treated such as grinding of the item, but before disposal at the Anchorage Regional Landfill.** The methods of rendering these items non recognizable after having been sterilized can vary. For example, crushing and breaking the sterilized items in a compactor system, encasing the sterilized items within a hardened plaster or polymer resin mixture, processing the sterilized items through a grinding system or incineration are all acceptable methods of making these items non recognizable for disposal at the ARL. If the waste generator has other means

of achieving this objective, SWS requests the generator submit documentation of the methodology for SWS review and approval prior to use for disposal.

C. APPROVED ALTERNATIVE TREATMENT METHOD FOR LIQUID BIOMEDICAL WASTE: PREMICIDE™ TREATMENT SYSTEM (PTS)

The use of the Premicide™ Treatment System (PTS) is approved for the treatment of liquid biomedical wastes only prior to disposal at the Anchorage Regional Landfill. This approval for use is contingent on the following:

1. This system is to be used for the on-site treatment of liquid biomedical wastes. It is not to be used to treat any non-liquid wastes, pathological wastes (recognizable human tissues), chemotherapy wastes, or radioactive wastes.
2. Free liquids must not be present in waste treated with the PTS. If free liquids are present after processing, the waste is considered to be untreated waste.
3. The liquid biomedical wastes treated with the PTS must be kept on-site as per manufacturer's instructions or for a **minimum** of 12 hours after treatment to achieve the appropriate Log-Kill prior to disposal at the Anchorage Regional Landfill. The documentation with the Log-Kill achieved must be provided to SWS prior to disposal.

Liquid biomedical waste once treated with PTS becomes a solid and will be considered as solid waste. It should not be contained in "red" or "orange" bio-hazard bags and should not bear the bio-hazard symbol (or otherwise be identified as bio-hazardous waste). Further it will be labeled with the date of treatment as "Treated Medical Waste". Liquid biomedical waste once treated with PTS will be disposed of ONLY at the ARL.

7. PACKAGING OF TREATED MEDICAL WASTES FOR DISPOSAL

- A. No medical waste may be disposed of in the ARL unless the waste has been effectively treated, rendered noninfectious and properly packaged for disposal per Alaska Solid Waste management regulations 18 AAC 60:

18 AAC 60.030. Medical Waste

- (a) *A person shall manage medical waste in a way that prevents the spread of disease.*
- (b) *The owner or operator of a permitted municipal solid waste landfill facility or industrial solid waste monofil may accept medical waste that has been treated according to the manufacturer's instructions*
 1. *In an autoclave;*
 2. *By a decontamination process other than an autoclave; or*
 3. *In a medical waste incinerator*

- B. The residue or ash from incinerated medical waste shall be contained in leak-proof, fully enclosed and tightly lidded or sealed containers. Loose residue and ash will not be accepted or disposed of in the ARL. This restriction is to prevent ash from being blown about the landfill and to reduce the fire potential of disposing "hot" residue and ash.
 - C. The medical waste to be sterilized by active steam autoclaving shall be processed in opaque polyethylene disposable autoclave bags of a minimum of 3 mil thickness. The bags shall have heat sensitive markings that change color when exposed to a sterilization temperature for a given time period. The markings will be easily and clearly discernible. Unless specifically approved for such use by the sterilization unit's manufacturer, compactors, grinders, or similar devices may not be used to reduce the volume of medical waste before the waste is to be rendered noninfectious by steam sterilization.
 - D. No medical waste, except that which is generated from within the private home by the individual homeowner, will be accepted at the Central or Girdwood Transfer Stations. The generator of effectively treated medical waste is ultimately responsible for ensuring it will be disposed of at the ARL. The waste will be transported in a leak-proof, tightly sealed, fully enclosed container; the container will **NOT** be taken to the Central or Girdwood Transfer Stations for off-loading.
8. DISPOSAL PROCEDURES FOR MEDICAL WASTES AT THE ANCHORAGE LANDFILL
- A. Upon arriving at ARL, haulers of wastes from a medical facility will announce to the ARL Scale house Attendant the following information:
 - 1. The name of the medical facility that generated the waste; and
 - 2. The general content of the hauler's load, i.e., treated medical waste, or general municipal solid waste.
 - B. Failure to comply with the disposal procedures (above) will result in the load being refused disposal privileges at the ARL.
 - C. Special Medical Waste Compliance Requirements- Waste Generator Shall:
 - 1. Provide monthly operating reports and yearly operational inspection certifications (from Manufacturer or authorized service provider) to SWS Staff using e-mail and PDF format. Information detailing number of waste loads sterilized and verification of function within operation parameters (including temperature, pressure and other operations as indicated by manufacturer) are requirements to be included within monthly reporting and yearly certification documents. All monthly reports to SWS staff are due by the 15th of each calendar month and will be considered non-reporting if not received by the last day of each calendar month. Yearly certifications by manufacturer or designee shall be considered a non-report if certification is not received by December 31 of applicable calendar year.
 - 2. Direct Bury Requirements- Medical waste loads hauled to the Anchorage Regional Landfill shall be disposed of by the "direct bury" method of waste disposal. Per the memorandum dated March 11, 2016, the special handling

fee of \$140.00 per load over and above standard waste disposal fees for all medical waste loads hauled to the ARL site has been suspended.

3. Scheduled disposal of medical waste loads at the Anchorage Regional Landfill- Medical Waste loads brought to the ARL for disposal will only be accepted on Monday, Wednesday, and Friday between the hours of 9:00am to 1:00pm without prior written approval of the SWS Superintendent, SWS Engineering Staff, or SWS Director. In the event of an emergency or other unforeseen event, contact the SWS Engineering Department at 907-343-6154 for additional information and authorization.
 4. Noncompliance with Active Steam Sterilization Special Provisions- Medical Waste Generators or Haulers that do not comply with the provisions of these Special Compliance Requirements shall be required to submit a written corrective action to the SWS Engineering Staff for approval prior to disposal of additional medical wastes at the ARL site. Failure to comply with special waste disposal provisions may also result in a suspension of approval to dispose of waste for up to 30 days per event.
9. MEDICAL WASTES GENERATED WITHIN THE PRIVATE HOME:
- A. Medical wastes generated within the private home are not specifically addressed by the applicable regulatory agencies. It is not the intent of this policy to attempt to regulate all medical wastes generated from within the private home environment. The individual homeowner or the assisted living support provider who generates in the home environment certain medical waste is, however, responsible to ensure that waste is properly handled, containerized and, if required, effectively treated prior to disposal. The wastes of primary interest are sharps, such as lancets, syringes and needles used in the home to control diabetes, allergies or any other medical conditions; home care medical wastes associated with infectious diseases; and medical wastes generated from in-home health care which is provided by a commercial service.
 - B. Used and unused sharps discarded by the individual homeowner should be disposed in an appropriate sharps container that is puncture resistant, leak proof and able to be tightly sealed to prevent the sharps from spilling. Sharps collector containers suitable for home use are available from most medical suppliers in Anchorage. No sharps should be thrown directly into the household garbage; they should first be properly containerized or effectively treated. Information about treatment and disposal of sharps is available from the person's private physician as well as the local and state health departments.
 - C. Medical wastes generated as a result of providing home care of persons with infectious diseases such as hepatitis B, hepatitis C or positive HIV should not be discarded into the household garbage. These wastes should be sealed in leak proof plastic containers and transported to a proper disposal facility to be effectively treated.

D. Medical wastes generated through a commercial in-home health care service should not be discarded into the household garbage. The entity providing the in-home health care service is responsible for the effective treatment and proper disposal of any medical wastes generated from the service.

10. OTHER REQUIREMENTS:

A. Solid Waste Services Department points of contact are:

1. Disposal Fees Questions are to be referred to Customer Service- Telephone 907-343-6250
2. Anchorage Regional Landfill Forman- Office 907-343-6267, Cell 907-744-1815
3. Solid Waste Engineering Department- Office 907-343-6154, Cell 907-887-1779

B. All other requirements applicable for solid waste disposal- covered loads, hours, fees, etc. shall apply.

11. REVIEW REQUIREMENT:

A. Solid Waste Services recognizes that (at a minimum) a yearly review of this Policy and Procedure shall occur and include:

1. A review of accident, injury, and near miss logs from previous year.
2. Whenever new processes, equipment or hazards are identified and introduced into the workplace.
3. Regular consultation with the SWS Medical Waste Working Group as indicated by meeting schedule outlined below.
4. A yearly update of contact information for all members of the SWS Medical Waste Working Group is attached.
5. A review of this policy does not mean an update to this policy. This policy will be updated in a period not to exceed two years from the effective date of this policy.

B. This Medical Waste Disposal Policy and Procedures document was developed and put into place as a performance-based guideline for the safe disposal of medical waste at the Anchorage Regional Landfill. SWS recognizes that conditions may arise that would adversely impact the safety of our employees and site users. SWS reserves the right to put in place revisions to the policy or procedure when conditions arise that affect site safety, as a way of protecting the health and safety of employees, site users, and the public.

D. SWS will coordinate a meeting with the SWS Medical Waste Working Group at least once every two calendar years.

1. The SWS Medical Waste Working Group consists of SWS staff including the Director, Engineering, Operations, Disposal, and Safety, representatives from the MOA major medical waste generators and haulers that utilize Anchorage Regional Landfill.
2. It is the responsibility of the major medical waste generators and haulers to keep updated contact information on record with the SWS Engineering Department.