

# Infectious Waste Treatment Facility Inspection Checklist - STERIS Ecocycle 10™

Facility Name: \_\_\_\_\_ ID #: \_\_\_\_\_ Date: \_\_\_\_\_ County: \_\_\_\_\_  
 Facility Address: \_\_\_\_\_ Facility Phone #: \_\_\_\_\_  
 Operator Name: \_\_\_\_\_ Operator Phone #: \_\_\_\_\_  
 Corporate Address: \_\_\_\_\_ Corp. Phone # (If Diff.): \_\_\_\_\_  
 Health District: \_\_\_\_\_ Inspector(s): \_\_\_\_\_

Is this facility being operated **in compliance** with the following regulations (YES or NO)? Place an X in the appropriate column to denote compliance status. Placing an X in the NO column indicates that a violation has been noted. Write N/A on the lines that are not applicable. This checklist is not all inclusive of regulations applicable to Infectious Waste Treatment Facility operations. Please refer to the attached notice of violation letter for a detailed explanation of any violations noted here.

This is a:  **Comprehensive Inspection**     **Partial Inspection**     **Comments on Back**

**YES    NO**

**OEPA DIRECTOR'S APPROVAL, 12/8/95**

**Approved Treatment Method**

- \_\_\_\_\_ Use only STERIS Peracetic Acid (PA)  
(STERIS SW 17.1 milliliters of 35% PA  
or STERIS LW 79.8 milliliters of 35% PA)
- \_\_\_\_\_ Proper strength PA (SW for loads of # 100 milliliters of  
blood or LW for loads of greater than 100 milliliters but  
less than or equal to 1,000 milliliters of blood)
- \_\_\_\_\_ Addition of 1.5 liters of water for each treatment cycle
- \_\_\_\_\_ Use non-expired STERIS PA (verify against lot number)
- \_\_\_\_\_ Grinding cycle operates for a minimum of 3 minutes
- \_\_\_\_\_ Chemical soak operates for a minimum of 7 minutes

**Specific Operations**

- \_\_\_\_\_ Cap present on canister unless in the unit
- \_\_\_\_\_ Use of the specially designed STERIS EcoCycle 10  
canister (during waste collection and treatment)
- \_\_\_\_\_ Cap is properly disinfected after each use (using a U.S.  
EPA registered disinfectant that is also tuberculocidal)
- \_\_\_\_\_ Use of appropriate labeling (green tape/label for #  
100ml) (blue tape/label for > 100ml to # 1,000ml)
- \_\_\_\_\_ Use and examination of the indicator disk
- \_\_\_\_\_ Use of daily operating log form
- \_\_\_\_\_ Daily operating logs grouped by date and arranged by  
order of use for that date
- \_\_\_\_\_ Waste rendered unrecognizable
- \_\_\_\_\_ No non-incident quantities of chemicals
- \_\_\_\_\_ No body parts containing bone
- \_\_\_\_\_ No organs
- \_\_\_\_\_ No whole carcasses
- \_\_\_\_\_ No cytotoxic agents
- \_\_\_\_\_ No volatile or flammable substances
- \_\_\_\_\_ No explosive substances
- \_\_\_\_\_ No heavy metal items or items with a cross section >  
1/16 inch thickness
- \_\_\_\_\_ No heavy plastic containers
- \_\_\_\_\_ No cotton gauze or other woven cloth fiber over 2" x 2"  
square
- \_\_\_\_\_ No blood or liquid waste loads > 1,000ml
- \_\_\_\_\_ Complete color change of indicator

**3745-27-32 Facility Operations**

**(I) General Facility Requirements**

- \_\_\_\_\_ (1) Records Retention for 3 years
- \_\_\_\_\_ (2) Complete facility management plan
- \_\_\_\_\_ (3) Trained operators
- \_\_\_\_\_ (4) Daily logs
- \_\_\_\_\_ (5) Operating procedures
- \_\_\_\_\_ (7) Constructed & operated in accordance with  
authorizing documents
- \_\_\_\_\_ (8) Construction/maintenance of access roads
- \_\_\_\_\_ (9) Proper floors
- \_\_\_\_\_ (10) Waste not compacted or punctured
- \_\_\_\_\_ (11) Sheltered loading

**YES    NO**

- \_\_\_\_\_ (12) Proper disposal of wastewater
- \_\_\_\_\_ (13) Proper slopes/drainage
- \_\_\_\_\_ (14) Restricted access
- \_\_\_\_\_ (15) Shall not treat radioactive waste
- \_\_\_\_\_ (16) Shall not treat hazardous waste
- \_\_\_\_\_ **(18) Spill containment and clean up kits**
- \_\_\_\_\_ **(18)(b) Appropriate disinfectants**
- \_\_\_\_\_ **(19) Clean up procedure and spill log**
- \_\_\_\_\_ **(20) Handling treated waste**
- \_\_\_\_\_ **(21) Treated sharps management**

**3745-27-33 Shipping Paper System**

**(B) Treatment shipping paper**

- \_\_\_\_\_ Complete and legible
- \_\_\_\_\_ Shipping paper on file 3 years

**(C) Disposal shipping paper**

- \_\_\_\_\_ Complete and legible
- \_\_\_\_\_ Shipping paper on file 3 years

**3745-27-35 Standards for Handling Inf. Waste**

**(A) In-Use and Stored Containers**

- \_\_\_\_\_ (1) Maintain integrity of packaging
- \_\_\_\_\_ (2) Outside storage areas locked
- \_\_\_\_\_ (3) Lock or visibly label with signs and/or intl.  
biohazard symbol posted at all access points
- \_\_\_\_\_ (4) Contain & cleanup spills

**(B) Management of Inf. Waste Within Containers**

- \_\_\_\_\_ (1) Maintain non putrescent state
- \_\_\_\_\_ (2) Putrescent IW refrigerated / frozen & treated  
ASAP
- \_\_\_\_\_ (3) Protect from animals & insects
- \_\_\_\_\_ (4) Spill containment / cleanup

**(C) Treatment facility requirements**

- \_\_\_\_\_ (1) Fourteen day maximum storage
- \_\_\_\_\_ (2) Not more than 7x daily throughput stored
- \_\_\_\_\_ (3) Contingency plan maintained as part of  
facility management plan

**3745-37-01 License (COMMERCIAL FACILITIES ONLY)**

- \_\_\_\_\_ **(B) Valid license**

\_\_\_\_\_  
*Print Name of Inspector Completing Form*

\_\_\_\_\_  
*Inspector's Signature*

\_\_\_\_\_  
*Date*