

ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

PROCEDURE FOR THE DISPOSAL OF WASTE MEDICINES

1. INTRODUCTION

- 1.1. This procedure must be read in conjunction with the Trust's policy RM13 *Waste Management Policy* and RMPG13a *Procedural Guidelines for the Handling, Segregation and Disposal of Waste*.
- 1.2. The legislation and regulation relating to the transport and disposal of waste, do not allow unwanted medicines to be transferred to another organisation for disposal. Due to the differing arrangements for the provision of pharmacy services within Bedfordshire, Essex and Luton, pharmaceutical waste must be handled differently in each area.
- 1.3. **Essex:** spoiled doses, patient's own drugs brought into hospital with them and not required (including those in a compliance aid), opened items of medicines which have been dispensed for individual patients (such as creams, ointments and inhalers) and opened packs of medicines that would not be reused (liquids, creams, ointments etc.) should be disposed of on the ward in line with this document. All other medicines that are no longer required (including controlled drugs) must be returned to the Trust pharmacy as soon as possible
- 1.4. **Bedfordshire and Luton:** Unwanted medicines **MUST NOT** be sent back to the hospital pharmacy for disposal. All Trust sites where medicines are handled must keep suitable pharmaceutical waste bins which must be used in accordance with this procedure.
- 1.5. This document relates only to the disposal of pharmaceutical waste, i.e. licensed medicines classified as 'General Sales List' (GSL), 'Pharmacy Medicines' (P) or 'Prescription Only Medicines' (POM), including Controlled Drugs (CDs). It does not deal with the disposal of radioactive pharmaceutical waste or chemical waste.

2. PHARMACEUTICAL WASTE

- 2.1. Pharmaceutical waste is likely to consist of patients own medicines that are no longer required, out of date stock and medicines dispensed for individual patients, leave/discharge medicines that have not been issued or which have been brought back unused, and Controlled Drugs that have been denatured (see section 3).
- 2.2. It is not permissible to use 'patients own' medicines for other patients, even if they are in date and appear to be in good condition. Unwanted 'patients own' medicines must be disposed of (with the patient's consent) in accordance with these procedures (see also Appendix 11 of CLPG13-MH).
- 2.3. Stock medicines that are still within their expiry date but which are no longer required should be notified to the supplying pharmacy department.

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2.4. Pharmaceutical waste may include:

- Tablets and capsules
- Liquid medicines
- Eye, ear and nasal drops
- Transdermal patches
- Medicated dressings
- Inhalers
- Respirator solutions
- Creams and ointments
- Sachets of powder
- Vials and ampoules
- Suppositories

2.5. With the exception of cytotoxic/cytostatic drugs and sharps contaminated with pharmaceuticals, waste medicines should be stored in a 'pharmaceutical waste' bin, which is a yellow plastic container with a blue lid (see section [3.1](#)).

3. WASTE CONTAINERS

3.1. **Non-hazardous pharmaceutical waste** (yellow/ blue bin with BLUE lid)

3.1.1. These bins should be used for the majority of waste medicines, apart from sharps contaminated with pharmaceuticals (see section 3.2) and cytotoxic or cytostatic drugs (see section [3.3](#)). [Annex 1](#) contains a list of the drugs classed as cytotoxic or cytostatic.

3.1.2. Medicines should be separated from any outer packaging and leaflets prior to disposal. Outer packaging and patient information leaflets should be disposed of as general domestic waste. **Any labels identifying a patient's name must be disposed of in confidential waste.** Empty blister packs do not need to be disposed of in the pharmaceutical waste container.

3.1.3. [Annex 2](#) gives advice on how different types of product should be handled before placing them in the pharmaceutical waste container.

3.2. **Sharps contaminated with pharmaceuticals**

3.2.1. Sharps contaminated with pharmaceuticals that are not hazardous, e.g. fully discharged, unused or partially-used syringe/needle combinations and used or broken ampoules/vials should be placed in the container for sharps contaminated with pharmaceuticals. (yellow bin with YELLOW lid)

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- 3.2.2. Sharps not contaminated with pharmaceuticals, may be placed in the standard 'sharps bin' (yellow bin with ORANGE lid).
- 3.2.3. Sharps contaminated with cytotoxic or cytostatic drugs (see section [3.3](#)), should be disposed of in the container for hazardous pharmaceutical waste (yellow bin with PURPLE lid).
- 3.3. **Hazardous pharmaceutical waste** (yellow bin with PURPLE lid)
 - 3.3.1. Products containing cytotoxic or cytostatic drugs are regarded as hazardous waste, and must be segregated from non-hazardous pharmaceutical waste prior to disposal. A separate container (yellow with a PURPLE lid) must therefore be used for all cytotoxic/cytostatic waste.
 - 3.3.2. [Annex 1](#) contains a list of the drugs that are regarded as cytotoxic or cytostatic. Although the majority of these drugs will not be encountered in a mental health setting, the list includes some commonly-used products, including chloramphenicol and hormones found in oral contraceptives and hormone-replacement therapy).
 - 3.3.3. When disposing of unwanted medicines, [Annex 1](#) should be referred to in order to ensure that the appropriate containers are used. Any unidentifiable medicines should be regarded as hazardous pharmaceutical waste.
- 3.4. All bins for storing pharmaceutical waste must be kept in a secure place prior to their collection by the waste contractor; the bins must not be accessible to patients, visitors or non-nursing staff. This will usually mean that the bins should be kept in a locked cupboard within a room such as a clinical room.
- 3.5. Once full the lid must be firmly secured, all paperwork correctly filled in and the waste consigned to the appropriate codes (see RMPG13a). Further advice on the arrangements for the collection of waste from wards/units can be obtained from the Facilities Department.

4. DISPOSAL OF CONTROLLED DRUGS
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- 4.1. Controlled Drugs (CDs) must be denatured prior to disposal, and the denaturing process must be carried out by an authorised person in the presence of an authorised nurse who works on the ward/unit where the CDs are being held. Different procedures apply to the destruction of CDs depending on their legal classification.
- 4.2. This process is described in detail in section 15 of Appendix 3 to CLPG13-MH. Once CDs have been denatured and booked out of the CD Record Book, the destruction kit can be placed in the container for non-hazardous pharmaceutical waste (yellow/blue bin with BLUE lid).

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- 4.3. In Essex all CDs should be returned to the pharmacy for safe denaturing and disposal.

- 4.4. Disposal of CDs that are no longer required may only be undertaken on the ward or unit in Robin Pinto and Woodlea. Once CDs have been denatured and booked out of the CD Record Book, the destruction kit can be placed in the container for non-hazardous pharmaceutical waste (yellow bin with BLUE lid). (See Appendix 3).

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Annex 1

List of "Hazardous" medicines ("Cytotoxic/Cytostatic") adapted from Table 2 HTM 07-06 to include BANs where appropriate (taken from Principles on the Disposal of Pharmaceuticals used within Community Health Services)

Aldesleukin	Imatinib mesilate
Alemtuzumab	Interferon alfa-2a
Alitretinoin	Interferon alfa-2b
Altretamine	Interferon alfa-n1
Amsacrine	Interferon alfa-n3
Anastrozole	Irinotecan HCl
Arsenic trioxide	Leflunomide
Asparaginase	Letrozole
Azacitidine	Leuprorelin acetate
Azathioprine	Lomustine
Bacillus Calmette-Guérin Vaccine (BCG)	Megestrol
Bexarotene	Melphalan
Bicalutamide	Menotropins
Bleomycin	Mercaptopurine
Busulfan	Methotrexate
Capecitabine	Methyltestosterone
Carboplatin	Mifepristone
Carmustine	Mitomycin
Cetorelix acetate	Mitotane
Clorambucil	Mitoxantrone HCl
Chloramphenicol	Mycophenolate mofetil
Choriogonadotropin alfa	Nafarelin
Chlormethine hydrochloride	Nilutamide
Cidofovir	Oxaliplatin
Cisplatin	Oxytocin
Cladribine	Paclitaxel
Colchicine	Pegaspargase
Cyclophosphamide	Pentamidine isethionate
Cytarabine	Pentostatin
Ciclosporin	Perphosphamide
Dacarbazine	Pipobroman
Dactinomycin	Pinitrexim isethionate
Daunorubicin HCl	Picamycin
Denileukin	Podofilox
Dienostrol	Podophyllum resin
Diethylstilbestrol	Prednimustine
Dinoprostone	Procarbazine
Docetaxel	Progesterone
Doxorubicin	Progestins
Dutasteride	Raloxifene
Epirubicin	Raltitrexed
Ergometrine/methylergometrine	Ribavirin
Estradiol	Streptozocin
Etramustine phosphate sodium	Tacrolimus
Estrogen-progestin combinations	Tamoxifen
Estrogens, conjugated	Temozolomide
Estrogens, esterified	Teniposide
Estrone	Testolactone
Estropipate	Testosterone
Etoposide	Thalidomide
Exemestane	Thioguanine
Finasteride	Thiotepa
Floxuridine	Topotecan
Fludarabine	Toremifene citrate
Fluorouracil	Tositumomab
Fluoxymesterone	Tretinoin
Flutamide	Trifluridine
Fulvestrant	Trimetrexate glucuronate
Ganciclovir	Triptorelin
Ganirelix acetate	Uramustine
Gemcitabine	Valganciclovir
Gemtuzumab ozogamicin	Valrubicin

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Choriogonadotropin alfa	Vidarabine
Goserelin (Zoladex)	Vinblastine sulfate
Hydroxycarbamide	Vincristine sulfate
Ibritumomab tiuxetan	Vindesine
Idarubicin	Vinorelbine tartrate
Ifosfamide	Zidovudine

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Annex 2

DISPOSAL ADVICE

Product type	Disposal advice
Aerosol inhalers and other pressurised devices	Remove product from inert packaging. Aerosols should be placed in the waste container intact.
Capsules	See under Tablets.
Creams, ointments and shampoos	Remove product from inert packaging then place in waste container.
Eye, ear and nasal drops and ointments	Remove product from inert packaging then place in waste container. Products containing chloramphenicol must be disposed of as cytotoxic/cytostatic waste (yellow bin with purple lid).
Flammable liquids	Small quantities of flammable liquids remaining in a bottle, e.g. alcohol hand rubs, may be placed in the waste container. Large quantities of flammable liquids must not be placed in the container – contact Estates for advice on collection and disposal.
Inhalers (non-aerosol)	Remove product from inert packaging then place in waste container.
Injections (intact vials or ampoules)	Remove from inert packaging then place ampoules/vials in waste container.
Injections (broken or part-used vials or ampoules)	Place in waste container for sharps (yellow bin with yellow lid).
Injections (unused or part-used syringes with needles)	Place in waste container for sharps (yellow bin with yellow lid). Do not discharge the syringe contents.
Liquids (external and internal, in bottles)	The liquid should remain in the bottle and the bottle itself should be placed in the waste container. Under no circumstance should a liquid be poured directly into the waste container. Liquid Controlled Drugs will require denaturing prior to disposal.
Liquids (oral doses that have been measured but not administered)	Small quantities may be disposed of by washing down a sink or toilet.
Nebules	Treat as injections (intact).
Patches (removed from the patient's skin)	Fold the patch over on itself, then place in the waste container.
Patches (unused - sealed in individual pouches)	Remove pouches from inert packaging and then place unopened pouches in waste container
Powders (in tins/sachets)	Place in waste container intact. Do not open sachets.
Suppositories and vaginal preparations	Remove product from inert packaging then place in waste container. Do not remove suppositories/pessaries from individual foil/plastic wrapping.
Sprays e.g. nasal sprays	Remove product from inert packaging then place in waste container.
Tablets and capsules (in blister strips)	Remove blister strips from inert packaging and place in waste container (do not pop tablets/capsules out of their blisters).
Tablets and capsules (loose in a bottle or pot)	Tablets/capsules must remain in the bottle. Place bottle containing tablets/capsules directly in the waste container.

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Product type	Disposal advice
Tablets and capsules (in a monitored dose system, e.g. blister packs in a plastic frame)	<p>The disposable packaging containing the unwanted medicines should be removed from any re-usable equipment and placed intact into the waste medicines container*. The re-usable equipment can be returned to the pharmacy that dispensed the system.</p> <p>If any of the medicines are on the cytotoxic/cytostatic list (see Annex 1), the whole pack must be placed in the container for hazardous pharmaceutical waste (yellow bin with purple lid).</p>
Tablets and capsules (in a personal compliance box, e.g. Dosett)	<p>If the compliance aid does not contain medicines sealed in disposable packaging, there is no alternative but to empty the contents directly into the waste medicines container.</p> <p>However, before doing so, there is a duty of care to determine whether the container includes any medicines on the cytotoxic/cytostatic list (see Annex 1). If so, the entire contents should be emptied into the container for hazardous pharmaceutical waste (yellow bin with purple lid).</p>
Tablets and capsules (prepared but not administered)	Place directly in pharmaceutical waste container. However, if 'contaminated' e.g. as a result of the patient spitting out, place in the container for sharps (yellow bin with yellow lid).
Unidentifiable medication of any sort	Place in the container for hazardous pharmaceutical waste (yellow bin with purple lid)