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RCRA Docket Environmental Protection Agency Mailcode: 2822T 1200 Pennsylvania Avenue, NW Washington, DC 20460

To Whom It May Concern:

The American Nurses Association (ANA) welcomes this opportunity to respond to the Federal Register/Vol.73, No. 232, December 2, 2008 notice for Environmental Protection Agency (EPA), 40 CFR Part 260, 261, 264, 265, 268, 270 and 273, (EPA-HQ-RCRA-2007-0932; FRL-8746-2), RIN 2050-AG39, Amendment to the Universal Waste Rule: Addition of Pharmaceuticals

A recently published AP investigation noted that hospitals and long-term care facilities flush millions of pounds of unused pharmaceuticals down the drain. Better practices need to be employed rather than overt flushing into our nation's water supply. Since nurses handle, use, administer and dispose of medications on a routine basis, ANA wishes to make comments on this issue, mainly from a nurse's viewpoint.

ANA concurs with the EPA's proposal that adding certain pharmaceuticals to the Universal Waste Rule will indeed encourage and promote safer, more environmentally sound methods of pharmaceutical disposal for health care facilities and other similar industries. ANA agrees that this new ruling will facilitate consumer take-back programs for unwanted pharmaceuticals. This new ruling would be in agreement with ANA's scope and standards of nursing practice (ANA, 2003, p. 28) that encourages nurses to employ strategies to promote health and a safe environment. By changing the ruling to allow for a more streamlined, realistic process, awareness of proper pharmaceutical disposal will be increased and simplified; therefore providing for greater compliance with disposal regulations. Also, it is important to realize that "Nurses constitute the single largest group of workers in the health care industry. Thus, it is essential that nurses responsibly recognize and address the environmental hazards (biological, chemical, radiological, and physical) that might affect themselves, their patients, and the community at large." (ANA, 2007, p. 8).

The ANA offers the following comments:

On page 73525 of the EPA's document, it states that the EPA is aware that many health care facilities dispose of their pharmaceutical waste in an inadvisable manner and may not even be aware of the regulations that pertain to health care facilities disposal of hazardous pharmaceutical waste. This must change. Regardless if this proposed amendment is passed or not, all health care facilities and other applicable industries must be aware of and comply with

RCRA regulations and environmentally-sound practices regarding pharmaceutical waste. According to ANA's Code of Ethics for Nurses (ANA, 2001, pp. 20-21), nurses should participate in improving health care environments and not accept unsafe practices. ANA also believes pollution prevention should occur at its source (ANA, 2007, p. 12).

Page 73535 of the EPA's document requests comments on proposed container management. ANA recommends that waste pharmaceutical containers be closed and secure for two reasons. First, the nurse has a duty to safeguard the patient's right to privacy (ANA, 2001, p. 12). IV bags, medication containers, inhalers, and the like frequently contain the patient's name and drug used on the container or attached label. Nurses also have a duty to preserve the confidentiality of the patient's information (ANA, 2001, p. 12). An open collection container with discarded medications and labeling in it would compromise both patient privacy and confidentiality and could constitute a violation of the Health Insurance Portability and Accountability Act (HIPAA). Second, all pharmaceuticals can be become substances of possible abuse. Over-the-counter drugs, anti-anxiety medications, sleep aids, Ritalin, Adderall, cough syrups and other pharmaceuticals are all sources of possible abuse and often are not used in the manner for which they were prescribed. An unsecured container collecting multiple pharmaceuticals would provide an opportunity for abuse, theft, and other types of unhealthy behavior by staff, visitors and patients. Children, risk-taking adolescents, the mentally ill, the developmentally disabled, and those with altered mental status, whether as visitors or patients, could also have access to and ingest unsecured waste pharmaceuticals.

Page 73535 of the EPA's document also requests comments on "whether handlers of pharmaceutical universal wastes should be required to maintain the pharmaceutical wastes in their original packaging if received as such". ANA recommends requiring handlers of pharmaceutical universal wastes to keep such wastes in their original packaging unless it constitutes an additional hazard such as leaking or compromised packaging. The rationale behind this recommendation is twofold. First, it will be easier for handlers to sort and identify the waste pharmaceuticals as they will remain clearly labeled. Second, while many pharmaceuticals are in solid or pill form, many are in syrup, gel, drop, lotion, cream, or other liquid form. Transferring them out of their original packaging provides additional opportunities for waste, spills and other unnecessary exposure to chemicals.

Page 73536 of the EPA's document requests comments on whether or not all handlers of pharmaceutical universal wastes need specialized training. ANA does believe specialized training is needed for all handlers sorting pharmaceutical universal wastes. Pharmaceuticals can contain multiple chemicals, some toxic and hazardous. When these are collected, interactions can occur. Spills and mixtures can occur. People are fallible. Pharmaceuticals that are not acceptable for the universal waste collection may be mistakenly put in. Handlers need to be trained on what to do when these situations occur. Appropriate personal protective equipment, clean up procedures and immediate access to chemical data are just some of the information handlers require. Specifically "workers have the right to know about hazardous materials that they come in contact with during the average workday as well as access to and education about the proper protective equipment they should use to reduce risks of exposure" (ANA, 2007, p.27). "This transmittal of information is achieved by means of comprehensive hazard communication programs that include container labeling and other forms of warning, material safety data sheets, and employee training." (ANA, 2007, p. 28). Handlers also need to be properly trained on HIPAA regulations if patients' personal information is still on the pharmaceutical labels.

Again, thank you very much for the opportunity to submit comments on this important issue.

Sincerely,

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REFERENCES:

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