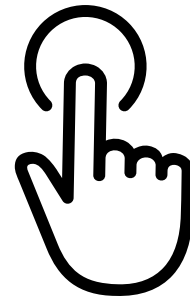


**PHARMACEUTICAL WASTE
GUIDELINES AND POLICIES**

TASMANIA



'Go there' Buttons can be found throughout the document. Clicking on them will result in the relevant linked policy opening in your browser.



DISCLAIMER

This document was created by DrugWaste International for the sole purpose of education and information provision. This document has not been created for commercial purposes and should not be viewed as such. It includes relevant links to governing policies and documents. All credit is given to the original authors. We encourage clinicians to read the linked policies/guidelines in their entirety to ensure complete understanding. This document is not a completely exhaustive or comprehensive list. Policies and frameworks are constantly being updated. DrugWaste International will attempt to ensure that all information presented is current, however, it is the full responsibility of the reader to ensure they engage with the links to ensure currency of resources.

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DISPOSAL OF NARCOTICS FACT SHEET

Purpose: Narcotic substances (Schedule 8 medicines) are controlled drugs as they are subject to abuse, misuse, and dependence. Narcotic substances can only be destroyed when they are unwanted, used, and expired, and narcotic substances must be disposed in a way so there is no risk to the public of being reused or diverted. There are obligations for authorised persons, including health professionals, and licence holders, for disposal of narcotic substances under Tasmanian poisons legislation. (Department of Health, January 2022, pg.1)

KEY COMPONENTS



- **Page 1:** The definition of destruction
- **Page 1-2:** The use of a gel disposal kit
- **Page 2:** Incineration

WHAT DOES THIS MEAN FOR YOU?

The Department of Health Tasmania directs that all narcotic substances must be destroyed prior to disposal. **Destruction is defined as rendering substances irretrievable and unrecognisable**, separating the liquid or tablet waste from the identifiable packaging and dispersing in a substance preventing retrieval.

The DOH recommends the use of gel disposal kits for the destruction of pharmaceutical narcotic waste. This is to ensure community and staff safety. The gel renders the drugs irretrievable and unrecognisable and ensures that the drugs are rendered safe prior to incineration.

Finally, Tasmanian legislation directs that narcotic waste must undergo high temperature incineration at end of life.

APPROVED MANAGEMENT METHOD FOR CLINICAL AND RELATED WASTE - APPENDIX 2

Purpose: The Clinical and Related Waste AMM specifies minimum standards and recommended controls in relation to waste classification, segregation, safe packaging, labelling, storage, transport and disposal of clinical and related wastes to minimise risks associated with the management of these wastes. A key feature of the Clinical and Related Waste AMM is a ban on landfilling untreated clinical and related wastes which took effect on the 1st October 2008.

The Clinical and Related Waste AMM has been developed to allow those responsible for waste management in health care settings to provide safer working environments, minimise waste generation and costs associated with managing that waste, and reduce the environmental impact of waste treatment and disposal. (EPA Tasmania, 2007, web page)

KEY COMPONENTS



- **Page 2:** Definition of Clinical Waste and Classification of Related Waste
- **Page 4:** Description of Pharmaceutical Waste
- **Page 6:** Waste segregation
- **Page 6:** Specific requirements relating to Pharmaceutical waste
- **Page 13:** Treatment of Pharmaceutical waste

WHAT DOES THIS MEAN FOR YOU?

Pharmaceutical waste is classified by Tasmania EPA as a related waste.

Pharmaceutical waste includes antibiotics, endocrine disruptors and medications in any form.

These include returned expired, unwanted or unused, or any other waste that has been contaminated by pharmaceuticals.

Any packaging with trace quantities of pharmaceuticals are not included in the definition and should not be disposed of with pharmaceutical waste.

At end of life, pharmaceutical waste must be **destroyed by high temperature incineration**. It is non-compliant to dispose of pharmaceuticals via landfill or sewers.

- Tasmania EPA mandates that waste must be **segregated at point of generation** into their outlined categories.
- They mandate the use of accurately labelled **waste disposal containers** to ensure this occurs.
- The disposal of pharmaceutical waste must be in a **rigid walled container, that is secure and prevents the removal of medicine waste** once disposed of.

Sharps are not required to be incinerated and can be sent to landfill. Therefore, it is essential that pharmaceutical waste is segregated from packaging and all other sharps, to ensure that pharmaceutical waste is incinerated.

SUMMARY

The disposal of medicines in Tasmania is regulated by the EPA and Department of Health.

They mandate that pharmaceutical waste must be:

- **Segregated from** other waste at point of disposal.
- Disposed of in a dedicated, rigid walled container that prevents retrieval opportunities and ensures **security**.
- **Incinerated** at end of life.

It is non-compliant to dispose of pharmaceutical waste via sewers or landfill.

Schedule 8 medications should be disposed of using a **gel disposal kit** to ensure safety for staff and the community.

Pharmaceutical waste is a highly regulated waste type in Tasmania and must be treated with specific care. Clinicians must take care as waste generators to familiarise themselves with the requirements and ensure they are compliant with the legislation surrounding pharmaceutical waste.

WANT TO KNOW MORE?

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References

Approved Management Method for Clinical and Related Waste. Appendix 2 - Legal requirements of the AMM. 2007. Department of Tourism, Arts and the Environment. <https://epa.tas.gov.au/business-industry/regulation/waste-management/controlled-waste/handling-controlled-waste-in-tasmania/required-approvals-authorisations-for-controlled-waste-management/approved-management-methods/clinical-and-related-waste#:~:text=The%20Clinical%20and%20Related%20Waste%20AMM%20specifies%20minimum,risks%20associated%20with%20the%20management%20of%20these%20wastes.>

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