



ENVIRONMENTAL HEALTH AND SAFETY | HAZARDOUS MATERIALS

## **Investigational Drug/Pharmaceutical Substance Disposal (non-DEA controlled substance)**

Once an investigational drug/pharmaceutical substance no longer serves its intended purpose, is expired, or is left over at the conclusion of a study and will be destroyed on site, the following steps must be taken to ensure proper disposal of the investigational agent in accordance with the law. This guidance only applies to non-DEA controlled substances. Guidance for DEA controlled substance disposal is provided in a separate document.

### **TRAINING**

All laboratory personnel handling chemical waste must be current on the CU: Chemical Waste Management training. Training must be renewed annually. This training is available under Training/ Start SkillSoft in the staff's [UCD Access portal](#).

### **CONTAINER**

Select a compatible container (e.g. glass, plastic etc) based on the physical/chemical properties and the physical state of the substance (solid, liquid etc).

Drugs or substances that are in syringes, vials, bottles or other containers, do not need to be emptied out. They can be disposed "as is".

### **LABELING**

Request HAZARDOUS WASTE labels from Environmental Health and Safety (EHS) at [ehs.hazmat@ucdenver.edu](mailto:ehs.hazmat@ucdenver.edu). No other labels are acceptable.

Attach a HAZARDOUS WASTE label to each container.

Complete the label with the following information:

- Name of the Principal Investigator (PI).
- Location where the material is stored (building and room number).
- Research team contact phone number.
- Completely spelled out chemical names (no abbreviations) or name of active ingredient(s) and concentrations/percentages.

### **STORAGE**

All properly labeled containers must be stored in a Satellite Accumulation Area (SAA).

SAA's are subject to audits by CDPHE. CDPHE may impose fines against the PI and the departments for non-compliance with SAA requirements.

An SAA can be a designated space in a locked cabinet, or it can be created by placing the disposal container into a secondary containment, such as a large tub with lid.

All SAA areas need to be registered with EHS.

Each container must be inspected weekly by the research team.

Observations of all weekly inspections must be documented on the [SAA Inspection Log](#).

Inspections of all containers that belong to one PI and are stored in the same SAA can be documented on the same SAA inspection log.

SAA inspection logs must be made available for review by EHS and other entities upon request.

## **DISPOSAL**

To initiate the disposal process, a completed AMC [Chemical Waste Disposal Request Form](#) must be submitted to [ehs.hazmat@ucdenver.edu](mailto:ehs.hazmat@ucdenver.edu).

EHS will enter the date when the form was received by EHS, and the date the waste was picked up on the form.

Note in the comments section of the chemical waste disposal request that a copy of the completed form must be provided to the research team for filing in their research records at the time of pick up.

The date when the product was picked up by EHS is considered the disposal date.

## **DESTRUCTION**

All investigational drugs and pharmaceutical substances collected by the Hazardous Materials division within EHS are consolidated.

Consolidated substances are transported several times per year to an Environmental Protection Agency (EPA) permitted incinerator through the university's hazardous materials vendor.

All chemical waste disposed of by the University of Colorado is processed in compliance with EPA's requirements for chemical identification, manifesting, and recordkeeping requirements.

Additional information about the management of hazardous waste at the university can be found in the Hazardous Materials Management Plan available for download from [www.ucdenver.edu/hazmat](http://www.ucdenver.edu/hazmat) along with all the forms referenced in this document.