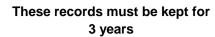




BIOLOGICAL WASTE TREATMENT LOG SHEET

In accordance with M.G.L. c. 111 §§ 3, 5 and 127A and 105 CMR 480.000: Minimum Requirements for the Management of Medical or Biological Waste (State Sanitary Code, Chapter VIII), generators of medical or biological waste, which is treated on-site shall maintain a current record-keeping log with the following information: the exact date of treatment; the quantity of waste treated; the type of waste; the on-site treatment method with documentation of applicable process parameters, including but not limited to time, pressure, temperature and pH; the printed name and signature of the person responsible for treatment; and the quality control (QC)/challenge testing results (growth/no growth), when applicable.

and pH, the printed ha	ime and sign	ature of the perso	on responsibl	e for treatme	ent; and the d	quality contro	i (QC)/challen	ge testing results	(growtn/no g	rowth), when applicable.
Autoclave make/model:						Department/	Lab/Center na	ame:		
Location (building-room number)					Principal Investigator/ Supervisor name:					
Person responsible for a										
Phone number and email:										
All loads containing biohazardous waste must be autoclaved at 121°C for a minimum of 60 minutes										
Date Quantity	Type (Liquid, Solid, Tools)	Treatment Method (Liquid, Gravity, Pre-vacuum)	Sterilization Parameters				Tape Result	Chemical Integrator Result	Biological Indicator	Printed Name
			Max Temp Reached	Time	Pressure	рН	(Pass/Fail)	(Accept/Reject)	Used? (Y/N)	Signature
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