



DEPARTMENT OF THE AIR FORCE  
27TH SPECIAL OPERATIONS WING (AFSOC)  
CANNON AIR FORCE BASE NEW MEXICO

 ENTERED

AUG 22 2014

Colonel Tony D. Bauernfeind  
Commander  
100 Air Commando Way Ste 100  
Cannon AFB NM 88103-5214

Mr. John E. Kieling  
Chief Hazardous Waste Bureau  
2905 Rodeo Park Drive East, Building 1  
Santa Fe, NM 87505-6303

RE: Notice of Violation  
27 SOW AFSOC USAF CANNON AFB NM  
EPA ID# NM7572124454

Dear Mr. Kieling

In response to the March 18-19, 2014, hazardous waste Compliance Evaluation Inspection, Cannon Air Force Base (CAFB) is providing the following additional documentation for corrective actions implemented.

NOV #2 - Failure to make a hazardous waste determination resulting in the improper disposal of hazardous waste. This violation is associated with CAFB Medical Center Pharmacy inappropriately placing hazardous waste pharmaceuticals (loose pills, empty containers) into red bio-hazardous waste bags for management as bio-hazardous waste and expired hazardous waste immunizations (i.e., those containing thimerosal such as flu vaccinations) generated by the Immunization Clinic being managed as bio-hazardous waste. To resolve the violation, NMED requires CAFB provide a written practice as described in the 30 April, 2014, response.

CAFB Response: Please refer to Special Operations Medical Group Instruction 32-2, Consolidated Waste Management Plan (Attach 1) as documentation of proper disposal of hazardous waste. Hazardous Waste disposal is highlighted in section 2.1.5 and specifically in Attachment 5 of the plan.

NOV # 3 and 4 – Failure to properly label hazardous waste and failure to label containers of hazardous waste with the accumulation start date (ASD). Three 1-gallon metal containers of Waste Paint Related Material stored in the Flammables section.

CAFB Response: The containers were combined into a 30-gallon drum and properly labeled as Hazardous Waste and the ASD was marked on the top of the container (Attach 2).

NOV #9 – Failure to define required training for hazardous waste management personnel. To resolve this violation, NMED requires that CAFB provide written job title, a written job description, and a written description of introductory and continued training specific to each position within the hazardous waste management program.

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NMED  
Hazardous Waste Bureau

CAFB Response: Addendum's to Mr. Madril and Ms. Lafuente's position descriptions were added (Attach 3) identifying their additional job title and duties as Hazardous Waste Specialist. All training documentation for Mr. Madril and Ms. Lafuente is located in attachment 4. A new training crosswalk was created to ensure all positions and training were encompassed (Attach 5). Training for the Supervisor, Central Accumulation Point (CAP) contractor and all Contingency Plan Emergency Coordinators can be found in attachment 6. Job title and descriptions for CAP employees is identified in attachment 7.

If you have any questions regarding responses, please contact Mr. Ron Lancaster, Chief, Installation Management Flight at (575) 784-1146.

Sincerely

A handwritten signature in black ink, appearing to read 'Tony D. Bauernfeind', written in a cursive style.

TONY D. BAUERNFEIND, Colonel, USAF

Attachments:

- Attach 1 – Special Operations Medical Group Instruction 32-2, Consolidated Waste Mgmt Plan
- Attach 2 – Photo 30-gallon drum
- Attach 3 – Position Titles and Position Descriptions for Hazardous Waste Specialist
- Attach 4 – Training documentation for Hazardous Waste Specialist
- Attach 5 – Training crosswalk for Cannon AFB and Melrose Air Force Range
- Attach 6 – Training for Supervisor and Central Accumulation Point Contractor
- Attach 7 – Central Accumulation Point job title and description

*1 May 2014*



*Medical Operations*

**CONSOLIDATED WASTE  
MANAGEMENT PLAN**

**COMPLIANCE WITH THIS PUBLICATION IS MANDATORY**

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**NOTICE:** Available digitally at: SharePoint  
OPR: 27 SOMDG Facility Management

Certified by: 27 SOMDG/CC  
(Col Jeffrey C. Gillen)  
Pages: 17

Distribution: F

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**PURPOSE:** The Consolidated Waste Management Plan is designed to provide guidance to Medical Group personnel in the proper disposal of both hazardous and nonhazardous wastes generated during operations at the Medical Treatment Facility (MTF). It is a multifaceted program/function designed to address the proper management and minimization of all waste streams from the MTF. This includes solid nonhazardous waste, universal waste, nonhazardous pharmaceutical waste, biomedical waste, and hazardous waste. All waste shall be disposed of in accordance with federal, state, and local laws and regulations. This document applies to all personnel who have designated responsibilities at the 27th Special Operations Medical Group.

<b>CHAPTER 1 - ROLES AND RESPONSIBILITIES</b> .....	3
1.1. Commander, 27th Special Operations Medical Group (27 SOMDG).....	3
1.2. Commander, 27th Special Operations Medical Support Squadron (27 SOMDSS).....	3
1.3. Flight Commander, Medical Logistics .....	3
1.4. Facility Manager .....	4
1.5. Section Supervisors .....	4
1.6. Bioenvironmental Engineering .....	5
1.7. Military Treatment Facility (MTF) Personnel .....	5
<b>CHAPTER 2 – WASTE CHARACTERIZATION</b> .....	6
2.1. Identifying Types of Waste.....	6
2.1.1. Solid Nonhazardous Waste .....	6

2.1.2. Universal Waste .....	6
2.1.3. Nonhazardous Pharmaceutical Waste.....	6
2.1.4. Biomedical Waste.....	6
<b>2.1.5. Hazardous Waste.....</b>	<b>7</b>
<b>Attachment 1 – Solid (Nonhazardous) Waste Disposal .....</b>	<b>8</b>
<b>Attachment 2 – Universal Waste Disposal.....</b>	<b>9</b>
<b>Attachment 3 – Nonhazardous Pharmaceutical Waste Disposal .....</b>	<b>10</b>
<b>Attachment 4 – Biomedical Waste Disposal .....</b>	<b>11</b>
<b>Attachment 5 – Hazardous Waste Disposal.....</b>	<b>13</b>
<b>Attachment 6 – Sample AF Form 2005.....</b>	<b>15</b>
<b>Attachment 7 – Sample Hazardous Waste Container Label .....</b>	<b>16</b>
<b>Attachment 8 – Glossary of References and Supporting Information.....</b>	<b>17</b>
<b>Attachment 9 – Glossary of Acronyms .....</b>	<b>18</b>

## CHAPTER 1

### ROLES AND RESPONSIBILITIES

Responsibilities for implementing this plan rest with organizations throughout the 27 SOMDG that generate, accumulate, monitor, transport, recycle, and dispose of both hazardous and nonhazardous waste products.

#### 1.1. Commander, 27 SOMDG

- 1.1.1. Ensures assigned personnel comply with the guidelines of this instruction.
- 1.1.2. Appoints, in writing, the Facility Manager as the Group Unit Environmental Coordinator (UEC) and an alternate.

#### 1.2. Commander, 27 SOMDSS

- 1.2.1. Ensures execution of the Consolidated Waste Management Plan.
- 1.2.2. Assists in the development and review of the Consolidated Waste Management Plan.

#### 1.3. Flight Commander, Medical Logistics

- 1.3.1. Oversees direct operation of the Consolidated Waste Management Plan.
- 1.3.2. Ensures Medical Logistics Flight personnel receive proper training in the management of various forms of waste generated at the MTF.
- 1.3.3. Implements the Consolidated Waste Management Plan along with the Facility Manager.
- 1.3.4. Oversees the procurement of outside contracts for the removal of biomedical and nonhazardous pharmaceutical waste.
- 1.3.5. Ensures there is an adequate supply of hazardous pharmaceutical waste replacement containers.
- 1.3.6. Provides direction and support to the Facility Manager and other Medical Logistics Personnel who work with the waste program.
- 1.3.7. Notifies the 27 SOMDG Commander of any situation posing a hazard to patient or staff welfare.
- 1.3.8. Activates contingency plans based on engineering control failures (i.e. spills).

1.3.9. Acts to minimize risk to the extent possible and/or remove susceptible individuals from the environment that pose risk.

#### **1.4. Facility Manager**

1.4.1. Serves as the Group UEC.

1.4.2. Maintains training and qualifications for both hazardous and nonhazardous waste handling and disposal, provided by Civil Engineering (CE).

1.4.3. Works closely with Infection Control, CE, the base hazardous materials (HAZMAT) contractor, contracted housekeeping staff and contracted maintenance staff.

1.4.4. Works closely with the specific MTF sections that produce hazardous waste (i.e. Pharmacy, Dental, Laboratory and Facility Maintenance).

1.4.5. Oversees the MTF recycling and solid waste program.

1.4.6. Oversees the removal of biomedical waste from the clinic areas by the contracted housekeeping staff.

1.4.7. Consults with personnel who provide oversight housekeeping, Hospital Aseptic Management System (HAMS), and regulated medical waste contracts.

1.4.8. Drafts the Consolidated Waste Management Plan, coordinating with the Medical Logistics Flight Commander, Infection Control, Bioenvironmental Engineering (BE) and CE. Ensures annual review of this plan (MDGI 32-2) for any updates.

1.4.9. Performs or supervises hazardous and nonhazardous surveillance, spill prevention, and control activities required by MDGI 44-2, Infection Prevention and Exposure Control Program as well as CAFB 32-2, Hazardous Waste Management Plan.

1.4.10. Maintains access to all records and all areas within the 27 SOMDG for surveillance activities.

#### **1.5. Section Supervisors**

1.5.1. Comply with all infection control protocols as established in MDGI 44-2, Infection Prevention and Exposure Control Program, as well as individual OIs required therein.

1.5.2. Comply with this plan, CAFB 32-2, Hazardous Waste Management Plan and develop internal OIs (as needed) to reflect section-specific guidance not covered in this plan (hazardous waste generating sections only).

1.5.3. Maintain accounts in Enterprise Environment, Safety & Occupational Health-Management Information System (EESOH-MIS) established through CE (hazardous waste generating sections only).

1.5.4. Appoint, in writing, Initial Accumulation Point monitors that are in charge of all hazardous waste, training and documentation (hazardous waste generating sections only).

1.5.5. Ensure there is an adequate supply of various waste stream containers, as needed.

1.5.6. Conduct annual section-specific infection control training and maintain documentation.

1.5.7. Ensure that personnel know and comply with infection control practices, tuberculosis, blood borne pathogens, environmental management awareness, safety procedures, MDGIs and policies.

1.5.8. Report potential hazards to Facility Management immediately.

#### **1.6. Bioenvironmental Engineering (BE)**

1.6.1. Works with CE to approve any materials that may be hazardous for use in the MTF.

#### **1.7. Military Treatment Facility (MTF) Personnel**

1.7.1. All 27 SOMDG personnel, contract employees, and volunteers assigned or attached to work in any capacity within the facility are responsible for compliance with the Consolidated Waste Management Plan.

1.7.2. Workplace specific hazards should be included in the Section Job Safety Training Outline (JSTO) located in in each sections safety binder. Orientation with the JSTO is required for all personnel. All personnel are required to take Environmental Management Awareness training and document the training on the AF Form 55, Employee Safety and Health Record (or equivalent).

1.7.3. Report hazards to Facility Management.

1.7.4. Complete 27 SOMDG Annual Safety Training via the Swank HealthCare website.

## CHAPTER 2

### WASTE CHARACTERIZATION

**2.1. Identifying Types of Waste.** Materials that can no longer be used for their intended purpose in any application must be characterized to determine proper disposal. Refer to CAFB 32-2, Hazardous Waste Management Plan, Chapter 3 for detailed waste characterization. For the purposes of this instruction, the following five types of waste will be considered:

2.1.1. Solid (Nonhazardous) Waste: defined as materials that are sent out through the refuse dumpsters or are recycled through the base recycling program. Solid waste is non-regulated, not a listed waste and will not exhibit one of the four hazard waste characteristics (i.e. ignitability, corrosivity, reactivity, or toxicity). Examples include waste bin items and shredded paper. See Attachment 1 of this plan for more information.

2.1.2. Universal Waste: defined as any hazardous waste that may be managed in accordance with 40 CFR Part 273, Standards for Universal Waste Management, or 20.4.1.1001 NMAC, Hazardous Waste Management. The items listed below are items that would otherwise be considered hazardous waste but are designated as *universal waste* in either 40 CFR Part 273 or 20.4.1001 NMAC. See Attachment 2 of this plan for more information.

- Batteries
- Equipment containing mercury
- Recalled pesticides and pesticide stock managed as part of a waste pesticide collection program
- Fluorescent lamps
- Aerosol cans

2.1.3. Nonhazardous Pharmaceutical Waste: defined as nonhazardous, unusable pharmaceutical products no longer authorized for distribution. Examples include expired or recalled pharmaceuticals. See Attachment 3 of this plan for more information.

**NOTE:** There are certain types of pharmaceutical waste that are hazardous waste. These two waste streams (nonhazardous and hazardous) must be differentiated within the Pharmacy. See Attachment 5 of this plan for a list of hazardous pharmaceutical wastes.

2.1.4. Biomedical Waste: defined as all Regulated Medical Waste (RMW) categorized in MDGI 44-2, Infection Prevention and Exposure Control Program, Chapter 3. Examples include microbiological/pathological waste, blood/body fluids and sharps that have been placed in sharps containers. See Attachment 4 of this plan for more information.



2.1.5. **Hazardous Waste:** defined as any waste that meets the definition of *solid waste* in 40 CFR Part 261, Identification and Listing of Hazardous Waste, and poses a substantial hazard to human health or the environment. Examples include oil, antifreeze and certain pharmaceutical wastes. See Attachment 5 of this plan for more information.

2.1.5.1. Hazardous pharmaceutical waste is further characterized into characteristic and commercial chemical (P- and U-listed) waste.

2.1.5.1.1. Characteristic Hazardous Pharmaceutical Waste displays properties of being toxic, corrosive, reactive, or ignitable.

2.1.5.1.2. Commercial Chemical P-Listed Waste is waste from medications that are acutely hazardous medications. These medications and their wrappers/containers must be disposed of as hazardous waste (e.g. Coumadin/Warfarin and nicotine products).

**NOTE:** This is the only type of hazardous waste currently carried in the Pharmacy.

2.1.5.1.3. Commercial Chemical U-Listed Waste is waste from medications that are toxic. This includes many chemotherapeutic medications (e.g. Cytosin and Mutamycin).

Further clarification on waste disposal processes may be found in the attachments. Any questions on MTF waste disposal may be addressed to Facility Management, 784-4018.



2014.05.16

13:01:09 -06'00'

JEFFREY C. GILLEN, Colonel, USAF, BSC  
Commander

**9 Attachments:**

1. Solid (Nonhazardous) Waste Disposal
2. Universal Waste Disposal
3. Nonhazardous Pharmaceutical Waste Disposal
4. Biomedical Waste Disposal
5. Hazardous Waste Disposal
6. Sample AF Form 2005
7. Sample Hazardous Waste Container Label
8. Glossary of References and Supporting Information
9. Glossary of Acronyms

## Attachment 1

### Solid (Nonhazardous) Waste Disposal

**A1.1. Responsibility.** Solid (nonhazardous) waste disposal is the responsibility of the Housekeeping Service Contractor under the authority of Facility Management and the Medical Logistics Flight. General cleanliness of work areas is also the responsibility of each MTF employee.

**A1.2. Training.** Facility housekeeping contractor provides training to housekeepers on areas such as facility cleanliness, infection control and blood borne pathogens. Training logs are maintained by the Certified Executive Housekeeper and located in the Housekeeping Office.

#### **A1.3. Procedures.**

##### A1.3.1. Refuse Collection:

A1.3.1.1. Housekeeping empties all trash cans daily in each office, restroom and patient room. Additional pick-ups are available if needed by contacting the housekeeping office at 784-4623.

A1.3.1.2. Trash is then disposed of in one of the two brown dumpsters behind the MTF (Building 1400) near the outside warehouse (Building 1403).

A1.3.1.3. MTF personnel are personally responsible for taking the following items to the dumpsters: 1) any food trash that will be left in trash cans over the weekend and 2) any large amounts of trash generated by the use of the Resiliency Room for large functions.

A1.3.1.4. Dumpsters are emptied through a contract with CE.

A1.3.2. Recycling: The base currently recycles both shredded paper and cardboard. Two blue recycling dumpsters are located behind the MTF (Building 1400) near the outside warehouse (Building 1403). Housekeeping will remove bagged shredded paper from work areas and take the bags to the recycling dumpsters. Housekeeping is not responsible for emptying shredders.

## Attachment 2

### Universal Waste Disposal

**A2.1. Responsibility.** Universal waste is the responsibility of Facility Management and is disposed of under EESOH-MIS account C33FM. The contracted maintenance staff is responsible for lamps and ballast, while Biomedical Equipment Technicians (BMETs) are responsible for batteries.

**A2.2. Training.** Facility Management staff receives training through CE annually. Training certificates are located in the Universal Waste Management binder located in Facility Management. The contracted maintenance staff receives training through their contract and through any updates from Facility Management. Training is documented on the contract monthly report given to the Facility Manager as well as with the contractor.

**A2.3. Procedures.** Universal waste is stored in Initial Accumulation Points, depending on the type of waste. Initial Accumulation Point Monitors are identified in writing by the Section Supervisor. Type of containers and container labels must comply with CAFB 32-2, Hazardous Waste Management Plan. When a pick-up is required, Facility Management completes AF Form 2005, contacts the base HAZMAT contractor for a pick-up, and logs the pick-up in the Universal Waste Management binder located in Facility Management.

A2.3.1. Spent fluorescent lamps are stored in approved containers at the Initial Accumulation Point located on the second floor (Room C-128), at or near the point of generation. The contracted electrician is responsible for changing light bulbs.

A2.3.2. Used batteries are stored at the Initial Accumulation Point located in the BMET office (Room B-201). Batteries are sorted based on type into separate approved containers.

**Attachment 3****Nonhazardous Pharmaceutical Waste Disposal**

**A3.1. Responsibility.** Nonhazardous pharmaceutical waste disposal is the responsibility of the Pharmacy and Medical Logistics.

**A3.2. Training.** The Pharmacy conducts training for all new personnel on how to segregate different types of waste, to include nonhazardous pharmaceutical waste. Training for all waste streams is documented in the Pharmacy's Hazardous Waste binder.

**A3.3. Procedures.** Nonhazardous pharmaceutical will be held in the Pharmacy until the scheduled contractor comes for pick-up. Waste will be stored in black bags for easy identification. The current contractor is PharmaLogistics. When PharmaLogistics arrives (usually every three months), the nonhazardous pharmaceutical waste (both full and partial containers) will be returned to the Medical Logistics flight for either credit return or disposal. Pharmacy will place nonhazardous pharmaceutical waste in black bags to differentiate between different types of waste.

## Attachment 4

### Biomedical Waste Disposal

**A4.1. Responsibility.** Biomedical waste is the responsibility of each clinic containing such waste, Infection Control, Medical Logistics, Facility Management, and the contracted housekeeping staff.

**A4.2. Training.** All clinic personnel will receive Infection Control and Blood Borne Pathogen training as required. Training will be logged in the Section Safety Binder on the AF Form 55. Housekeeping receives training on Infection Control, Blood Borne Pathogens, and the handling of all biomedical waste through their contract. Training logs are maintained by the Certified Executive Housekeeper and located in the Housekeeping Office. Any Medical Logistics personnel that are designated to coordinate biomedical waste pickups are required to complete the Basic Hazardous Materials Transportation Certification. These certificates will be kept in the Medical Logistics Infectious Waste binder.

**A4.3. Procedures.** Biomedical waste will include all Regulated Medical Waste, to include sharps containers. Further information on clinic procedures is located in MDGI 44-2, Facility Infection Prevention Exposure Control Program. Soiled linen is not considered a waste and is therefore not covered in this plan. Procedures for soiled linen are covered in MDGI 44-2.

A4.3.1. It is the responsibility of the generator (not housekeeping) to label the red bags once they are removed from the container. Housekeeping is responsible for the transportation of red bags from the duty area to the accumulation point. Biomedical waste (red bags) MUST be properly labeled with the name and address of the generator, as well as the date of generation. A sample label is as follows:

**Office Symbol** (e.g. 27 SOMDSS/SGSAL)

208 West D.L. Ingram Blvd

Cannon AFB, NM 88103

**DATE** (e.g. 05 Oct 14)

A4.3.2. Immediately or as soon as possible after use, contaminated **non-reusable** sharps will be placed in the sharps container. These containers are puncture resistant, labeled or color-coded and leak proof on the sides and bottom. Generators of biomedical waste sharps will check daily and exchange  $\frac{3}{4}$  full sharps containers for empty ones. Generators of sharps containers will tape sharps container shut when the container is  $\frac{3}{4}$  full (or to the fill line indicator), double bag in bio-hazardous (red) bags, and properly label with name, address and date of generation. Contact housekeeping at 784-4623 for pick-up.

A4.3.3. The biomedical waste accumulation point is in the locked shed behind the MTF (Building 1400). Housekeeping will bring all red bags to this accumulation point and secure until the scheduled contractor comes for pick-up. The current contractor is Stericycle. When Stericycle arrives (usually every 2 weeks), the Stericycle personnel will load the biomedical waste while under supervision of the certified Medical Logistics personnel.

**Attachment 5****Hazardous Waste Disposal**

**A5.1. Responsibility.** Dental Clinic, Laboratory, Facility Management and Pharmacy are all generators of hazardous waste. Initial Accumulation Points are maintained at or near the point of generation. MTF Initial Accumulation Point Monitors are identified in writing by the Section Supervisor. Pharmacy will regularly and at a minimum annually evaluate this Consolidated Waste Management Plan, MDGI 32-2, to capture additions and deletions to hazardous medications.

**A5.2. Training.** Initial Accumulation Point Monitors receive required training as specified by CE. Training certificates are located in each section's Hazardous Waste Binder located in their work area.

**A5.3. Procedures.** Each generator of hazardous waste maintains an account in EESOH-MIS. When a waste pick-up is needed, the generators are responsible for filling out AF Form 2005, contacting the base HAZMAT contractor at 784-4639, and logging the pick-up in their HAZMAT binder.

**A5.3.1. Dental Hazardous Waste:** Dental Hazardous waste is turned in under account C33DL. Waste is accumulated near the point of generation in each dental exam room. Containers are in compliance with CAFB 32-2. Each exam room maintains two approved and properly labeled containers under the sink. The larger bucket contains the amalgam traps and the smaller containers contain any left-over amalgam. Dental staff will check Initial Accumulation Point containers monthly, at a minimum, to ensure full or near full hazardous waste containers are replaced. When a pick-up is needed, dental staff will fill out AF Form 2005 and contact the base HAZMAT contractor for pick-up.

**A5.3.2. Laboratory Hazardous Waste:** Laboratory Hazardous waste is turned in under account C33CL. Waste is accumulated near the point of generation in the Lab and stored in a properly labeled container according to CAFB 32-2. Laboratory staff will check Initial Accumulation Point containers monthly, at a minimum, to ensure full or near full hazardous waste containers are replaced. When a pick-up is needed, laboratory staff will fill out AF Form 2005 and contact the base HAZMAT contractor for pick-up.

**A5.3.3. Logistics/Facilities Hazardous Waste:** Logistics/Facilities Hazardous waste is turned in under account C33FM. Used aerosol cans and oily rags are located in the mechanical room in the basement of the MTF. Used oil and antifreeze are stored in the generator room in the outdoor warehouse (Building 1403). Approved containers are properly labeled according to CAFB 32-2. Facilities staff will check Initial Accumulation Point containers monthly, at a

minimum, to ensure full or near full hazardous waste containers are replaced. When a pick-up is needed, the contracted maintenance staff informs Facility Management. Facility Management then fills out AF Form 2005 and contacts the base HAZMAT contractor for pick-up.

A5.3.4. Pharmaceutical Hazardous Waste: Pharmaceutical Hazardous Waste will be separated into approved containers and labeled according to CAFB 32-2. Empty containers, packaging, and wrappers that held an acutely hazardous medication must also be disposed of as a hazardous pharmaceutical waste. Pharmacy will check Initial Accumulation Point containers weekly, at a minimum, to ensure full or near full hazardous waste containers are replaced. Pharmaceutical waste will be turned in under EESOH-MIS account C33RX. When containers are ready for pick-up, the Pharmacy will fill out the AF Form 2005 and contact the base HAZMAT contractor at 784-4639 for pick-up. Pharmaceuticals currently in the Pharmacy formulary that are considered hazardous are listed in Table 1.

<b>P-Listed Hazardous Pharmaceuticals Used by 27 SOMDG</b>
Epinephrine (P042)
Nicotine (P075)
Nitroglycerin (P081)
Warfarin (P001)

**Table 1. P-Listed Pharmaceuticals in 27 SOMDG**



Attachment 6

Sample AF Form 2005

ISSUE/TURN-IN REQUEST	TRIC 1 2 3			DEL DISY TOTE BOX 4 5 6			EX 7			A. INCHECKER, NAME, DATE (TIN) Sharer/GS-11/27SOMDSS/Bldg1400/784-4018										B. INSPECTOR, NAME-STAMP, DATE (TIN) PRINT NAME: Kerry M. Sharer SIGNATURE & DATE																	
	ASJ			TIN						REQUEST, TIME & DATE (ISJ) CURRENT 09 Jan 2014																											
	STOCK NUMBER										C.										DOCUMENT NUMBER																
	NSN			MIN						ADDN			UNIT OF ISSUE			QUANTITY				ACT			ORG			SHOP			DATE			SER. NO.			COND		
	8 9 10 11			12 13 14 15 16 17 18 19 20						21 22			23 24			25 26 27 28 29				30			31 32 33			34 35			36 37 38 39			40 41 42 43 44					
	####			#####						LB							US EPA Waste #s			F			H48			55											
	Part Number										E. T.O. REFERENCE/TECHNICAL PUBLICATION OR END-ITEM APPLICATION/NEXT HIGHER ASSEMBLY																										
	D. PART NUMBER/MGFR CODE OR NAME/REMARKS HWPS#										Work Center Name: 27 MDG Facility Management Shop (IAP/SAASite) Code # C33FM																										
	WORK ORDER										MARK FOR																										
	SHP TO			TRK			DOH			AD			SD			PROJECT			PRI			REQ DEL DT			UJC			DOCUMENT NUMBER			POST/POST			F. T.O. PSC AND/OR ERRC			
45 46 47 48 49 50			51			52 53			54 55 56			57 58 59			60 61			62 63 64			65 66			67 68 69 70 71 72 73 74 75 76 77 78 79 80			61 62 63 64 65 66			67 68 69 70 71 72 73 74 75 76 77 78 79 80			Shop Code:				
SZ3027																																					
G. TIME & DATE OF DELIVERY										H. DELIVERY TIME										J. NOMENCLATURE Universal Waste (By type) and Qty/Container: ni-cad batteries																	

AF 2005, 20080826, V4 PREVIOUS EDITION WILL BE USED.

Attachment 7

Sample Hazardous Waste Container Label

# HAZARDOUS WASTE

**ACCUMULATION START DATE:** 09/28/2010

**CONTENTS:** MASKING & PREP DEBRIS W/CHROMIUM BASED  
PRIMERS/PAINTS (LG)

**SHOP NAME:** C10CC

**BUILDING NO.:** 199

**PHONE NO.:** 784-2144



\*1026555DM0001\*

**HANDLE WITH CARE**

**CONTAINS HAZARDOUS OR TOXIC WASTES**

**Attachment 8**

**Glossary of References and Supporting Information**

20.4.1.1001 NMAC, *Hazardous Waste Management*, 14 June 2000

29 CFR, *Occupational Safety and Health Administration*

29 CFR 1910, *Occupational Safety and Health Administration*

40 CFR Part 273, *Standards for Universal Waste Management*, 15 April 2014

40 CFR Part 261, *Identification and Listing of Hazardous Waste*, 16 April 2014

AFI32-7042, *Civil Engineering Waste Management*, 15 April 2009, Incorporating Change 1 31 March 2010

AFI 32-7001, *Civil Engineering, Environmental Management*, 4 November 2011

AFI 32-7086, *Civil Engineering Hazardous Materials Management*, 29 December 2009

AFI 41-201, *Managing Clinical Engineering Programs*, 25 Mar 2003

AFI 44-108, *Infection Prevention and Control Program*, 1 March 2012

AFI 91-201, *The US Air Force Mishap Prevention Program*, 05 August 2011

AFI 91-203, *Air Force Consolidated Occupational Safety Instruction*, 15 June 2012

CAFB 32-2, *27th Special Operations Wing Cannon Air Force Base and Melrose Air Force Range Hazardous Waste Management Plan*, April 2012

DoDI 4715.17, *Environmental Management System*, April 15 2009

DoDI 6050.05, *DoD Hazard Communication Program*, August 15 2006

MDGI 44-2, *Infection Prevention and Exposure Control Program*, 23 April 2013

**Attachment 9**

**Glossary of Acronyms**

**AFI** – Air Force Instruction

**BE** – Bioenvironmental Engineering

**BMET** – Biomedical Equipment Technician

**CFR** – Code of Federal Regulations

**DoDI** – Department of Defense Instruction

**EESOH-MIS** – Enterprise Environment, Safety & Occupational Health-Management Information System

**HAMS** – Hospital Aseptic Maintenance Service

**HAZMAT** – Hazardous Materials

**JSTO** – Job Safety Training Outline

**MDGI** – Medical Group Instruction

**MTF** – Medical Treatment Facility

**NMAC** – New Mexico Administrative Codes

**OI** – Operating Instruction

**RMW** – Regulated Medical Waste

**27 SOMGD** – 27th Special Operations Medical Group

**27 SOMDSS** – 27th Special Operations Medical Support Group

**UEC** – Unit Environmental Coordinator



**HAZARDOUS WASTE**  
FEDERAL LAW PROHIBITS IMPROPER DISPOSAL.  
IF FOUND, CONTACT THE NEAREST POLICE OR PUBLIC SAFETY AGENCY OR THE  
ENVIRONMENTAL PROTECTION AGENCY.

**D.O.T. PROPER SHIPPING NAME:**  
WASTE (AINT) RELATED MATERIAL

**GENERATOR NAME:** 03371 03400 034

**ADDRESS:** 624 NORTH S.W. PARKWAY BLVD. STATE: FL  
BLOOMING 305  
DANNON AVE ZIP: 32077

**CITY:** DANNON AVE

**PHONE:** 904-277-1884

**EPA WASTE NO.:** 004 1145

**HAZARDOUS WASTE NO.:** 484

**MANIFEST DOCUMENT NO.:**

