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**New Jersey Department of Environmental Protection
Air, Energy and Materials Sustainability (AEMS) Program**

2025

**New Jersey Interagency Protocol
for Response to
Medical Waste Abandonments**

Updated September 2025

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NEW JERSEY INTERAGENCY PROTOCOL FOR RESPONSE TO MEDICAL WASTE ABANDONMENTS

1. INTRODUCTION

The New Jersey Interagency Protocol for Response to Medical Waste Abandonments (protocol) for a coordinated response to all incidents involving medical waste abandonments in New Jersey was initially launched in the summer of 1989. This protocol outlines the standard operating procedures (SOP) for the notification and verification of, and response to, these incidents. This protocol is updated annually upon review by:

- New Jersey Department of Environmental Protection (NJDEP):
 - Division of Sustainable Waste Management
 - Bureau of Recycling and Hazardous Waste Management
 - Bureau of Solid Waste Planning and Licensing
 - Division of Water Monitoring, Standards and Pesticides Control
 - Bureau of Environmental Analysis, Restoration and Standards
 - Division of Waste and UST Compliance and Enforcement:
 - Bureau of Hazardous Waste Compliance and Enforcement
 - Bureau of Solid Waste Compliance and Enforcement
 - Office of Emergency Management:
 - Bureau of Communication and Response Services
 - Bureau of Emergency Response
- New Jersey Department of Health (NJDOH):
 - Public Health Services Branch
- New Jersey Department of Law and Public Safety:
 - Division of Criminal Justice and New Jersey Division of State Police (NJSP)

This protocol will remain in effect until amended by future revised editions.

2. GLOSSARY & COMMONLY USED TERMS

BEACH INFORMATION – NJBeaches.org provides daily updates throughout the beach season (mid-May through mid-September) on beach status, water condition, and water quality analysis.

BIOLOGICAL THREATS/TERRORISM – An act or threat of terrorism using biological agents.

COASTAL-BASED – Coastal or marine environments including the waters, shoreline, and land where water may flow to one of the areas defined by the attached map/list of municipalities by county (Attachment 6).

COMMUNITY EXPOSURE – An accidental exposure to medical waste by a citizen or an employee outside the health care profession (i.e., police, sanitation worker, etc.) will vary with the type of medical waste encountered and the condition of the waste at the time of the exposure. Exposures of greatest concern are parenteral (outside of the digestive tract), mucous membrane, or cutaneous exposures to non-intact skin (i.e., cut, scratch, puncture, or splash of blood and body fluids into the eyes, mouth, or non-intact skin).

INCIDENTS – Regulated Medical Waste and general medical waste abandonments in New Jersey.

The focus is on the level of threat to the health and safety of individuals or the environment to ensure prompt notification to the proper agencies regardless of the amount of medical waste in the abandonment. Even a small amount of medical waste mixed in with larger abandonment of solid or hazardous waste should be included as an Emergency Incident to ensure prompt notification to the NJDEP: Division of Water Monitoring, Standards & Pesticides Control and the New Jersey Department of Law and Public Safety: Division of Criminal Justice as well as other appropriate agencies.

- a. **EMERGENCY INCIDENTS** – Incidents that present an immediate threat to the health and safety of individuals or the environment.
- b. **NON-EMERGENCY INCIDENTS** – Incidents that do not present an immediate threat to the health and safety of individuals or the environment.

INCIDENT DIRECTORY – The official record of incidents reported to TRENTON DISPATCH/NJDEP COMMUNICATIONS CENTER and maintained by the NJDEP: Office of Emergency Management; Bureau of Communication and Response Services.

INLAND-BASED – Incidents occurring on land and water at any area that is not considered coastal-based; this definition includes incidents on the land and on inland surface water systems.

MEDICAL WASTE – As defined in this protocol, medical waste includes both Regulated Medical Waste and non-Regulated Medical Waste.

- a. **REGULATED MEDICAL WASTE** – Any solid waste, generated in the diagnosis, treatment, or immunization of humans or animals, in research pertaining thereto, or the production or testing of biologicals that is listed or meets any waste characteristic classification criteria defined in N.J.A.C. 7:26-3A.6 (Attachment 7).
- b. **NON-REGULATED MEDICAL WASTE** – Any medical waste that does not meet the definition of Regulated Medical Waste as defined at N.J.A.C. 7:26-3A.6.

TRENTON DISPATCH/NJDEP COMMUNICATIONS CENTER – For the reporting of all environmental incidents, NJDEP offers the Toll-Free Environmental Hotline at 1-877-WARNDEP (877-927-6337) and refers the incident to the appropriate agencies for action.

WASTE FLOW VIOLATION – Solid waste that has not been disposed of in accordance with NJDEP regulations and county solid waste flow directives.

3. **INTERAGENCY PROTOCOL FOR INCIDENT RESPONSE**

When an incident is observed, the following steps must be taken (as appropriate):

A. Report The Incident

1. Federal, State, and local governmental agencies, State law enforcement, and the public will report all environmental incidents in New Jersey to the Trenton Dispatch/NJDEP Communications Center at 1-877-WARNDEP (1-877-927-6337). Incidents may be reported on a 24-hour per day, 7-day per week basis.
2. Incidents reported by the public directly to any of the agencies involved in this protocol will be immediately reported by that agency to Trenton Dispatch/NJDEP Communications Center.

3. Incidents reported to Trenton Dispatch/NJDEP Communications Center shall include the following information (if available):
 - Identify if inland or coastal-based
 - Identify if Regulated Medical Waste or non-Regulated Medical Waste (if known)
 - Incident location
 - Type and approximate quantity of waste
 - Date and time of observation
 - Individual(s) who first observed the incident
 - Community Exposure
 - Press Involvement
 - Contact information for person reporting

B. NJDEP Trenton Dispatch/NJDEP Communications Center Notification

1. Notification

Trenton Dispatch/NJDEP Communications Center will determine the nature of the incident and will notify responsible agencies as follows:

a. If incident is COASTAL-BASED:

NJDEP: Division of Water Monitoring, Standards and Pesticides Control; Bureau of Environmental Analysis, Restoration and Standards.

OR

b. If incident is INLAND-BASED:

NJDEP: Division of Waste and UST Compliance and Enforcement; Bureau of Hazardous Waste Compliance and Enforcement.

Trenton Dispatch/NJDEP Communications Center may also notify one or more of the following groups in accordance with their NJDEP Communication Center Operational Procedures (Attachment 11).

- New Jersey Department of Law and Public Safety:
 - Division of State Police Operations Officer
 - Division of Criminal Justice
- NJDEP:
 - Division of Waste and UST Compliance and Enforcement; Bureau of Solid Waste Compliance and Enforcement
 - Emergency Management Program; Bureau of Communication and Response Services
 - Communications Office
- NJDOH:
 - Public Health Services Branch
 - Public Health and Food Protection Program
- County/Municipal/Regional Health Department
- County Solid Waste Coordinator

OR

c. If incident is **BIOLOGICAL THREAT/TERRORISM**

Please refer to the **Confidential** NJDEP Communications Center Operational Procedure #42 “Terrorist Threat/Security Breach Notifications” (Attachment 11c).

- Waste resulting from bioterrorism or Regulated Medical Waste (RMW) generated from post exposure prophylaxis of a victim should be managed as RMW Class 6 – Isolation Waste (Attachment 7) due to the likelihood of limited information as to the origin of the causal agents.

2. Verification and Response

Trenton Dispatch/Communication Center will notify the regional supervisor or duty officer of either NJDEP: Division of Water Monitoring, Standards and Pesticides Control; Bureau of Environmental Analysis, Restoration and Standards if the incident involves coastal-based medical waste or NJDEP: Division of Waste and UST Compliance and Enforcement; Bureau of Hazardous Waste Compliance and Enforcement if the incident involves inland-based medical waste.

The NJDEP: Division of Water Monitoring, Standards and Pesticides Control; Bureau of Environmental Analysis, Restoration and Standards or NJDEP: Division of Waste and UST Compliance and Enforcement; Bureau of Hazardous Waste Compliance and Enforcement, as the responding agency, will assume the lead for the verification and planning of the response action, as appropriate. The responding agency will contact the local or county officials or will conduct a field investigation to verify the nature and extent of the incident. The description (type, location, extent) of the incident will determine the type of response action.

- a. For coastal-based incidents, the NJDEP: Division of Water Monitoring, Standards and Pesticides Control; Bureau of Environmental Analysis, Restoration and Standards will take the actions needed to assure public health and safety at all public recreational bathing beaches by responding to possible medical waste incidents occurring in tidal waters of the State and notifying the public when necessary. Quick response and coordination are essential between the NJDEP, NJDOH, and local health agencies to close beaches to protect public health and safety.
- If the medical waste contains any labels or markings that identify the generator, the NJDEP: Division of Water Monitoring, Standards and Pesticides Control; Bureau of Environmental Analysis, Restoration and Standards will notify the local health authority, NJDEP: Division of Waste and UST Compliance and Enforcement; Bureau of Hazardous Waste Compliance and Enforcement, NJDOH, and New Jersey Department of Law and Public Safety: Division of Criminal Justice to investigate the generator.
 - A description of the action needed to respond to coastal-based incident reports involving possible medical waste is included in “Beaches Emergency Response Plan for Possible Medical Waste” (Attachment 10).
- b. For inland incidents the NJDEP: Division of Waste and UST Compliance and Enforcement; Bureau of Hazardous Waste Compliance and Enforcement will respond to determine the extent of the incident.

- If the incident is a non-Emergency, after evidentiary issues are addressed and if a responsible party cannot quickly be located, the NJDEP: Division of Waste and UST Compliance and Enforcement; Bureau of Hazardous Waste Compliance and Enforcement will coordinate with local and county environmental health agencies (CEHA) to collect the material and arrange for disposal.
- If the incident is an Emergency and no cooperative responsible party is evident, the NJDEP: Office of Emergency Management; Bureau of Emergency Response will be called to effectuate cleanup and disposal via an emergency contractor.

A description of the action needed to respond to inland-based reports involving possible medical waste is included in “Regulated Medical Waste (RMW) Response Protocol” (Attachment 9).

3. Response to Community Exposures

Community exposures should be referred to a physician (e.g., an urgent care facility, hospital emergency department, an exposed person's personal physician, or an infectious disease specialist) for possible post-exposure treatment.

4. Disposal of Medical Wastes

For all incidents, once safely and appropriately contained, governmental agencies in New Jersey may dispose of medical waste at their registered public health clinic, through a hospital (Attachment 9) that has agreed to accept the material for disposal as part of their Regulated Medical Waste disposal process. For guidance on collection, removal, and disposal of medical wastes in shoreline wash-ups refer to “DOH 2025 Medical Waste Wash-Ups letter” (Attachment 8).

All abandoned medical waste should be disposed of as Regulated Medical Waste unless the responding agency definitively classifies it as non-Regulated Medical Waste. Any incidents involving narcotics shall be immediately reported to law enforcement (New Jersey Department of Law and Public Safety: Division of Criminal Justice, State and/or local police) and managed under their guidance.

5. Data Collection

- a. The Medical Waste Incident will be tracked in the NJDEP’s data management system (NJEMS) by Trenton Dispatch/NJDEP Communications Center.
- b. The NJDEP: Division of Waste and UST Compliance and Enforcement; Bureau of Hazardous Waste Compliance and Enforcement will maintain records of incidents that were referred to their Bureau.

INTERAGENCY CONTACTS - AGENCY TELEPHONE NUMBERS

Revised September 2025

DEPARTMENT OF ENVIRONMENTAL PROTECTION:

Division of Sustainable Waste Management

- Bureau of Recycling and Hazardous Waste Management
 - Dana Lawson, Chief (609) 984-3438
 - General medical waste inquiries (609) 292-7081, press 4 at the prompt
- Bureau of Solid Waste Planning & Licensing
 - Jill Aspinwall, Section Chief (609) 984-4250

Division of Waste & UST Compliance and Enforcement

- Bureau of Hazardous Waste Compliance and Enforcement
 - Bob Gomez, Chief (609) 439-9397
 - Amy Scaffidi (609) 439-9651
 - Jeff Salabritas (856) 614-3650
 - Martin Sanchez (609) 439-9649
 - Paula Hanley-Tagliaferri (609) 439-9638
- Bureau of Solid Waste Compliance and Enforcement
 - Tom Farrell, Chief (609) 439-9361

Division of Water Monitoring, Standards and Pesticide Control

- Bureau of Environmental Analysis, Restoration and Standards
 - Sheri Shifren (609) 940-4823
 - Marina Reid (609) 954-5604

Emergency Management Program

- Robert Van Fossen (609) 633-2168
- Bureau of Communication and Response Services
 - Environmental Hotline 1-877-WARN-DEP
 - Harry Wertz (609) 588-2848

Press Office

- Larry Hajna (609) 984-1795

DEPARTMENT OF HEALTH:

Public Health Services Branch, CEOHS/PHFPP

- Main Number (609) 826-4935
- Danielle Clemons (609) 913-5115
- Di Li (609) 913-5113
- Alan Talarsky (609) 913-5152
- Loel Muetter (609) 913-5162

DEPARTMENT OF LAW AND PUBLIC SAFETY:

Division of Criminal Justice

- Environmental Crimes Bureau
 - Duty Officer (609) 960-7944 - primary contact (emergency and after hours)
 - Lt. Steve Ogulin (609) 468-2569 – primary contact confidential; (non-emergency office hours) and secondary contact (emergency and after hours)

Division of State Police

- All inquiries (609) 882-2000

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY:

Region II Headquarters

- Duty Officer (732) 548-8730

Click link below for Local Health Departments.

[Directory of Local Health Departments](#)

Click link below for Local Police Departments.

<https://www.njsacop.org/content.asp?contentid=66>

COUNTY SOLID WASTE MANAGEMENT OFFICIALS

Attachment 2

Last Updated Apr. 2025

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CAPE MAY

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conturojr@cmcmua.com

CUMBERLAND

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Millville, NJ 08332
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ESSEX

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Acting Executive Director
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Tom Sullivan, Solid Waste Administrator
Gloucester County Improvement Authority
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Hudson County Improvement Authority
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(201) 324-6206 (fax)
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HUNTERDON

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MERCER

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MIDDLESEX

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PASSAIC

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SALEM

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SUSSEX

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CONFIDENTIAL

Phone List for After-Hours Contacts

(Updated April 2025)

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TELEPHONE: (609) 984-6500

PHILIP D. MURPHY
Governor

TAHESHA L. WAY
Lt. Governor

MATTHEW J. PLATKIN
Attorney General

THERESA L. HILTON
Director

TO: Chiefs of Police/Environmental Liaison Officers

FROM: SDAG Amy Sieminski
Environmental Crimes Bureau

DATE: March 11, 2025

SUBJECT: Medical Waste Wash-ups - 2025 Shore Season

I have reviewed the attached policies and procedures for multi-agency response to incidents of medical waste wash-ups and respectfully urge you to do the same. The notification and information management procedures established in the attached guidance document must be strictly adhered to in order to ensure that all episodes are handled uniformly and efficiently.

Once floatable debris, including any possible medical type waste, has washed onto shore, local officials should ensure that the material is cleaned up promptly and placed in a secure location where it can be examined by health and/or law enforcement officials. The debris can then be properly disposed of IF it is not required to be maintained as evidence. Storage, collections, cleanup and disposal of regulated medical waste type waste and floatable debris should be handled as set forth in the Interagency Protocol. It should be noted, however, that if the waste is regulated medical waste, it must be maintained as evidence until the conclusion of any investigation or resulting prosecution.

I thank you for your past cooperation and commend your efforts and dedication to this project. Should you have any questions, feel free to contact Lieutenant Steven Ogulin at (609) 468-2569 or me at (609) 696-4488.

Amy Sieminski, SDAG
Environmental Crimes Bureau
Division of Criminal Justice



INCIDENT NOTIFICATION REPORT FORM

Received Date

Received Time

Operator ID

CC# (YEAR-MONTH-DAY-TIME-SEC)

REPORTER SECTION

Reporter Type

Organization

Reporter Name

Phone

Address

Municipality

County

State

Zip

Comments

DESCRIPTION SECTION

Incident Description

Location Description

Block/Lot (if applicable)

Incident Location

Incident Address

Municipality

County

State

Zip

Injuries

Public Exposure

Public Evacuation

Facility Evacuation

Police on Scene

Fire Dept on Scene

Road Closure

If Yes, Road Name

DEP Requested

CC Type

Date Occurred

Time

Incident Status

Incident Source (Name/Business)

Address

Municipality

County

State

Zip

Contact Name

Phone

SUBS & IMPACTS

ID

Substance Released

Amount

Measurement

State

Substance Contained

Substance Released

Amount

Measurement

State

Substance Contained

Substance Released

Amount

Measurement

Contamination of

Watershed Name/Body of Water

ACTION SECTION/AFFILIATION

Contact Type

Lead Organization

Name

Time

A310 Notification - Name

Time

Organization

Name

Time

Organization

Name

Time

Organization

Name

Time

Organization

Name

Time

Organization

Name

Time

Organization

Name

Time

Organization

Name

Time

Organization

Name

Time

Click link below for Local CEHA Directory.

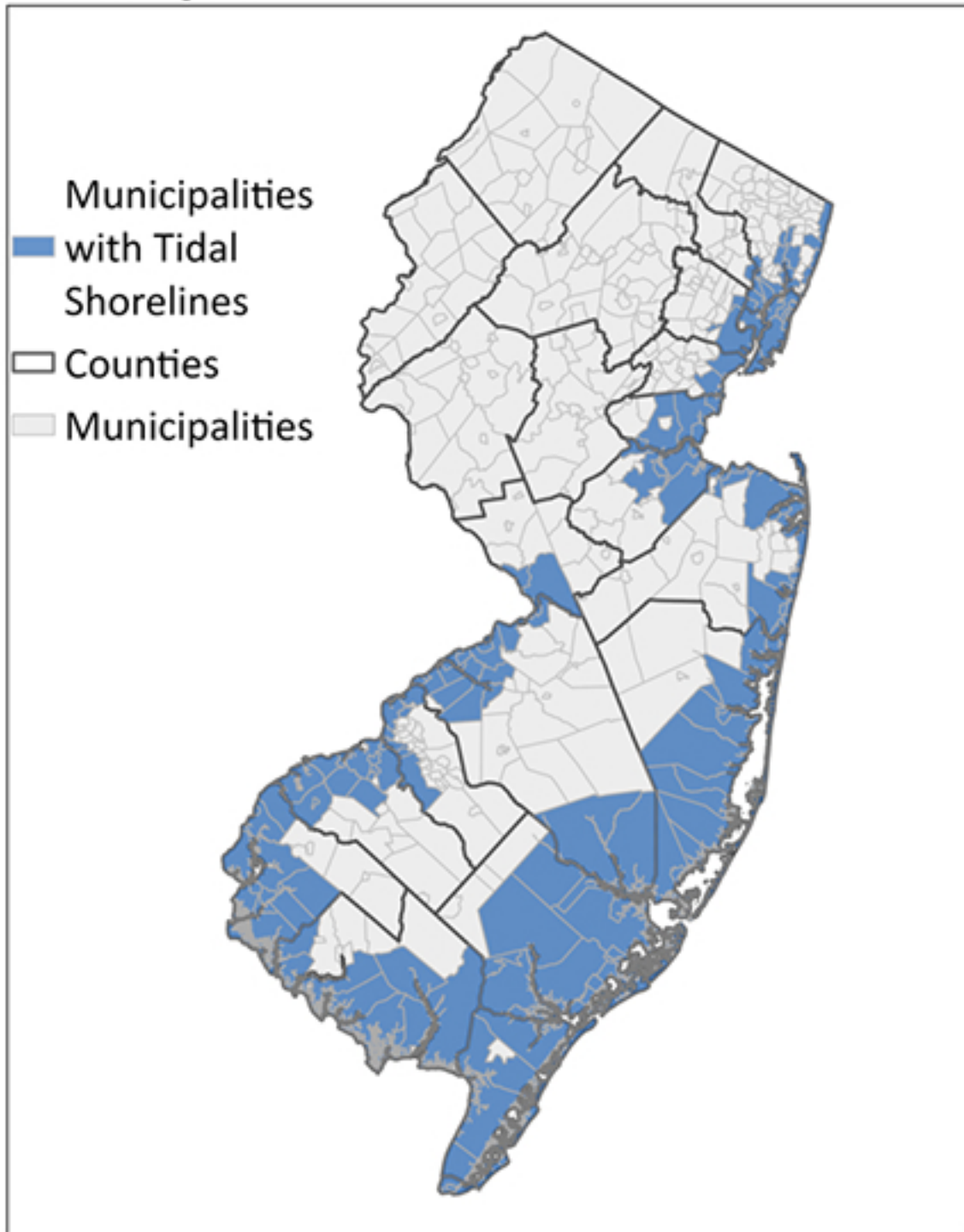
<https://dep.nj.gov/wp-content/uploads/get-past-plastic/docs/ceha-agency-directory.pdf>

Hotline Areas of Concern

Division of Water Monitoring, Standards and Pesticide Control

Operational Procedure #25 Areas of Concern

Municipalities with Tidal Shorelines



Operational Procedure #25 - Areas of Concern

Atlantic County
Absecon
Atlantic City
Brigantine
Corbin City
Egg Harbor City
Egg Harbor Township
Estell Manor
Galloway Township
Hamilton Township
Linwood
Longport Borough
Margate City
Mullica Township
Northfield
Pleasantville
Port Republic
Somers Point
Ventnor City
Weymouth Township
Bergen County
Alpine Borough
Bogota Borough
Carlstadt Borough
East Rutherford Borough
Edgewater Borough
Englewood Cliffs Borough
Fort Lee Borough
Garfield
Hackensack
Little Ferry Borough
Lyndhurst Township
New Milford Borough
North Arlington Borough
Ridgefield Borough
Ridgefield Park Village
River Edge Borough
Rutherford Borough
Teaneck Township
Tenafly Borough
Wallington Borough
Burlington County
Bass River Township

Burlington County
Beverly
Bordentown
Bordentown Township
Burlington
Burlington Township
Cinnaminson Township
Delanco Township
Delran Township
Edgewater Park Township
Fieldsboro Borough
Florence Township
Hainesport Township
Moorestown Township
Mount Laurel Township
Palmyra Borough
Riverside Township
Riverton Borough
Washington Township
Westampton Township
Willingboro Township
Camden County
Bellmawr Borough
Brooklawn Borough
Camden
Gloucester City
Gloucester Township
Pennsauken Township
Runnemede Borough
Cape May County
Avalon Borough
Cape May
Cape May Point Borough
Dennis Township
Lower Township
Middle Township
North Wildwood
Ocean City
Sea Isle City
Stone Harbor Borough
Upper Township
West Cape May Borough
West Wildwood Borough
Wildwood
Wildwood Crest Borough

Cumberland County
Commercial Township
Downe Township
Fairfield Township
Greenwich Township
Lawrence Township
Maurice River Township
Millville
Stow Creek Township
Essex County
Belleville Township
Newark
Gloucester County
Deptford Township
East Greenwich Township
Greenwich Township
Logan Township
Mantua Township
Paulsboro Borough
Swedesboro Borough
West Deptford Township
Westville Borough
Woodbury
Woodbury Heights Borough
Woolwich Township
Hudson County
Bayonne
Hoboken
Jersey City
Kearny
North Bergen Township
Secaucus
Union City
Weehawken Township
West New York
Mercer County
Hamilton Township
Trenton
Middlesex County
Carteret Borough
East Brunswick Township
Edison Township
Highland Park Borough

Middlesex County
New Brunswick
Old Bridge Township
Perth Amboy
Sayreville Borough
South Amboy
South River Borough
Woodbridge Township
Monmouth County
Aberdeen Township
Allenhurst Borough
Asbury Park
Atlantic Highlands Borough
Avon-by-the-Sea Borough
Belmar Borough
Bradley Beach Borough
Brielle Borough
Deal Borough
Fair Haven Borough
Hazlet Township
Highlands Borough
Keansburg Borough
Keyport Borough
Lake Como Borough
Little Silver Borough
Loch Arbour Village
Long Branch
Manasquan Borough
Middletown Township
Monmouth Beach Borough
Neptune City Borough
Neptune Township
Oceanport Borough
Red Bank Borough
Rumson Borough
Sea Bright Borough
Sea Girt Borough
Spring Lake Borough
Spring Lake Heights Borough
Union Beach Borough
Wall Township

Ocean County
Barneget Light Borough
Barneget Township
Bay Head Borough
Beach Haven Borough
Beachwood Borough
Berkeley Township
Brick Township
Eagleswood Township
Harvey Cedars Borough
Island Heights Borough
Lacey Township
Lavallette Borough
Little Egg Harbor Township
Long Beach Township
Mantoloking Borough
Ocean Township
Pine Beach Borough
Point Pleasant Beach Borough
Point Pleasant Borough
Seaside Heights Borough
Seaside Park Borough
South Toms River Borough
Stafford Township
Surf City Borough
Toms River Township
Tuckerton Borough
Passaic County
Passaic
Salem County
Alloway Township
Carneys Point Township
Elsinboro Township
Lower Alloways Creek Township
Mannington Township
Oldmans Township
Penns Grove Borough
Pennsville Township
Quinton Township
Salem
Union County
Elizabeth
Linden

Regulated Medical Waste as defined at N.J.A.C. 7:26-3A.6:

- (a) A regulated medical waste is any solid waste, generated in the diagnosis, treatment (for example, provision of medical services), or immunization of human beings or animals, in research pertaining thereto, or in the production or testing of biologicals, that is not excluded or exempted under (b) below, and that is listed or meets any waste characteristic classification criteria described in the following table:

REGULATED MEDICAL WASTE

Waste Class	Description
1. Cultures and Stocks	Cultures and stocks of infectious agents and associated biologicals, including: cultures from medical and pathological laboratories; cultures and stocks of infectious agents from research and industrial laboratories; wastes from the production of biologicals; discarded live and attenuated vaccines; and culture dishes and devices used to transfer, inoculate, and mix cultures.
2. Pathological Wastes	Human pathological wastes, including tissues, organs, and body parts and body fluids that are removed during surgery or autopsy, or other medical procedures, and specimens of body fluids and their containers.
3. Human Blood and Blood Products	Liquid waste human blood; blood; items saturated and/or dripping with human blood; or items that were saturated and/or dripping with human blood that are now caked with dried human blood; including serum, plasma, and other blood components, and their containers, which were used or intended for use in either patient care, testing and laboratory analysis or the development of pharmaceuticals. Intravenous bags (only if they have come into contact with blood or other regulated body fluid), soft plastic pipettes and plastic blood vials are also included in this category.
4. Sharps	Sharps that were used in animal or human patient care or treatment or in medical research, or industrial laboratories, including sharp, or potentially sharp if broken, items such as, but not limited to, hypodermic needles, all syringes to which a needle can be attached (with or without the attached needle) and their components, including those from manufacturing research, manufacturing and marketing, pasteur pipettes, scalpel blades, blood vials, carpules, needles with attached tubing, acupuncture needles and culture dishes (regardless of presence of infectious agents). Also included are other types of broken or unbroken glassware that were in contact with infectious agents, such as used slides and cover slips.
5. Animal Waste	Contaminated animal carcasses, body parts, and bedding of animals that were known to have been exposed to infectious agents during research (including research in veterinary hospitals), production of biologicals, or testing of pharmaceuticals. Carcasses that are not known to have been exposed to agents infectious to humans are considered Waste Type ID 25, and, therefore, are not included in this class.
6. Isolation Wastes	Biological waste and discarded materials contaminated with blood, excretion, exudates, or secretions from humans who are isolated to protect others from certain highly communicable diseases, or isolated animals known to be infected with highly communicable diseases.
7. Unused Sharps	The following unused, discarded sharps, that were intended to be used: hypodermic needles, suture needles, syringes, and scalpel blades.

(b) The following are excluded from the definition of regulated medical waste:

1. Hazardous waste identified or listed under the regulations in 40 C.F.R. Part 261;
2. Household waste, generated in households utilizing home self-care as defined in N.J.A.C. 7:26-3A.5(b);
3. Ash from incineration of regulated medical waste once the incineration process has been completed;
4. Residues from treatment and destruction processes once the regulated medical waste has been both treated and destroyed;
5. Human corpses, remains and anatomical parts that are intended for interment or cremation;
6. Biological materials, including, but not limited to, those blood or blood products and pathological waste listed at (a)2 and 3 above, intended for use, reuse, or recycling as raw materials or products, except materials classified as Class-6 Isolation Wastes, pursuant to (a)6 above if the following conditions are met:
 - i. The materials are used, reused or recycled in accordance with all applicable Federal, State and local statutes and regulations for handling and managing the materials;
 - ii. The materials and their by-products are managed as regulated medical waste when discarded after use, reuse or recycling if not treated and destroyed as those terms are defined at N.J.A.C. 7:26-3A.5; and
 - iii. The generator of the materials reports the type, destination, and method of use, reuse, or recycling of the materials to the Bureau of Recycling and Hazardous Waste Permitting in the Division of Solid and Hazardous Waste at the address given at N.J.A.C. 7:26-3A.8(f)4 and the district solid waste coordinator of the district where the material originated at least once per year, or on request of the Department or any other agency;
7. Nonbiological materials intended for use, reuse, or recycling, except materials classified as Class-6, Isolation Waste pursuant to (a)6 above, if the following conditions are met:
 - i. The generator treats all used materials, or any unused materials, that have come into contact with a regulated body fluid or blood, or pathological waste as defined at (a) above at the site of generation before shipping the materials off site;
 - ii. The generator destroys all sharps at the site of generation before shipping the destroyed sharps off site for recycling of the devices' component raw materials; and
 - iii. The generator of the materials reports the type, quantity, destination, and method of use, reuse, or recycling of the materials to the Bureau of Recycling and Hazardous Waste Management in the Division of Solid and Hazardous Waste at the address given at N.J.A.C. 7:26-3A.8(f)4 and the district solid waste coordinator of the district where the material originated at least once per year, or on request of the Department or any other agency; and
8. RMW, or non-regulated medical waste managed as RMW, that is either generated by a person and is less than 100 pounds or has become the property of a person other than the original generator except through the sale or transfer of assets, and where such person has not generated RMW within a two year period prior to requesting the exemption nor to the best of their knowledge plans to generate RMW in the future, may have a "one time only" exemption from registering as a generator and may offer RMW to a licensed RMW transporter using its own number as the generator number. The Department shall issue an authorization for this exemption in response to written notification sent to the address listed at N.J.A.C. 7:26-3A.8(f)4 prior to the disposal of the RMW in order for a one-time exemption of this type to be valid. Authorizations for registration exemption will not be granted to persons the Department expects will generate RMW in the future.

(c) The following are exempted from the definition of regulated medical waste:

1. Etiologic agents being transported interstate pursuant to the requirements of the U.S. Department of Transportation, U.S. Department of Health and Human Services, and all other applicable shipping requirements are exempt from the requirements of this subchapter; and
2. Samples of regulated medical waste transported off-site by the EPA, the Department, the Department of Health or the New Jersey Department of Law and Public Safety for enforcement purposes are exempt from the requirements of this subchapter during the enforcement proceeding.

(d) In accordance with NJDOH rules (N.J.A.C. 8:27), body art establishments shall comply with the provisions of N.J.S.A. 13:1E-48.1 et seq., the Comprehensive Regulated Medical Waste Management Act, and all rules promulgated pursuant to the aforementioned Act.

(e) Acupuncturists shall comply with the provisions of N.J.S.A. 13:1E-48.1 et seq., the Comprehensive Regulated Medical Waste Act, and all rules promulgated pursuant to the aforementioned Act.



State of New Jersey
DEPARTMENT OF HEALTH
CONSUMER, ENVIRONMENTAL
AND OCCUPATIONAL HEALTH SERVICE

PHILIP D. MURPHY
Governor

TAHESHA L. WAY
Lt. Governor

PO BOX 369
TRENTON, N.J. 08625-0369

www.nj.gov/health

KAITLAN BASTON, MD, MSc, DFASAM
Commissioner

March 3, 2025

To Whom it May Concern:

In New Jersey, the monitoring, surveillance, and investigation of water quality conditions of bathing waters are primarily the responsibility of the local and county health officials located within the jurisdiction of the water body. These primary efforts are augmented, whenever necessary, by the Department of Environmental Protection (DEP), Department of Law and Public Safety Divisions of Criminal Justice and State Police and the Department of Health (DOH).

In preparation for the upcoming public recreational bathing season, the DOH is disseminating information on the proper handling and disposal of medical wastes that may wash-up on New Jersey's bathing beaches. The following documents specify the actions to be taken in such instances:

- o Safeguards to Be Employed in the Collection, Removal, and Disposal of Medical Wastes Involved in Beach Wash-up Incidents
- o Policies and Procedures Governing Multi-Agency Response and Coordination to Medical Waste Wash-up Incidents.

These documents supersede any previously distributed procedures on this issue and are being distributed to the appropriate authorities.

Should you have any questions or concerns, feel free to contact me at (609) 826-4920. Thank you for your continued cooperation and assistance.

Sincerely,

Loel Muetter

Loel Muetter, M.A., H.O. Director
Consumer, Environmental and Occupational Health
Service

Enclosures

c: Alan Talarsky, Program Manager
Danielle Clemons, PRB Project Coordinator

POLICIES AND PROCEDURES GOVERNING MULTI AGENCY RESPONSE AND COORDINATION TO MEDICAL WASTE WASH-UP INCIDENTS

Revised: March 2023

NOTIFICATION AND INFORMATION MANAGEMENT

- All incidents of medical waste strandings or sightings shall be reported as soon as practicable directly to the **Department of Environmental Protection's Environmental Hotline (“Trenton Dispatch”) at 1-877-WARNDEP (877-927-6337)**. The Division of Criminal Justice, Environmental Crimes Bureau shall be contacted only with respect to material having evidentiary value as set forth in paragraph 2 (next page) under the section entitled “Material Storage, Collection, and Disposal”. Trenton Dispatch will maintain the central state registry for these incidents.
- The following information shall be provided during this notification:
 1. Time, date, and location of stranding/sighting.
 2. Type and amount of material involved.
 3. Name, telephone number, and affiliation of contact person.
 4. Any of the circumstances listed below should also be reported to the Environmental Hotline:
 - Citizen exposure to medical waste. Needlestick, punctures to the skin, mucous membrane exposures should **immediately seek medical treatment**
 - Medical wastes that may have value as evidence (identifying markings indicating source or point of origin) or are unusual materials such as blood vials or laboratory wastes. In these situations, the cases would be referred by the Department of Environmental Protection (DEP) to the Division of Criminal Justice who will coordinate with the appropriate enforcement agencies.
 - Any request for technical guidance or manpower assistance should also be communicated to the DEP dispatcher.

STATE RESPONSE

Once initial notification is made to the Environmental Hotline, the information will be provided to a DEP Duty Officer who will assess the situation to determine the appropriate level of state response. The DEP Duty Officer will also notify the applicable state agencies [e.g., Division of Criminal Justice, Department of Health (DOH), etc. when appropriate and necessary.]

MATERIAL STORAGE, COLLECTION, AND DISPOSAL

As outlined above, basically three categories of medical waste may present for action: 1) routine medical waste material; 2) material having evidentiary value; and 3) medical waste causing citizen exposure and/or injury.

1. Routine medical waste, that is, incidental materials that periodically wash-up but do not fall into the other two categories, shall be stored in a safe and secure manner (refer to enclosed guidelines). If and when an accumulation of this type of medical waste occurs, the local police or local health department should be notified.
2. Material having evidentiary value shall be referred to the Division of Criminal Justice, Environmental Crimes Bureau. The materials shall be securely stored, separate from other materials, and rules of evidence management, including chain of custody, shall be initiated. A state investigator will be dispatched to retrieve the material in a timely fashion.
3. Medical waste causing exposure or injury shall be kept separate and securely stored. If an individual experiences a needle stick injury or were exposed to the blood or other body fluid they should
 1. Be directed to **immediately seek medical treatment.**

SAFEGUARDS TO BE EMPLOYED IN THE COLLECTION, REMOVAL, AND DISPOSAL OF MEDICAL WASTES INVOLVED IN BEACH WASH-UPS

Revised March 2023

A. INTRODUCTION

This document outlines activities local health, beach or other responding officials should take when addressing floatable medical waste debris wash-ups on New Jersey beaches. The guidance was developed to minimize the potential risks associated with such activities. It must be emphasized that this guidance is only applicable to incidents requiring the handling of medical waste as a result of floatable medical waste debris wash-ups and should not be applied to situations where exposure to medical waste is occupationally related (e.g., health care workers, emergency medical personnel, law enforcement, etc.) where the types of exposure and degree of risk may be different.

B. EVIDENCE COLLECTED AND PRESENTED BY INDIVIDUALS

a) Injury Assessment of Individual if applicable

1. Assess the individual for a parenteral exposure or injection type of injury (Ex: needle puncture, laceration, fluid contact with an existing open sore or wound) may have occurred. Incidental punctures by contaminated needles can inject hazardous fluids into the body through the skin. Even small amounts of infectious fluid can spread certain diseases effectively. If an individual experiences a needlestick injury or were exposed to the blood or other body fluid:
 - Wash needlesticks and cuts with soap and water
 - Flush splashes to the nose, mouth, or skin with water
 - Irrigate the eyes with clean water, saline, or sterile solution
 - **Immediately seek medical treatment**
2. An individual with direct contact with the material and who has not been suspected of sustaining a needlestick injury should:
 - Wash their hands or other body parts that encountered the material with soap and water.

b) Reporting

Recording the event is important in order for officials to discover the source to prevent future incidents. When medical waste is presented to you by individuals be sure to:

- Document the date, time, and location of the sighting or

stranding

- Type and amount of material involved.
- Name, telephone number, and affiliation of investigator
- Report the incident to the Department of Environmental Protection's ("**Central Dispatch**") **Environmental Hotline at 1-877-WARNDEP (1-887-927-6337)**.
- For needle stick injuries immediately seek medical attention

C. COLLECTION OF MEDICAL WASTE

Direct contact with medical waste material should be avoided. Shovels and rakes should be used when a manual cleanup is necessary. Forceps are extremely useful since they eliminate the need for direct contact and provide the dexterity needed for evidence collection and site remediation. If direct contact cannot be avoided, protective gloves (puncture resistant and impervious) should be issued and worn.

Adhere to the policies and procedures established by the Department of Environmental Protection [for the storage and disposal of medical waste and other floatable debris](#). All medical waste should be stored in rigid, puncture proof, labeled, and covered containers pending final disposition. During cleanup activities, cleanup crews should be supervised by an adult and instructed to wear appropriate footwear and foot protection. Barefoot cleanup should be avoided. Personnel should be briefed on the standard operating procedures and safeguards prior to commencing such activities.

D. MEDICAL CONCERNS

Incidental exposure to medical waste may be due to the type of medical waste and the exposure the individual sustained. Incidental punctures by contaminated needles are particularly hazardous because injection can facilitate hazardous fluids into the body through the skin. Even small amounts of infectious fluid can spread diseases like [Hepatitis B & C](#), [HIV](#) and [Tetanus](#) effectively. Needlestick injuries are preventable. Please visit the [CDC for more information on risk reduction](#).

E. ASSISTANCE UPON REQUEST

The New Jersey Department of Health-Public Recreational Bathing Project can offer support to local health officials upon request. Please contact us at 609-913-5115. After hours including weekends we can be reached at (609) 392-2020.

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Regulated Medical Waste (RMW) Response Protocol

(July 2024)

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BEACHES
EMERGENCY RESPONSE PLAN FOR POSSIBLE MEDICAL
WASTE
WATER RESOURCE MANAGEMENT
DIVISION OF WATER MONITORING, STANDARDS AND
PESTICIDE CONTROL
BUREAU OF ENVIRONMENTAL ANALYSIS,
RESTORATION AND
STANDARDS March 19, 2024

1.0 OBJECTIVE

The objective of this procedure is to ensure public health and safety at all public recreational bathing beaches by responding to possible medical waste incidents occurring in tidal waters of the State and notifying the public when necessary. Quick response and coordination are essential between the Department of Environmental Protection, Department of Health and local health authorities in order to close beaches to protect public health and safety.

2.0 PURPOSE

This document is intended to provide a description of the actions needed to respond to incident reports involving possible medical waste. Proper coordination will ensure a timely closure of a recreational bathing beach in an emergency. The New Jersey State Sanitary Code Chapter IX, Public Recreational Bathing Rule (N.J.A.C. 8:26) can be found at: <https://www.nj.gov/health/ceohs/documents/phss/recbathing.pdf>.

The scenarios covered by this document include procedures for responding to possible medical waste incidents occurring in tidal waters. Each event is unique and lessons are learned each time the Bureau responds to emergencies. Therefore, this is a document that will be routinely updated based on the current available information and research related to emergency response.

3.0 INCOMING NOTIFICATION OF AN INCIDENT

3.1 Notification of an incident may come from the DEP Communication Center (hotline).

3.2 Notification of an incident may come directly to the Bureau of Environmental Analysis, Restoration and Standards from local health authorities or other government entities or residents. In this case, the complainant reporting the incident should be directed to report the incident to the hotline, 1 (877) WARNDEP (1-877-927-6337).

4.0 TYPES OF POSSIBLE MEDICAL WASTE INCIDENTS AND ACTIONS

4.1 Syringes - Most syringe washups are considered household waste, generated by households utilizing home-self care such as diabetic or recreational use type syringes. This waste is not considered regulated medical waste since it did not originate from a medical waste generator such as a hospital or doctor's office. These syringes usually come from improper disposal (flushing down the toilet) of home diabetic syringes or street drug users dropping needles on the street or down storm drains.

4.1.1 Environmental Analysis, Restoration and Standards staff will verbally notify the appropriate local health authority. For a large or significant washup (i.e. more than 1 beach affected, or more than 10 syringes found), the Environmental Analysis, Restoration and Standards staff will also contact the Director of Water Monitoring, Standards and Pesticides Control, the Department of Health, and Office of Criminal Justice. The Director of Water Monitoring, Standards and Pesticide Control will contact the Assistant Commissioner of Water Resource Management. Staff will determine whether the syringes were found along the high tide line with other floatable material (tampon applicators, floatable wood debris, grease balls etc.) which may indicate a combined sewer overflow. The local health authority will coordinate the cleanup with local public works crews. All attempts will be made to remove syringes to avoid closing a beach.

Needle Stick – Environmental Analysis, Restoration and Standards staff will verbally notify the appropriate local health authority. They will contact the victim and provide counsel on treatment.

Note: If a caller finds a syringe on the beach, the syringe can be placed in a container such as a plastic bottle with a lid and placed in the trash for disposal.

4.2.2 Environmental Analysis, Restoration and Standards staff will notify the appropriate Hazardous Waste Regional Field Office for all received syringe notifications that are not of concern for coastal recreational bathing beaches.

4.2 Medical Waste – a washup of true medical waste such as IV bags, examination gloves, tubing, syringes with identifiers or associated with other medical waste is potentially a criminal dumping event.

4.2.1 If the complainant is a citizen reporting medical waste, Environmental Analysis, Restoration and Standards staff will call them back to get a detailed description of the washup, location and any other details. Note: Citizens often mistake household waste items for medical waste.

- 4.2.2 Environmental Analysis, Restoration and Standards staff will verbally notify the appropriate local health authority, the Director of Water Monitoring, Standards and Pesticide Control, appropriate Hazardous Waste Regional Field Office, Department of Health, and Office of Criminal Justice. The Director of Water Monitoring, Standards and Pesticide Control will contact the Assistant Commissioner of Water Resource Management. Beaches will be closed, if necessary, and cleanup and investigation will be conducted by all agencies.
- 4.3 In the event of a major incident, Environmental Analysis, Restoration and Standards staff can request an overflight of the area by the NJ Forest Fire Service with a DEP coastal flight observer to determine the extent of the debris field (See attached contact list for NJ Forest Fire Service contacts at Coyle Field), and/or request boat captains and other field staff from the Bureau of Marine Water Monitoring to provide support to local responders. Other tools such as rainfall, tides, surface and wind currents and directions may also be used to predict impact and duration.

5.0 NOTIFYING THE PUBLIC

5.1 Website – njbeaches.org

5.1.1 The public website is updated daily by local health authorities and Environmental Analysis, Restoration and Standards staff through the beaches administration portal to display the status of all beaches, and any emergency beach or beach notification information.

5.1.1.1 Environmental Analysis, Restoration and Standards staff will also update the public webpage through the administration portal with daily flight observations.

5.2 Beach Information on X

5.2.1 The Office of Communications sends out daily Beach Report posts from @NJBeachReport during the week.

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Memorandum

Communications Center Operational Procedure #25
Coastal Pollution and Medical Waste Notifications/Complaints

(March 2024)

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Memorandum

Communications Center SOP #25 – Amendment
Coast Pollution and Medical Waste Notification/Complaints
Off Season Notifications

(Amended October 2023)

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Communications Center Operational Procedure #25 (Amended)
Coastal Pollution and Medical Waste Notification/Complaints
Bathing Season Verbal Notifications

(Amended March 2024)

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Communication Center Operational Procedure #30
Highlands Act Building & Construction Violations

(March 2023)

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Memorandum

Communications Center Operational Procedure #42 (Amended)
Terrorist Threat, Suspicious Packages, & Security Breach Notifications

(Amended May 2023)

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Memorandum

Communications Center Standard Operational Procedure #53
Hazardous Waste/Hazardous Waste Transportation and Medical Waste Notifications in Non-
Coastal/Marine or Inland Public Areas

(March 2025)

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