

INLAND TRANSPORT COMMITTEE

Working Party on the Transport of Dangerous Goods

Joint Meeting of the RID Safety Committee and the
Working Party on the Transport of Dangerous Goods
(Geneva, 13-23 September 2005)

**HARMONIZATION WITH THE UN RECOMMENDATIONS ON THE TRANSPORT OF
DANGEROUS GOODS**

Belgian comments to document TRANS/WP.15/AC.1/2005/52

Comments

As Germany, Belgium sees advantages in linking the RID/ADR/ADN classification criteria for medical or clinical wastes to the European Waste Catalogue. The German proposals however present the following disadvantages :

1. Proposal 2 (the deletion of paragraph 2.2.62.1.11.2) changes a fundamental principle for the classification of medical and clinical wastes set out in the UN Model Regulations : in UN, according to paragraph 2.6.3.5.2, such wastes are automatically considered to be dangerous goods as long as they have not been decontaminated ; if the German proposal 2 is accepted, this will no longer be the case in RID/ADR/ADN.

2. The general classification principles explained in 2.2.62.1.11.1 are not questioned in the German paper, they remain valid. If the German proposal 1 would be accepted, these principles would no longer appear clearly in section 2.2.62 (resulting in difficulties with shipments from outside of Europe of medical or clinical wastes not classified according to the European system). It is preferable to retain the existing text and to introduce the German proposal as a note following the paragraph.

3. In proposal 3, the word “Decontaminated” has disappeared without reason ; it should be reinstated. Moreover this paragraph becomes very difficult to understand because it is a mixture of two entirely different cases :

- how to classify medical and clinical wastes that are dangerous under RID/ADR/ADN after decontamination, and
- how to classify medical and clinical wastes of EWC 18 01 04 and 18 02 03.

This should be avoided. Wastes of EWC 18 01 04 and 18 02 03 fall under the general description of 2.2.62.1.11.3 and should be dealt with there (whether the classification principle for this case is changed or not).

4. The note following 2.2.62.1.11.2 indeed serves no practical purpose ; the correct proper shipping names can be found in the same way as for all other dangerous substances.

Proposals

1. Add the following note under 2.2.62.1.11.1 :

NOTE : Medical or clinical wastes assigned to EWC 18 01 03 or 18 02 02 according to the "European Waste Catalogue", most recently amended by Commission Decision 2001/118/EC¹, are to be classified according to the principles set out in this paragraph, based on the medical or veterinary diagnosis concerning the patient or the animal.

2. Proposal 2 (the deletion of 2.2.62.1.11.2) is to be decided by the UN-Subcommittee of Experts on the transport of dangerous goods. Until such a decision is taken, this paragraph should remain unchanged.

3. Replace the note following 2.2.62.1.11.2 with :

NOTE : Medical or clinical wastes assigned to EWC 18 01 04 or 18 02 03 according to the "European Waste Catalogue", most recently amended by Commission Decision 2001/118/EC², shall be assigned to UN N° 3291.

[If the UN-Subcommittee would agree with the German point of view, this paragraph and note could become :

2.2.62.1.11.2 Medical or clinical wastes which are reasonably believed to have a low probability of containing infectious substances are not subject to the provisions of RID/ADR/ADN unless they meet the criteria for inclusion in another class.

NOTE : Medical or clinical wastes assigned to EWC 18 01 04 or 18 02 03 according to the "European Waste Catalogue", most recently amended by Commission Decision 2001/118/EC², fulfil the conditions of this paragraph.]

4. Paragraph 2.2.62.1.11.3 is to remain unchanged.

¹ Published in the EC Official Journal N° L.047/1 of 16 January 2001.

² Published in the EC Official Journal N° L.047/1 of 16 January 2001.