
Committee of Experts on the Transport of Dangerous Goods and on the Globally Harmonized System of Classification and Labelling of Chemicals

8 November 2021

Sub-Committee of Experts on the Transport of Dangerous Goods

Fifty-ninth session

Geneva, 29 November-8 December 2021

Item 11 of the provisional agenda

Unified interpretations of the Model Regulations

Packing instructions of COVID-19 dry waste

Transmitted by the expert from the Netherlands

Introduction

1. During the COVID-19 pandemic there is an increase in the transport of all kind of waste material related to COVID-19. This ranges from respiratory samples of the virus (e.g. nasal swabs) to waste material from hospitals. The World Health Organization (WHO) issued a biosafety guidance¹ in which it is stated that the patient specimens from suspected or confirmed cases should be transported as UN 3373 BIOLOGICAL SUBSTANCE, CATEGORY B while the viral cultures or isolates should be transported as UN 2814 INFECTIOUS SUBSTANCE, AFFECTING HUMANS.
2. However, there is no guidance from the WHO on the transport of medical waste related to COVID-19. In the Netherlands, the solid waste materials like patient's clothes, tissues, towels, urine bags, disposable items, bed linen, bed pads, and personal protective equipment of the (nursing) staff are transported as UN 3291 CLINICAL WASTE, UNSPECIFIED, N.O.S. or (BIO) MEDICAL WASTE, N.O.S. or REGULATED MEDICAL WASTE, N.O.S. The associated packing instructions P621, IBC620, and LP621 allow drums, boxes, jerricans, composites, rigid IBCs, and large rigid packagings to be used.
3. There have been issues with the packagings of the COVID-19 waste material from hospitals, care institutes and testing facilities in the Netherlands. Due to the sudden increase of the amount of medical waste, the number of packages offered for disposal grew too fast for the waste processor to keep up with. This led to an accumulation of packages with dangerous goods at the waste process facility. The packagings took too much time to be burnt which led to the accumulation. To prevent more delays and accumulation of packages at the waste process facility, the Netherlands issued an exemption (with special conditions) to use other types of packagings instead, which could be burnt easier and faster. This prevented the accumulation of packages with dangerous goods at the waste facilities. These included packages without a rigid outer packaging such as plastics bags. Until now, the Netherlands has made good experience with the use of plastics bags as an alternative packaging for the clinical dry waste.
4. Furthermore, apart from the other type of packagings used, all kinds of solid waste material used in the treatment of COVID-19 patients, were put together in one packaging. However, the hazard of these various materials may be different. It may therefore not be necessary to transport all these materials in the current prescribed packaging instructions. It may be necessary to distinguish between different types of hazardous materials. By doing so, other packagings may be used.

¹ <https://apps.who.int/iris/bitstream/handle/10665/331138/WHO-WPE-GIH-2020.1-eng.pdf>

Discussion

5. The expert from the Netherlands would like to know how other countries transported COVID-19 related waste and if they faced similar challenges with the packagings. If so, how have these problems been solved? Could other packagings, like plastics bags, be used as alternative packaging for dry clinical waste as mentioned above?
 6. Furthermore, the expert of the Netherlands would also like to hear the opinion of the Sub-Committee on whether all types of solid COVID-19 waste material should be considered as equally hazardous and thus be transported with the same packaging.
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