



## Medical Waste Pre-Application Questionnaire

Tulare County ♦ Environmental Health Services

Medical Waste Program

5957 S. Mooney Blvd, Visalia, CA, 93277

Phone (559) 624-7400

Fax (559) 687-6941

Facility Name:			Date:
Site Address (Number, Street):	City:	Zip:	Phone No.

Please check the appropriate response for the questions below.

1. Does your business or service generate any of the medical wastes listed below? yes \_\_\_\_\_ no \_\_\_\_\_

If your answer is no, please complete the certification statement on the 2<sup>nd</sup> page and return it along with the pre-application questionnaire to the address shown. ***You do not need to complete the remainder of this first page.***

### REGULATED MEDICAL WASTES

**Laboratory wastes** – specimen or microbiologic cultures, stocks of infectious agents, live and attenuated vaccines, and culture mediums.

- Blood or body fluids** – liquid blood elements or other regulated body fluids, or articles contaminated with blood or body fluids.
- Sharps** – syringes, needles, blades and broken glass.
- Contaminated animals** – animal carcasses, body parts and bedding materials.
- Surgical specimens** – human or animal parts or tissues removed surgically or by autopsy.
- Isolation waste** – waste contaminated with excretion, exudates, or secretions from humans or animals that are isolated due only to the highly communicable diseases listed by Centers for Disease Control as requiring Biosafety Level 4 precautions.\*

2. Do you generate 200 or more pounds per month of the types of **medical waste** listed above? yes \_\_\_\_\_ no \_\_\_\_\_

3. Do you generate less than 200 pounds per month of the types of **medical waste** listed above? yes \_\_\_\_\_ no \_\_\_\_\_

4. Are any of the above types of **medical waste** generated at off-site events (i.e. vaccination clinics, health fairs, etc.) that are coordinated by the parent company or facility? yes \_\_\_\_\_ no \_\_\_\_\_

If all of your answers to questions 2, 3, and 4 are no, please complete the certification statement on the 2<sup>nd</sup> page and return it along with the pre-application questionnaire to the address shown.

\* Biosafety Level 4 viruses and diseases include: Cong-Crimean hemorrhagic fever, Tick-borne encephalitis virus complex (Absettarov, Hanzalova, Hypr, Kumlinge, Kyasanur Forest disease, Omsk Hemorrhagic fever, and Russian Spring-Summer encephalitis), Marburg disease, Ebola, Junin virus, Lassa fever virus, Machupo virus.



## Certification for Non-Medical Waste Generators & Non-Treatment Facility

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*This is to be completed if your facility does not generate, store or treat Medical Waste.*

**Please mark the appropriate statement.**

- The facility **does not generate or store** any of the wastes specified on the Pre-Application Questionnaire as Regulated Medical Wastes.
  
- The facility **will not be treating** regulated medical waste by means of autoclaving, incinerating or microwaving.

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**I certify under penalty of perjury that the information contained in this application is true and accurate to the best of my knowledge and belief. I will also notify the Tulare County Environmental Health Services Division of any changes in the future.**

<b>Name of Responsible Person:</b>	<b>Title:</b>
<b>Signature:</b>	<b>Date:</b>

**Mail or fax form(s) to:**

Tulare County Environmental Health Services Division  
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Visalia, CA 93277  
Ph: (559) 624-7400  
Fax: (559) 687-6941