



**House
Legislative
Analysis
Section**

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INFECTIOUS MEDICAL WASTE

Senate Bill 1010 with House committee
amendments
First Analysis (12-7-88)

RECEIVED

Sponsor: Sen. Phil Arthurs
Senate Committee: Health Policy
House Committee: Public Health Mich. State Law Library

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THE APPARENT PROBLEM:

Heightened public awareness of AIDS and its transmission by blood, blood products or bodily fluids has raised the question of how infectious medical wastes are regulated by state and federal agencies. Public concerns over the issue were aroused by press reports of hospital waste being found in publicly accessible areas. In Indiana, children playing in a hospital trash bin reportedly discovered plastic bags of blood contaminated with the deadly AIDS virus, while beaches in New Jersey were forced to close as coastal waters filled with hospital waste. And in September, medical debris (including syringes, rubber gloves, and drug containers) was discovered along the Lake Michigan shore in Oceana and Mason counties, causing the beaches to be closed. A report by the Council of State Governments noted that Michigan was one of a handful of states with no specific requirements or even plans to impose regulations on disposal of hospital and medical wastes.

THE CONTENT OF THE BILL:

The bill would add a new section to Public Act 106 of 1963, which prohibits littering, to prescribe criminal penalties for littering violations involving medical waste.

Misdemeanor. If the violation involved litter produced at a health facility, agency, or laboratory (as defined by the Public Health Code), the violator would be guilty of a misdemeanor punishable by up to six months in prison and a fine of up to \$1,000.

Felony. If the violation involved litter that was infectious waste, pathological waste, or "sharps," the violator would be guilty of a felony punishable by up to two years in prison and a fine of up to \$5,000.

Definitions. The bill would define "infectious waste" (waste that contained microorganisms that could cause serious illness), "pathological waste" (body organs, tissues, parts, and fluids, whether or not they were infectious), and "sharps" (discarded hypodermic needles, syringes and scalpel blades, whether or not they were infectious).

MCL 752.903a

HOUSE COMMITTEE ACTION:

The House Public Health Committee amended the bill to strike the tie-bar with Senate Bill 1005, which defined "infectious waste," "pathological waste," and "sharps," and to add these definitions to the bill.

FISCAL IMPLICATIONS:

According to the Senate Fiscal Agency (9-27-88), the bill would have unknown fiscal implications for the state. It would expand the caseload for law enforcement, judicial,

and corrections agencies, but also would generate revenue through fines.

ARGUMENTS:

For:

The discovery of medical debris, including syringes containing insulin and blood, on Michigan beaches this past summer dramatized the need for state regulation of the disposal of such wastes. In a time when medical wastes can include deadly carcinogens or even AIDS-related viruses, those who dispose of such wastes should be closely regulated and severely punished if they fail to dispose of these wastes properly. Michigan's two major waste management laws, the Solid Waste Management Act and the Hazardous Waste Management Act, do not address the problems associated with medical waste disposal, so legislative action is urgently required. In fact, in a February 1988 survey, Michigan was one of only eleven states that indicated that it did not regulate infectious wastes and had no immediate plans to expand its regulations to include infectious wastes. Other states, large and small, are responding to both internal professional advice and public demand for such regulation, and Michigan should do so also.

Against:

The legislation is an overreaction to a nonexistent problem. Until the incidents in Oceana and Mason counties this past summer, there was no reason to suspect any particular problem existed. And even despite these two incidents, there is little reason to believe that the problem — which probably didn't even originate in Michigan — would have been prevented by more legislation and regulation. According to newspaper reports, it is unlikely that Michigan hospitals were responsible for the medical wastes that washed up on the shores of Lake Michigan in Oceana County, with some accounts suggesting that the waste originally came from Wisconsin. What is more, the syringes that were discovered were not considered highly infectious. Most contained insulin, while the two containing blood reportedly contained "nothing unusual." All had been in 62-degree water, moreover, which would decrease even further the chances of their being infectious. Finally, as one physician pointed out, most organisms cannot survive outside of human body tissue.

POSITIONS:

There are no positions on the bill.

S.B. 1010 (12-7-88)