



State of Ohio Environmental Protection Agency

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P.O. Box 1049  
Columbus, OH 43216-1049

May 29, 2009

Mr. Rodger Smith  
Director of Facility Services  
Fayette County Memorial Hospital  
1430 Columbus Avenue  
Washington Court House, OH 43160

Re: **Fayette Memorial Hospital**  
**Conditionally Exempt Small Quantity Generator**  
**OHR000007013**  
**Fayette County**  
**NOV/NOC**

Dear Mr. Smith:

Thank you for accompanying Phil Farnlacher, Division of Solid and Infectious Waste Management [DSIWM] and me during Ohio EPA's May 26, 2009, inspection of Fayette Memorial Hospital in Washington Court House, Ohio. We inspected Fayette Memorial Hospital to determine its compliance with Ohio's hazardous waste laws as found in Chapter 3734. of the Ohio Revised Code (ORC) and Chapter 3745. of the Ohio Administrative Code (OAC).

We found the following violations of Ohio's hazardous waste laws which were corrected the day of the inspection:

1. **OAC Rule 3745-273-14(A), Universal Waste Batteries:** Universal waste batteries or a container in which the batteries are contained, must be labeled or marked clearly with any of the following phrases: "Universal Waste battery(ies)," Waste Battery(ies), or "Used Battery(ies)".

Fayette Memorial Hospital failed to label or mark the batteries which were being managed as universal waste with the words Universal Waste Batteries, Waste Batteries, or Used Batteries.

Fayette Memorial Hospital abated this violation on the day of the inspection.

Ted Strickland, Governor  
Lee Fisher, Lieutenant Governor  
Chris Korleski, Director

2. **OAC Rule 3745-273-13(D)(1), Universal Waste Lamps:** Universal Waste Lamps must be packaged or contained in containers that are structurally sound, adequate to prevent breakage, and compatible with contents of the lamps

Fayette Memorial Hospital failed to package all Universal Waste Lamps in containers.

Fayette Memorial Hospital abated this violation on the day of the inspection.

3. **OAC 3745-273-14(E), Universal Waste Lamps:** Packages of Universal Waste Lamps must be labeled with the words Universal Waste – Lamp(s), or Waste Lamp(s), or Used Lamp(s).

Fayette Memorial Hospital failed to label or mark the lamps or the containers or packages of lamps with the words "Universal Waste – Lamp(s), or "Waste Lamp(s)", or "Used Lamp(s)"

Fayette Memorial Hospital abated this violation on the day of the inspection.

**General Comments:**

Please provide this writer with a bill of lading or other shipping paper(s) for the next two off-site shipments of universal waste lamps.

Please provide a bill of lading or other shipping paper(s) for the next two off-site shipments of hazardous waste to Stericycle.

Enclosed you will find a copy of the checklists completed as a result of the inspection. Should you have any questions, please feel free to contact me at 614.728.3882 or at [andy.kubalak@epa.state.oh.us](mailto:andy.kubalak@epa.state.oh.us).

Sincerely,



Andrew D. Kubalak  
District Representative  
Division of Hazardous Waste Management  
Central District Office

Kristina Durnell, DHWM/CO  
Phil Famlacher, DSIWM/CDO  
~~CDO File~~

Ohio Environmental Protection Agency  
**RCRA SUBTITLE C SITE  
 IDENTIFICATION/VERIFICATION FORM**

For Ohio EPA use only

E-mail this completed form to [kristina.durnell@epa.state.oh.us](mailto:kristina.durnell@epa.state.oh.us)  
 or mail it to Kristina Durnell, Central Office

<b>Site EPA ID No.</b>	EPA ID Number: <b>OHR000007013</b>	
<b>Site Name</b>	Name: <b>Fayette Memorial Hospital</b>	Website: (Optional)
<b>Site Location Information</b>	Street Address: <b>1430 Columbus Avenue</b>	
	City, Town, or Village: <b>Washington Court House</b>	State: <b>OH</b>
	County Name: <b>Fayette</b>	Zip Code: <b>43160</b>
<b>Site Land Type</b> (check only one)	Private <input type="checkbox"/>	County <input checked="" type="checkbox"/>
	District <input type="checkbox"/>	Federal <input type="checkbox"/>
	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>
	State <input type="checkbox"/>	Other <input type="checkbox"/>
<b>NAICS code(s)</b>	<a href="http://www.census.gov/epcd/www/naics.html">www.census.gov/epcd/www/naics.html</a>	

<b>Facility Representative</b>	First Name: <b>Rodger</b>	MI:	Last Name: <b>Smith</b>
	Phone Number: <b>740.333.2800</b>		Phone Number Extension:
Additional names can be recorded in number 12	E-Mail Address: <b>rsmith@fcmh.org</b>		Fax Number Extension:
	Fax Number: <b>740.333.2943</b>		
Only provide address information if it is different than the site address	Street or P.O. Box:		
	City, Town or Village:		
	State:		Zip Code:

<b>Legal Owner And Operator of the Site.</b>	Name of Site's Legal Owner: <b>same</b>		Date Became Owner (mm/dd/yyyy):	
List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Owner Type: Private <input type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>
	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>
	Street or P.O. Box:		Owner Phone #:	
	City, Town or Village:		Country: Zip Code:	
	State:		Date Became Operator (mm/dd/yyyy):	
	Name of Site's Operator:		Operator Type: Private <input type="checkbox"/>	
	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>
	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>	
	Street or P.O. Box:		Operator Phone #:	
	City, Town or Village:		United States Zip Code:	
	State:			

**VIOLATIONS CITED?**  Yes  No

TYPE OF HANDLER- A MINIMUM OF ONE BOX MUST BE CHECKED		
<input type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11	<input type="checkbox"/> Large Quantity Generator (LQG)
		<input type="checkbox"/> Small Quantity Generator (SQG)
		<input checked="" type="checkbox"/> Conditionally Exempt Small Quantity Generator
		<input type="checkbox"/> U.S. Importer of Hazardous Waste
		<input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator

**TYPE OF REGULATED WASTE ACTIVITY (MARK "X" IN ALL OF THE APPROPRIATE BOXES)**

- |   |  |
|---|--|
| <input type="checkbox"/> Recycler of Hazardous Waste                    | <input type="checkbox"/> Exempt Boiler and/or Industrial Furnace       |
| <input type="checkbox"/> Underground Injection Control Facility         | <input type="checkbox"/> Small Quantity On-Site Burner Exemption       |
| <input type="checkbox"/> Hazardous Waste Transporter                    | <input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption |
| <input type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste |  |

**UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED)**

(CHECK ALL BOXES THAT APPLY)

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Small Quantity Handler of Universal Waste                         | <input type="checkbox"/> Destination Facility for Universal Waste |
| <input type="checkbox"/> Large Quantity Handler of Universal Waste<br>(accumulates 5,000 kg. or more) |   |

**CHECK ALL BOXES BELOW THAT APPLY FOR THE TYPES OF UNIVERSAL WASTE THE FACILITY MANAGES**

- Batteries
- Pesticides
- Mercury containing equipment
- Lamps

**USED OIL ACTIVITIES (INDICATE TYPE(S) OF ACTIVITY(S))**

- Used Oil Generator
- Used Oil Transporter
- Used Oil Transfer Facility
- Used Oil Processor
- Used Oil Re-refiner
- Off-Specification Used Oil Burner
- Used Oil Fuel Marketer Who Directs Shipment of Off-Spec. Oil
- Used Oil Fuel Marketer to Off-Specification Used Oil Burner

**Waste Codes for Federally Regulated Hazardous Wastes.** Please list the codes for the federally regulated hazardous waste handled at the site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more space is needed. If there are more than 7 waste codes and they are the same as listed in the most recent RCRA Info source record, you do not need to list them all. Instead just indicate the date of the most recent source record.

**COMMENTS: USE THIS AREA TO DESCRIBE WHETHER THE INSPECTION WAS ANNOUNCED, WHETHER THE WASTE IS STORED IN TANKS OR CONTAINERS, ETC.**

- |            |   |  |                                      |
|------------|---|--|--------------------------------------|
| Announced  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No | Additional Facility Representatives: |
| Tanks      | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No | Other Comments:                      |
| Containers | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |                                      |

Name of Inspector(s)	Name of Inspector(s)	Date of Inspection/Time (mm/dd/yyyy) (hh:mm)
andrew d kupalak	Phil Farnlacher, DSIWM	5/26/2009

**OPTIONAL CERTIFICATION.** I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Owner, Operator, or an Authorized Representative	Name and Title (Print)	Date (mm/dd/yyyy)
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**CONDITIONALLY EXEMPT SMALL QUANTITY GENERATOR REQUIREMENTS  
COMPLETE AND ATTACH A PROCESS, WASTE, P2 SUMMARY SHEET**

CESQG: =100Kg. (Approximately 25-30 gallons) of waste in a calendar month or < 1 Kg. of acutely hazardous waste.  
 SQG: Between 100 and 1,000 Kg. (About 25 to under 300 gallons) of waste in a calendar month.  
 LQG: = 1,000 Kg. (~300 gallons) of waste in a calendar month or =1 Kg. of acutely hazardous waste in a calendar month.  
 NOTE: To convert from gallons to pounds: Amount in gallons x Specific Gravity x 8.345 = Amounts in pounds.

Safety Equipment Used:

**WASTE EVALUATION**

1.	Have all wastes generated at the facility been adequately evaluated? [3745-52-11]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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**GENERATOR CLASSIFICATION**

2.	Does the generator produce <100 kg. of hazardous waste per month? [conditionally exempt small quantity generator ("CESQG")]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: If quantities of hazardous waste accumulated on-site at any one time exceed 1,000 Kg. - or the generator produces between 100 and 1,000 Kg. of hazardous waste per month, it is operating as a Small Quantity Generator ("SQG"). If so, complete the Small Quantity Generator Requirements checklist.

**OFF-SITE SHIPMENT OF HAZARDOUS WASTE**

3.	Does the CESQG ensure delivery of hazardous waste(s) to an off-site permitted TSD? [3734.02(F)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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**TREATMENT OF HAZARDOUS WASTE**

4.	Does the generator treat hazardous waste in a:	
	a. Container that meets 3745-66-70 to 3745-66-77?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	b. Tank that meets 3745-66-90 to 3745-66-101 except 3745-66-97(C)?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	c. Drip pads that meet 3745-69-40 to 3745-69-45?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	d. Containment building that meets 3745-256-100 to 3745-256-102?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>

NOTE: Complete appropriate checklist for each unit.

NOTE: If the CESQG conducts treatment they are subject to the LQG requirements.

NOTE: If waste is treated to meet LDRs, use LDR checklist.

**MIX HAZARDOUS WASTE WITH USED OIL**

5.	Does the CESQG mix its hazardous waste with used oil for the purpose of burning for energy recovery? [3745-51-05(J)] If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	a. Does the CESQG manage the mixture in accordance with 3745-279-21?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>



CEI – May 26, 2009

CESQG

During the inspection we met with Roger Smith, Director of Facility Services; Lin Glass, Infection Control Risk Manager, and Jennifer Lynch, Pharmacy. Phil Farnlacher, Division of Solid and Infectious Waste [DSIWM] was also present during the inspection. Phil spoke with facility personnel about DSIWM requirements and procedures currently in place at the facility.

Fayette Memorial Hospital, Washington Court House notified U.S. EPA as a Conditionally Exempt Small Quantity Generator [CESQG] on September 21, 1995. It was determined during a hazardous waste inspection conducted on May 26, 2009, that the facility generator status remains the same – CESQG. This hospital is a Fayette County owned hospital and is a twenty-five bed facility.

Chemotherapy drugs are no longer dispensed as of April, 08. Any hazardous waste generated will be transported off-site by Stericycle.

Universal waste lamps and batteries are managed off-site by Retrofit.



**SMALL QUANTITY UNIVERSAL WASTE HANDLER REQUIREMENTS - BATTERIES AND LAMPS**

**Large Quantity Universal Waste Handler (LQUWH) = 5,000 Kg or more**

**Small Quantity Universal Waste Handler (SQUWH) = 5,000 Kg or less**

**PROHIBITIONS**

1.	Did the SQUWH dispose of universal waste? [3745-273-11(A)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
2.	Did the SQUWH dilute or treat universal waste, except when responding to releases as provided in OAC rule 3745-273-17 or managing specific wastes as provided in OAC rule 3745-273-13? [3745-273-11(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

**WASTE MANAGEMENT AND LABELING/MARKING**

**UNIVERSAL WASTE BATTERIES**

3.	Are batteries that show evidence of leakage, spillage or damage that could cause leaks contained? [3745-273-13(A)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
4.	If batteries are contained, are the containers closed and structurally sound, compatible with the contents of the battery and lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
5.	Are the casings of the batteries breached, not intact, or open (except to remove the electrolyte)? [3745-273-13(A)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
6.	If the electrolyte is removed or other wastes generated, has it been determined whether the electrolyte or other wastes exhibit a characteristic of hazardous waste? [3745-273-13(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	If the electrolyte or other waste is characteristic, is it managed in compliance with OAC Chapters 3745-50 through 3745-69? [3745-273-13(A)(3)(a)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	If the electrolyte or other waste is not hazardous, is it managed in compliance with applicable law? [3745-273-13(A)(3)(b)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
7.	Are the batteries or containers of batteries labeled with the words "Universal Waste - Batteries" or "Waste Battery(ies)" or "Used Battery(ies)"? [3745-273-14(A)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>  1. Universal waste batteries were not labeled as required.

**UNIVERSAL WASTE LAMPS**

8.	Does the SQUWH contain lamps in containers or packages that are structurally sound, adequate to prevent breakage, and compatible with contents of the lamps? Are containers or packages closed and do they lack evidence of leakage, spillage or damage that could cause leakage? [3745-273-13(D)(1)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>  2. Universal waste lamps were not all being accumulated in containers. Lamps which were in containers were not closed.
9.	Are lamps that show evidence of breakage, leakage or damage that could cause a release of mercury or hazardous constituents into the environment immediately cleaned up? Are they placed into a container that is closed, structurally sound, compatible with the contents of the lamps, and lack evidence of leakage, spillage or damage that could cause leakage or releases of mercury or hazardous waste constituents to the environment? [3745-273-13(D)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

**NOTE: Treatment (such as crushing) by a UWH is prohibited under this rule unless the facility is permitted for such activities [3745-273-31(B)]. A generator crushing lamps must manage lamps according to hazardous waste rules (OAC Chapter 3745-52). Lamp crushing is a form of generator treatment (OAC rule 3745-52-34).**

Crushed lamps must be transported by a registered hazardous waste transporter or a permitted hazardous waste facility using a hazardous waste manifest.

10.	Are the lamps or containers or packages of lamps labeled with the words "Universal Waste - Lamp(s)" or "Waste Lamp(s)" or "Used Lamp(s)"? [3745-273-14(E)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
		3. Containers of universal waste lamps were not properly labeled.

**ACCUMULATION TIME**

11.	Is the waste accumulated for less than one year? [3745-273-15(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	If not, is the waste accumulated over one year in order to facilitate proper recovery, treatment or disposal? (Burden of proof is on the handler to demonstrate) [3745-273-15(B)] (this change makes it like the LQUWH checklist)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: Accumulation is defined as date generated or date received from another handler.

12.	Is the handler able to demonstrate the length of time the universal waste has been accumulated? [3745-273-15(C)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
If yes, describe below:		

**EMPLOYEE TRAINING**

13.	Are employees who handle or have the responsibility for managing universal waste informed of waste handling/emergency procedures, relative to their responsibilities? [3745-273-16]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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**RESPONSE TO RELEASES**

14.	Are releases of universal waste and other residues immediately contained? [3745-273-17(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
15.	Is the material released characterized? [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
16.	If the material released is a hazardous waste, was it managed as required in OAC Chapters 3745-50 through 3745-69? (If the waste is hazardous, the handler is considered the generator of the waste and is subject to OAC Chapter 3745-52) [3745-273-17(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

**OFF-SITE SHIPMENTS**

NOTE: If a SQUWH self-transport waste, then the handler must comply with the Universal Waste transporter requirements.

17.	Are universal wastes sent to either another handler, destination facility or foreign destination? [3745-273-18(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
18.	Is the handler aware of DOT requirements for packaging and shipping? If no, make aware of 49 CFR 171-180.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
19.	Prior to shipping universal waste off-site, does the originating handler ensure that the receiver agrees to receive the shipment? [3745-273-18(D)] (this change makes it like the LQUWH checklist)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
20.	Has the originating handler ever had an off-site shipment rejected by another handler or destination facility?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	If yes, did the originating handler receive the waste back or agree to where the shipment was sent? [3745-273-18(E)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
21.	If a handler rejects a partial or full load from another handler, does the receiving handler contact the originating handler and discuss and do one of the following:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	a.	Send the waste back to the originating handler or send the shipment to a destination facility (If both the originating and receiving handler agree)? [3745-273-18(F)(2)] (this change makes it like the LQUWH checklist)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
22.		If the handler received a shipment of hazardous waste that was not a universal waste, did the SQUWH immediately notify Ohio EPA? [3745-273-18(G)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<b>EXPORTS</b>			
23.		Is waste being sent to a foreign destination? If so:	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	a.	Does the small quantity handler comply with primary exporter requirements in OAC rules 3745-52-53, 3745-52-56, and 3745-52-57? [3745-273-20(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b.	Is waste exported only upon consent of the receiving country and in conformance with the U.S. EPA "Acknowledgment of Consent" as defined in OAC rules 3745-52-50 to 3745-52-57? [3745-273-20(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c.	Is a copy of the U.S. EPA "Acknowledgment of Consent" provided to the transporter? [3745-273-20(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

