
Standard Operating Procedure

Disposal of Human Tissue (e.g. human samples and blood products)

If, following the MRC decision tree (see SOP Review of holdings and decision tree for removal) it is deemed appropriate for samples to be disposed of:

Samples should be double autoclave bagged, loosely secured with autoclave tape and taken for incineration following the Trust Disposal Policy via either the Department of Medicine on level 5 (contact admin on level 5 for more details). Bagged samples should be taken and placed in the yellow container outside the autoclave room (number 05.804) on level 5. The samples will be autoclaved and then double yellow bagged by the staff on level 5 for incineration.

For samples requiring sensitive disposal (eg post mortem specimens) contact the Tissue Coordinator in the pathology department on level 5. When arranged the samples should be double yellow bagged and taken to level 5 pathology along with a list of the samples and a covering letter.

As part of the disposal process the sample number should be logged in the 'discarded samples' book (kept in the box file in the safe) along with the date of disposal. The relevant entry in the 'biopsy information book' (also kept in the safe) should be updated in red pen with the details of exactly what has been discarded and the date.

Histological slides for disposal should be collected in a sharps bucket and then taken to the pathology department (contact pathology in order to obtain a sharps bucket if necessary and then prior to taking it to level 5).

Blood products must be treated with disinfectants prior to disposal. The following disinfectants are to be used at the concentrations given for the purposes listed. The choice of a particular disinfectant for any given application should be discussed with the Head or Department if there is any question over its effectiveness against the infective agent involved. The result of risk assessments for the substances used must be built into the process including COSHH assessments. If in any doubt: autoclave the infected material and seek advice from the Laboratory Manager/Departmental Safety Officer.

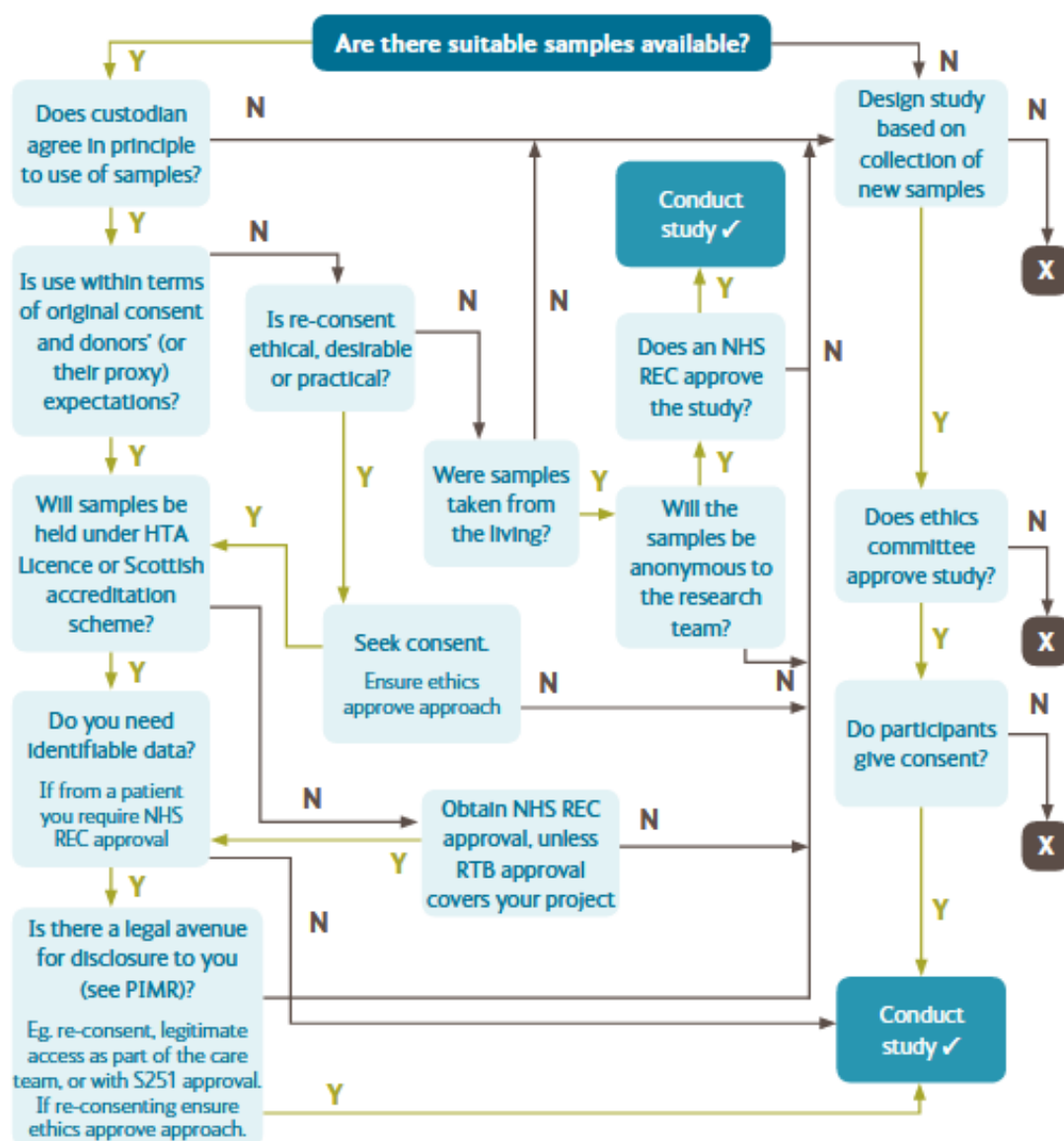
Trigene: for surface disinfection, preferred where blood is not involved.

Alcohol: use only at 70% v/v as a disinfectant (higher and lower dilutions are not effective) and only on essentially 'clean' items. It is recommended that alcohol be used as a general disinfectant in the wiping down of laboratory benching in Category 1 areas etc but not for the decontamination of large spillages of material contaminated with virus or bacteria for which Chlorox should be used. **Do not use methanol.**

Virkon: a disinfectant effective against most viruses and Gram-negative bacteria at a concentration of 2%.

Annex 3: Making decisions related to using existing collections of samples, including diagnostic/pathology archives

This flowchart assists researchers when making decisions about the use of existing collections of samples in the UK. Depending on the circumstances there may be additional legal considerations* and/or local procedures to follow.



In Scotland, research involving whole organs released by the Procurator Fiscal requires authorisation (consent) and NHS REC approval.

Key
 X Unable to conduct study Y Yes N No
 RTB approval – Research Tissue Bank ethics approval
 PIMR – MRC Ethics Series: Personal Information in Medical Research
<http://www.mrc.ac.uk/news-events/publications/personal-information-in-medical-research/>

* For more information please see the MRC RSC Human Tissue Legislation Summaries
<http://www.mrc.ac.uk/research/facilities/regulatory-support-centre/human-tissue/>