B BRAUN MEDICAL INC PAD982679169

GENERATOR TSD

2500-FM-LRWM0276 Rev. 5/99

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Inspection Date 08/03/2005
Time Start 10:00
Time Finish 12:30
eFACTS INSP# 1469489

HAZARDOUS WASTE INSPECTION REPORT

☒ GENERATOR ☐ S Q GENERATOR

Company name B. BRAUN MEDICAL, INC. I.D. Number PAD982679169
Site Address 901 MARCON BLVD. ALLENTOWN PA 18109-9341
County LEHIGH Municipality HANOVER TOWNSHIP Zip 18109
Name of Inspector DAVID J. ELM
Name & Title of Responsible Official STEPHEN STANCICK ENVIRONMENTAL, HEALTH & SAFETY MANAGER
Person Interviewed SAME, DAVID R. LAVER, JOSEPH PATTERSON Telephone (610) 691-5400
Mailing Address (if different from above)
Amount of Hazardous Waste Generated per Month: >2200 Pounds Kgs

1. **Site Characterization:**

STORAGE: ☒ Container ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad Other
PBR: ☐ Neutralization/WWTP ☐ Reclaim Other
GENERATOR TREATMENT ☐ Containers ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad

2. **Universal Waste:** ☐ Large Quantity Handler ☒ Small Quantity Handler

Universal Waste Types LAMPS

3. **Hazardous Waste Transporters:**

Transporter Name ST. JOSEPH MOTOR LINES License Number PA AH0390
Transporter Name FREEHOLD CARTAGE License Number PA AH0067
Transporter Name License Number

4. **Types of hazardous waste generated and destination facility (location & type).**

Waste Code	Waste Description	Destination Facility
F002, D001	WASTE FLAMMABLE LIQUIDS	EQ RESOURCE RECOVERY INC
		MID006975844
F002	WASTE FLAMMABLE SOLIDS	VON ROLL WTI, INC.
		OHD980613541
D001, F005	WASTE AEROSOLS, WASTE FLAMMABLE	ENVIRONMENTAL ENTERPRISE INC
	LIQUIDS	OHD083777010

ORIGINAL: PA DEP REGION II (NERO) FILE-WM-LEHIGH CO.-B. BRAUN MEDICAL, INC.-INSPECTIONS
CC: FACILITY ✓
PA DEP BETHLEHEM D.O.-WM-LEHIGH CO. B. BRAUN MEDICAL, INC.-INSPECTIONS
PA DEP CENTRAL OFFICE-BLR&WM-DIV. OF HAZ. WASTE MGT.
USEPA REGION III/RCRIS

2500-FM-LRWM0276b Rev. 5/99

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT
GENERATORS -- SMALL QUANTITY GENERATORS
FACILITY SPECIFICS

Site Name B. BRAUN MEDICAL INC ID Number PAD982679169 Date 08-03-2005

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED CIT. 40 CFR	LINE NO.
				CONTAINERS (Subchapter I)			
1				Containers managed in compliance with 40 CFR Part 265 Subpart I and 25 PA Code Chapter 265a Subchapter I	262a.10	262.34	H025
1				Containers of hazardous waste in good condition	265a.1	265.171	H026
1				Containers and stored waste compatible	265a.1	265.172	H027
1				Containers kept closed except during addition or removal of wastes	265a.1	265.173(a)	H028
1				Containers managed to prevent leaks	265a.1	265.173(b)	H029
1				Container configuration and spacing insures safe management and access for inspection purposes and emergency equipment	265a.173		H030
1				Container storage areas inspected at least weekly	265a.1	265.174	H031
1				Special requirements for ignitable or reactive and incompatible waste complied with	265a.1	265.176-177	H032
1				Proper containment and collection systems in place	265a.179		H033
1				Air emission standards complied with (AA, BB, CC)	265a.1	265.178	H034
1				Containers clearly marked with accumulation date and visible for inspection	262a.10	262.34(a)(2)	H035
1				Containers labeled "Hazardous Waste"	262a.10	262.34(a)(3)	H036
1				Containers labeled accurately identify contents	SWMA 6018.403(b)(2)		H037

2500-FM-LRWM0276a Rev. 5/99

COMMONWEALTH OF PENNSYLVANIA
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BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

HAZARDOUS WASTE INSPECTION REPORT
GENERATORS -- SMALL QUANTITY GENERATORS

Site Name B. Braun Medical Inc. ID Number PAD982679169 Date 08-02-2005

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED. CIT. 40 CFR	LINE NO.
1				Hazardous waste determination performed on all waste streams	262a.10	262.11	H001
1				Identification Number	262a.10	262.12	H002
1				Authorized transporters only	262a.10	262.12(c)	H003
1				Subsequent notification requirements met	262a.12(b)		H004
1				Proper manifest used	262a.10	262.21	H005
1				Manifests filled out correctly and completely	262a.20		H006
1				Manifests signed and routed properly	262a.23(a)	262.23	H007
1				Generator waste accumulated on site for 90 days or less	262a.10	262.34(a)	H008
	2			SQG waste accumulated on site for 180 days max unless 200 mile distance rule applies - 270 days	262a.10	262.34(e)(f)	H009
	2			SQG waste accumulated on-site never exceeds 6000 kg	262a.10	262.34(e)(f)	H010
1				Satellite accumulation requirements complied with	262a.10	262.34(c)	H011
1				Personnel training program per 265.16 complied with 11/02/2004, 08/02/2005	262a.10	262.34(a)(4) 262.34(d)	H012
1				Manifest exception and biennial reports retained for 3 years	262a.10	262.40(a)(b)	H013
1				Specified records retained for three years	262a.10	262.40(c)	H014
1				Biennial reports submitted to the Department (LQG only)	262a.41	262.41	H015
1				Exception reporting procedures followed	262a.42	262.42	H016
1				Spill reporting procedures followed	262a.10	262.34(d)	H017
1				PPC plan developed and implemented	262a.10	262.34(a)	H018
	2			Special requirements followed for international shipments	262a.10	262.50 262.60	H019
1				Source reduction strategy prepared and available (LQG only)	262a.100		H020
1				Excluded waste complies with exclusionary requirements	261a.4	261.4	H021

2510-FM-LRWM0137 Rev. 5/99

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
BUREAU OF LAND RECYCLING AND WASTE MANAGEMENT

Hazardous Waste Inspection Report
Hazardous Waste Permit by Rule Facility

Company name B. BRAUN MEDICAL INC.
I.D. Number PAD 982679169

Determination of Applicability Required? 270a.60	Yes	☐	No	☐	N.D.	☒
Documentation Available?	Yes	☒	No	☐	N.D.	☐
Does facility accept wastes from off-site for treatment in the PBR system?	Yes	☐	No	☒	N.D.	☐
Does facility have an NPDES permit?	Yes	☐	No	☒	N.D.	☐
If yes, NPDES Permit Number _____						
If no, does facility discharge to a sewage treatment system with an NPDES permit? If yes, NPDES Permit Number _____	Yes	☐	No	☒	N.D.	☐
If yes, does system meet all Federal, State and local pretreatment standards?	Yes	☐	No	☐	N.D.	☐

If system does not directly discharge to a POTW or its own NPDES permitted discharge, explain here.

ETHYLENE GLYCOL RESIDUAL WASTE IS SHIPPED OFFSITE TO COASTLINE CHEMICAL INC., 30470 ENERGY DRIVE, NEW CHURCH, VA 23415

Site Name B. BRAUN MEDICAL INC ID Number PAD982679169 Date 08-02-2005

Hazardous Waste Inspection Report
Hazardous Waste Permit by Rule Facility (WWTP)

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED. CIT. 40 CFR	LINE NUMBER
/				Facility has applied for or received an EPA Hazardous Waste Identification Number	264a.1	264.11	H550
/				Active portion has 24 hour surveillance	264a.1	264.14(b)(1)	H551
/				Artificial barrier surrounds active portion	264a.1	264.14(b)(2)	H552
/				Proper signs are posted	264a.1	264.14(c)	H553
/				Inspections are conducted as per inspection plan	264a.1	264.14(b)(1)	H554
/				Inspection schedule is retained at facility	264a.1	264.15(b)(2)	H555
/				Deterioration and/or malfunctions of equipment corrected as revealed by inspections	264a.1	264.15 (c)	H556
/				Immediate remedial action taken when a hazard is imminent or already present	264a.1	264.15(c)	H557
/				Inspection log is maintained and utilized properly	264a.1	264.15 (d)	H558
/				Personnel training plan approved by DEP and implemented	264a.1	264.16 (a)	H559

B. BRAUN MEDICAL, INC.
PAD982679169
08-09-2005

Hazardous Waste Inspection Report
Hazardous Waste Permit by Rule Facility (WWTP)

1 - No Violation Observed 2 - Not Applicable 3 - Not Determined 4 - Non Compliance

STATUS 1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED. CIT. 40 CFR	LINE NUMBER
1				Facility has NPDES permit if required	264a.1	264.16(d)(e)	H560
1				Facility is equipped with internal alarm system capable of providing immediate emergency instruction to personnel	264a.1	264.32(a)	H561
1				Facility is capable of summoning outside emergency assistance	264a.1	264.32(b)	H562
1				Facility is equipped with fire, spill and decontamination control equipment	264a.1	264.32(c)	H563
1				Facility communication and/or alarm systems, and spill and decontamination control equipment is periodically tested and maintained	264a.1	264.33	H564
1				Adequate aisle space is maintained to allow unrestricted access for personnel and emergency equipment	264a.1	264.35	H565
1				Current PPC plan, prepared and implemented in accordance with Department's guidelines. Copy available on site.	264a.1	264.51	H566
1				Designated primary emergency coordinator and is on-site or on call at all times	264a.1	264.55	H567

EP-WM-129: Rev. 7/98

COMMONWEALTH OF PENNSYLVANIA
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INSPECTION REPORT COMMENTS

Date of Inspection 02 AUGUST 2005 Identification Number PAD982679169

Company/Facility/Site Name B. BRAUN MEDICAL, INC.

I INSPECTED THE SITE WITH MESSRS. STANCICK, LAVER AND PATTERSON OF THE SITE. THE SITE, A MANUFACTURER OF DISPOSABLE PLASTIC MEDICAL DEVICES, IS A LARGE QUANTITY GENERATOR OF HAZARDOUS WASTE. I TOURED THE SITE, INCLUDING THE WASTE STORAGE AREAS, AND ELEMENTARY NEUTRALIZATION PERMIT-BY-RULE AREA. A REVIEW OF THE SITE RECORDS WAS ALSO CONDUCTED DURING THE INSPECTION.

THE ELEMENTARY NEUTRALIZATION SYSTEM GENERATES ETHYLENE GLYCOL FROM A PROCESS INVOLVING THE MIXING OF SULFURIC ACID/WATER AND ETHYLENE OXIDE. ETHYLENE OXIDE IS UTILIZED IN THE STERILIZATION OF OUTBOUND PACKAGED PRODUCTS.

THE SITE PPC PLAN IS TITLED THE "HAZARDOUS MATERIALS OFFSITE RESPONSE PLAN 2005". THE PLAN ~~APPEARS TO~~ CONTAINS THE NECESSARY EMERGENCY CONTACT TELEPHONE NUMBERS PER THE REQUIREMENTS OF THE DEPARTMENT. THE PLAN, DATED 03/02/2005, IS WRITTEN IN ACCORDANCE WITH THE SARA TITLE III REQUIREMENTS.

ONE 55-GALLON DRUM OF HAZARDOUS WASTE METHYLENE CHLORIDE DATED 07/20/2005 WAS NOTED IN THE HAZARDOUS WASTE STORAGE AREA. FIVE 55-GALLON CONTAINERS OF RESIDUAL WASTE (2 OF WASTE HID LAMPS, 1 RORA EMPTY CONTAINER AND 2 OF WASTE LIGHT BALLASTS) WERE ALSO ONSITE THE FACILITY.

ONE CONTAINER OF CONSTRUCTION/DEMOLITION WASTES AND SEVERAL ITEMS OF ELECTRONIC SCRAP WERE ALSO NOTED DURING THE INSPECTION.

THIS CONCLUDES THE INSPECTION REPORT COMMENTS.

This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.

This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.

Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.

Person interviewed (signature) _____ Date 08/03/2005

Inspector (signature) _____ Date 08/02/2005

ENTERED 10/8/97 call

RCRIS PERMIT/CLOSURE/POST CLOSURE

Unit Group and Event Data Entry Form

Version 2.0

Handler Data

Handler Id: PIAID918216719111619

Name of Facility: B Braun Medical Inc.

PROCESS UNIT DETAIL

Add New Unit Group or Detail Record [X] Modify Existing Unit Group or Detail Record [ ] Delete Existing Unit Group or Detail Record [ ]

Permit Process Unit Group Seq. No.: 1

Permit Process Unit Group Name: PERMITTED TRAILER (name?)

Process Data Detail Seq. No.: 01011

Permit Process Code: T1011

Effective Date: 10 16 1997

Permit Sub-Process Code:

Number of Units: 0101010101

Capacity: 4010101.1016

Unit of Measure: G

Sub-Unit of Measure:

Legal Status: RU

Operating Status: OP

Commercial Status:

These are new fields in RCRIS used to provide additional detail about a unit group.

Comments: approved PBR for elementary neutralization

PROCESS UNIT DETAIL

Add New Unit Group or Detail Record [ ] Modify Existing Unit Group or Detail Record [ ] Delete Existing Unit Group or Detail Record [ ]

Permit Process Unit Group Seq. No.:

Permit Process Unit Group Name:

Process Data Detail Seq. No.:

Permit Process Code:

Effective Date:

Permit Sub-Process Code:

Number of Units:

Capacity:

Unit of Measure:

Sub-Unit of Measure:

Legal Status:

Operating Status:

Commercial Status:

These are new fields in RCRIS used to provide additional detail about a unit group.

Comments:

KEY: Required Fields [ ] Field Required if Pertinent [ ] Optional Fields [ ]

Data Entry Use Only

Submitted By: _____ Date: _____

Checked By: _____ Date: _____

Entered By: _____ Date: _____

PROCESS UNIT DETAIL

Add New Unit Group or Detail Record ☐ Modify Existing Unit Group or Detail Record ☐ Delete Existing Unit Group or Detail Record ☐

Permit Process Unit Group Seq. No. ☐ Permit Process Unit Group Name ☐

Process Data Detail Seq. No. ☐ Permit Process Code ☐ Effective Date ☐ Permit Sub-Process Code ☐

Number of Units ☐ Capacity ☐ Unit of Measure ☐ Sub-Unit of Measure ☐

Legal Status ☐ Operating Status ☐ Commercial Status ☐

These are new fields in RCRIS used to provide additional detail about a unit group.

Comments:

PROCESS UNIT DETAIL

Add New Unit Group or Detail Record ☐ Modify Existing Unit Group or Detail Record ☐ Delete Existing Unit Group or Detail Record ☐

Permit Process Unit Group Seq. No. ☐ Permit Process Unit Group Name ☐

Process Data Detail Seq. No. ☐ Permit Process Code ☐ Effective Date ☐ Permit Sub-Process Code ☐

Number of Units ☐ Capacity ☐ Unit of Measure ☐ Sub-Unit of Measure ☐

Legal Status ☐ Operating Status ☐ Commercial Status ☐

These are new fields in RCRIS used to provide additional detail about a unit group.

Comments:

EVENT DETAIL

Add New Event ☒ Modify Existing Event ☐ Delete Existing Event ☐ Link Event to Above Unit Group ☒ Unlink Event to Above Unit Group ☐

Permit Seq. No. 001 Permit Processing No. PAD981261791169

Event Name: Permit approved Event Code: 01P2010

EPA Responsible Person ☐ State Responsible Person ☐

Responsible Agency ☐ Event Seq. No. 01 Responsible Person ☐ Event Status Code PT

EPA Attorney ☐ State Attorney ☐

Originally Scheduled Date ☐ Scheduled Date ☐ Actual Date 10 10 1997

Comments: