	Title: Disposal of Human Tissues by Incineration	Author: G. Cockerill	Date: 2/Oct/2012
	No: SOP_R8	New Author: P. Madhou	Date: 1/Sept/2024
	Version: 7		Review Date March 2026




**SOP\_R8 : DISPOSAL OF HUMAN TISSUES BY INCINERATION.**

**Disclaimer**

When using this document, please ensure that the version you are using is the most up to date either by checking on the SGUL/PORTAL/HTA website for any new versions or contact the HTA coordinator to confirm the current version.

**Out of date documents must not be relied upon and should be destroyed.**

7	Sept 2024	City merge, review & formatting	AS/PM	HTLRG
6	Sept 2023	New DI, update contacts & formatting	AS	HTLRG
6	Sept 2022	New DI, Add PD, Review	AS	HTLGR
5	September 2021	Review and amendment following HTA inspection report	AS/PL	HTLRG
4	July 2020	Review (Section 5.2 added)	AS/PL	HTLR
3	March 2018	Reviewed & Amended (New Author)	AS	<del>GC</del> PL
3	July 2017	Reviewed and PD contact details updated	AS	PL
3	July 2017	Reference to HTA codes updated	PL	HTLR
3	July 2017	Reviewed and PD contact details	PL	HTL <sup>G</sup> R
2	Dec 2016	Update contact list	AS	<del>GC</del> PL
2	Oct 2016	DI change details	AS	MF
2	March 2016	Issued for use	GC	HTLR G
1	November 2012	Issued for use	GC	HTLR G

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0	October 2012	Issued for discussion	GC	
<b>Rev</b>	<b>Date</b>	<b>Amendment</b>	<b>Approved by</b>	<b>Authorised by</b>

## 1. Purpose/Background

**1.1** This SOP describes the procedure for the disposal of existing holdings of unidentifiable and identifiable human tissue and organs.

**1.2** The Human Tissue Authority's (HTA's) code of practice on disposal emphasises that all human tissue is a valuable resource that must be treated with respect and with the donor's wishes in mind. This procedure has been developed to comply with the HTA Code of Practice and Standards.

**1.3** This SOP does not cover the disposal of unidentified foetal remains, which is addressed in SOP\_R9.

## 2. Scope

**2.1** This SOP relates only to activities covered by HTA Licence 12335 (Storage of relevant material which has come from a human body for a scheduled purpose).

**2.2** Disposal of tissue should be minimised as far as is practical. However, tissue may need to be disposed of under the following circumstances:


- The ethical approval or consent for a given sample states that it must be disposed of at the end of the project.
- The sample is damaged, contaminated, or fails a quality assurance test. \*
- The donor withdraws consent for the use of the sample in research.
- The sample poses a health and safety risk to staff.
- The material is surplus to requirements.

**2.3** Samples stored under a coroner's authority must be retained until the close of the case or under the conditions stipulated in the consent form.

\*Note: If disposal is due to an adverse event, an adverse event report must be made according to SOP\_R11.

## 3. Responsibilities

**3.1** The responsibility for ensuring that the provisions of this SOP are adhered to lies with the Persons Responsible (PRs) identified as responsible for each collection covered by the licence.

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## 4. Procedure

### 4.1 Disposal of Human Tissue or Organs

- Remove human tissue or organ from the container if required.
- Place the human tissue or organ in a yellow clinical waste disposal bag, ensuring it is kept separate from other clinical waste.
- Transport the bag using a trolley to the Anatomy Department, SGUL.
- Hand the clinical waste bag to the authorised member of Anatomy staff (Designated Individual or Person Designated). Complete and sign the document disposal form provided.
- Record the details of the human tissue or organs disposed of in the disposal database, including the reason for disposal, method, and date of disposal.

*Note: It is recommended that two individuals prepare samples for disposal to allow cross-checking and ensure that the correct samples are being disposed of.*

### 4.2 Disposal of Human Serum or Plasma

- Verify the identity of the sample and ensure that this is recorded in the disposal database, including the reason for disposal, method, and date of disposal.
- Discard the sample in a yellow incineration bin, seal, and tag the bin according to SGUL's clinical/biological waste disposal policy. Place the bin in a waste caddy for incineration.

## 5. Related Documents

**5.1** Pathology Museum Disposal Form (Anatomy\_v1.3). For details, contact Dr. L. Fisher.

**5.2** Medical Research Council (MRC) Guidelines for Disposal of Human Tissue Material (Jan 2019 Ver 2) [Disposal Summary](#).

**5.3** SGUL Laboratory Biological Waste Disposal Guidance [Link](#).


**5.4** SOP\_R11 Procedure for Reporting Adverse Events (AEs) and Complaints [Link](#).

## 6. References

**6.1** Human Tissue Authority Codes of Practice [Link](#).

## 7. Amendment of SOPs

**7.1** If, in the course of applying this document, the user identifies modifications that would improve this document, please bring the suggested changes to the attention of the Person Designated (PD) so that amendments can be reviewed and implemented.

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## 8. Amendment of SOP

8.1 Users who identify modifications that could improve this SOP should notify the Person Designated (PD) for review and potential implementation.

### 15. Contacts DIs and PDs

<b>Research Licence</b>	DI	Dr Priya Madhou	Ext 1603	<a href="mailto:pmadhou@sgul.ac.uk">pmadhou@sgul.ac.uk</a>
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	PD	Ms Lara Painter	Ext 3077	<a href="mailto:lpainter@sgul.ac.uk">lpainter@sgul.ac.uk</a>
<b>Anatomy Licence</b>	DI	Miss Georga Longhurst	Ex 5208	<a href="mailto:glonghur@sgul.ac.uk">glonghur@sgul.ac.uk</a>
	PD	Mr Paul Carter	Ext 5228	<a href="mailto:pcarter@sgul.ac.uk">pcarter@sgul.ac.uk</a>
	PD	PATHOLOGY MUSEUM Dr Carol Shiels	Ext 0729	<a href="mailto:cshiels@sgul.ac.uk">cshiels@sgul.ac.uk</a>