Hospital pharmacies in the United States purchase over 4 billion hazardous pharmaceuticals annually, generating more than 84,000 tons of hazardous waste. According to a U.S. Geological survey, pharmaceutical contaminants were found in 80% of sampled water, possibly tainting drinking water.

Under the authority of the Resource Conservation and Recovery Act (RCRA), the U.S. Environmental Protection Agency (EPA) has increased enforcements to maintain that pharmaceutical waste is managed safely from the moment it is generated and finally disposed. Pharmacists are accountable for this end-to-end management requirement.

The sorting of pharmaceutical waste is a challenging issue. Manual sorting methods are expensive, time consuming for hospital staff and dangerous for those that generate, transport, store or dispose of hazardous pharmaceuticals. Unsorted waste is categorized as high-risk black waste, the most expensive form of waste costing up to $2-4 per pound, making sorting of waste financially prudent.

**Consequences of improper disposal.**
- Recent trends indicate that many of the nation’s hospitals are non-compliant
- EPA citations are up 6%*
- Pharmacists may be personally liable
  - Fines of up to $37,500 per day, per incident*
  - Penalties can also include imprisonment
Pyxis EcoStation™ system

Automated technology to help hospitals reduce costs and facilitate environmental responsibility

Pyxis EcoStation system is a proprietary, automated waste management system that helps hospitals identify, classify, sort and segregate pharmaceutical waste. The system generates drug disposal manifests containing data that may be required by the EPA and other regulatory agencies.

- Efficient patent protected “scan to dispose” technology
- Cost-effective system with up to 65% ROI versus conventional manual methods
- Facilitate tracking of more than 180,000 National Drug Codes
- Easily integrates by linking to the hospital’s pharmacy information system (PIS) and identifies pharmacy-created and manufacturer’s package barcodes, extending use to virtually all pharmacy-dispensed medications

Easy-to-use five step process

1. Scan the barcode.
   Pharmaceutical waste is instantly and accurately classified.

2. Dispose of waste.
   Once classified, the waste stream container opens and the clinician safely disposes waste.

3. Close the door.
   Clinician closes the door. Waste is deposited into a secure bin.

   Waste hauler is automatically notified when RFID bin liners need to be replaced.

5. Drug waste reporting.
   Reporting capability to document and track waste.

References