



# REGULATED MEDICAL WASTE FACILITY ANNUAL REPORT

This Regulated Medical Waste Facility Annual Report is for the year of operation from January 01, 2022 to December 31, 2022

## SECTION 1 – GENERAL INFORMATION

FACILITY INFORMATION			
FACILITY NAME: Icahn School of Medicine at Mount Sinai			
FACILITY LOCATION ADDRESS: 1 Gustave L. Levy Place	FACILITY CITY: New York City	STATE: NY	ZIP CODE: 10029
FACILITY TOWN: New York	FACILITY COUNTY: New York	FACILITY PHONE NUMBER: 212-241-6500	
FACILITY NYS PLANNING UNIT: (A list of NYS Planning Units can be found at the end of this report). New York City			NYSDEC REGION #: 2
360 PERMIT #: 31J20002	DATE ISSUED: 12/21/2021	DATE EXPIRES: 12/21/2026	NYS DEC ACTIVITY CODE OR REGISTRATION NUMBER:
FACILITY CONTACT: Randy A. Albrecht	<input checked="" type="checkbox"/> public <input type="checkbox"/> private	CONTACT PHONE NUMBER: 212-241-8255	CONTACT FAX NUMBER: 212-241-1047
CONTACT EMAIL ADDRESS: randy.albrecht@mssm.edu			
OWNER INFORMATION			
OWNER NAME: Randy A. Albrecht	OWNER PHONE NUMBER: 212-241-8255	OWNER FAX NUMBER: 212-241-1047	
OWNER ADDRESS: 1 Gustave L. Levy Place	OWNER CITY: New York City	STATE: NY	ZIP CODE: 10029
OWNER CONTACT: Randy A. Albrecht	OWNER CONTACT EMAIL ADDRESS: randy.albrecht@mssm.edu		
OPERATOR INFORMATION			
OPERATOR NAME: Randy A. Albrecht	<input checked="" type="checkbox"/> same as owner		<input checked="" type="checkbox"/> public <input type="checkbox"/> private
PREFERENCES			
Preferred address to receive correspondence: <input type="checkbox"/> Facility location address <input type="checkbox"/> Owner address <input checked="" type="checkbox"/> Other (provide): Department of Microbiology, Box 1124 Icahn School of Medicine at Mount Sinai 1 Gustave L. Levy Place New York, NY 10029-6574			
Preferred email address: <input checked="" type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			
Preferred individual to receive correspondence: <input checked="" type="checkbox"/> Facility Contact <input type="checkbox"/> Owner Contact <input type="checkbox"/> Other (provide):			

Did you operate in 2022?  Yes; Complete this form.

No; Complete and submit Sections 1 and 9. If you no longer plan to operate and wish to relinquish your permit/registration associated with this solid waste management activity, also complete the "Inactive Solid Waste Management Facility or Activity Notification Form" located at:

<http://www.dec.ny.gov/chemical/52706.html>.

**SECTION 2 – PERMITTED RMW WASTE TRANSFER OR TREATMENT FACILITIES**

	AMOUNT GENERATED OR RECEIVED FOR PROCESSING (tons)	AMOUNT TRANSFERRED TO TREATMENT FACILITY (tons)	AMOUNT TREATED (tons)	AMOUNT BYPASSED (tons)	AMOUNT OF SHARPS OR DEVICES PROCESSED FOR RECYCLING (tons)	IF WASTE IS TRANSFERRED, THE NAME AND ADDRESS OF TRANSFER OR TREATMENT FACILITY (include county and state)	NYS PLANNING UNIT <i>(See Attached List of NYS Planning Units)</i>
RMW (including: Cultures and Stocks, Human Pathological Waste, Human Blood and Blood Products, Sharps, and Animal Waste)	6.9	6.9	6.9	0	0	6.9	New York City
Other Infectious Waste <i>(specify amount for each contaminated material including infectious incident waste, human remains management waste, etc.)</i>							
Radioactive Waste <i>(specify for each very short lived, short lived or long lived)</i>							
Pharmaceutical Waste							
Hazardous Waste							
Other <i>(specify amount for each material including hydrolysate, ash, C&amp;D, etc. requiring further processing.)</i>							
<b>TOTAL</b>	<b>6.9</b>						

**SECTION 3 – DISPOSAL DESTINATION**

WASTE TYPE	AMOUNT (tons)	FACILITY NAME AND ADDRESS	STATE	COUNTY	NYS PLANNING UNIT <i>(See Attached List of NYS Planning Units)</i>
Treated Waste	6.9	Stericycle, Inc., 31 Lower River Street, Oneonta, NY 13820	NY	Otsego County	Otsego County
<b>TOTAL WASTE</b>					

**SECTION 4 – UNAUTHORIZED SOLID WASTE**

Has unauthorized solid waste been received at the facility during the reporting period?  Yes  No

If yes, give information below for each incident (attach additional sheets if necessary):

Date Received	Type Received	Date Disposed	Disposal Method & Location

### **SECTION 5 - COST ESTIMATES AND FINANCIAL ASSURANCE DOCUMENTS**

Are there required cost estimates and financial assurance documents for closure?

Yes  No If yes, attach additional sheets reflecting annual adjustments for inflation and any changes to the Closure Plan?

### **SECTION 6 – PROBLEMS**

Were any problems encountered during the reporting period (e.g., specific occurrences which have led to changes in facility procedures)?

Yes  No If yes, attach additional sheets identifying each problem and the methods for resolution of the problem.

### **SECTION 7 – CHANGES**

Were there any changes from approved reports, plans, specifications, and permit conditions?

Yes  No If yes, attach additional sheets identifying changes with a justification for each change.

### **SECTION 8 - PERMIT/CONSENT ORDER REPORTING REQUIREMENTS**

Are there any additional permit/consent order reporting requirements not covered by the previous sections of this form?

Yes  No If yes, attach additional sheets identifying the reporting requirements with their respective responses.

**SECTION 9 - SIGNATURE AND DATE BY OWNER OR OPERATOR**

Owner or Operator must sign, date and submit the completed form by email or mail to the appropriate Regional Office (See attachment for Regional Office email & mailing addresses and Solid Waste Contacts.)

The Owner or Operator must also submit one copy by email, fax or mail to:

**New York State Department of Environmental Conservation  
Division of Materials Management  
Bureau of Solid Waste Management  
625 Broadway  
Albany, New York 12233-7260  
Fax 518-402-9041  
Email address: SWMFannualreport@dec.ny.gov**

I hereby affirm under penalty of perjury that information provided on this form and attached statements and exhibits was prepared by me or under my supervision and direction and is true to the best of my knowledge and belief, and that I have the authority to sign this report form pursuant to 6 NYCRR Part 360. I am aware that any false statement made herein is punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

Randy A. Albrecht

Signature

02/02/2023

Date

Randy A. Albrecht

Name (Print or Type)

Sr. Dir. Biosafety

Title (Print or Type)

randy.albrecht@mssm.edu

Email (Print or Type)

1 Gustave L. Levy Place

Address

New York City

City

New York 10029

State and Zip

(212) 241-8255

Phone Number

ATTACHMENTS:  YES

*No attachments.*

**Division of Materials Management  
New York State Department of Environmental Conservation  
Albany, New York 12233-7260**

**REGULATED MEDICAL WASTE FACILITIES**

**Annual Report**

**Submit the Annual Report no later than March 1, 2023.**

Reporting of the information indicated on this Regulated Medical Waste Annual Report form is required pursuant to 6 NYCRR 360.19(k) and 365-2.8. Failure to provide the required information requested is a violation of Environmental Conservation Law. Timely submission of a properly completed form to the Department's Regional Office that has jurisdiction over your facility and to the Department's Central Office is required to meet the Annual Report requirements of 6 NYCRR Part 360 and Part 365.

Where the Annual Report requirements have been modified, appropriate Sections (as necessary to reflect the modification) must be completed and submitted with a copy of the Department's written notification which allows the modification.

Entries on the report forms should be either typewritten or neatly printed in black ink. Attach additional sheets if space on the pages is insufficient or supplementary information is required or appropriate.

**INSTRUCTIONS FOR COMPLETING THE FORM:**

**SECTION 1:** Provide facility information and identify whether the facility operated waste during the year.

**SECTION 2:** Identify the amount of each type of waste generated and treated on-site (if a generator permitted to treat on-site), or if a commercial facility, the amount received by the facility from the generators and how it was processed. If transferred off-site by the generator or if a transfer facility, identify the treatment facility where the waste was sent.

**SECTION 3:** If a treatment facility, identify the names and addresses of disposal facilities where treated waste was disposed.

**SECTION 4:** Identify any unauthorized waste that was received at the facility.

**SECTION 5:** If required, provide updated cost estimates and financial assurance documentation.

**SECTION 6:** Identify any problems which occurred at the facility.

**SECTION 7:** Identify any changes from the approved permit or permit documentation.

**SECTION 8:** Identify any additional permit or consent order reporting requirements.

**SECTION 9:** Sign and date the form and follow the instructions provided for submission of form.



\*This page for reference only. Please do not return with submittal.

### New York State Planning Units & Regions

When completing the annual report, please use the *Planning Unit* listed below that corresponds with the municipality and county. **Note: The Planning Unit is not the DEC Region.**

DEC Region	Planning Unit	County	Municipality
1	Glen Cove	Nassau	Glen Cove (City)
	Hempstead		Hempstead (Town)
	Long Beach		Long Beach (City)
	North Hempstead Solid Waste Management Authority		North Hempstead (Town), <i>except 8 villages (see below)</i>
	Oyster Bay Solid Waste Disposal District		Oyster Bay (Town), <i>except 16 villages (see below)</i>
	Babylon	Suffolk	Babylon (Town)
	Brookhaven		Brookhaven (Town)
	East Hampton		East Hampton (Town)
	Fishers Island Waste Management District		Fishers Island
	Huntington		Huntington (Town)
	Islip Resource Recovery Agency		Islip (Town)
	Riverhead		Riverhead (Town)
	Shelter Island		Shelter Island (Town)
	Smithtown		Smithtown (Town)
	Southampton		Southampton (Town)
Southold	Southold (Town), <i>except Fishers Island</i>		
2	New York City	Bronx	Bronx
		Kings	Kings (Brooklyn)
		New York	New York (Manhattan)
		Queens	Queens
		Richmond	Richmond (Staten Island)
3	Dutchess County	Dutchess	
	Orange County	Orange	
	Putnam County	Putnam	
	Rockland County Solid Waste Management Authority (RCSWMA)	Rockland	
	Sullivan County	Sullivan	
	Ulster County Resource Recovery Agency (UCRRA)	Ulster	
	Westchester County	Westchester	
4	Colonie	Albany	Cohoes (City)
			Colonie (Town)
			Colonie (Village)
			Menands (Village)
			Watervliet (City)
	Capital Region Solid Waste Management Partnership	Albany	Albany (City)
			Altamont (Village)
			Berne (Town)
			Bethlehem (Town)
			Green Island (Town/Village)
			Guilderland (Town)
			Knox (Town)
			New Scotland (Town)
			Rensselaerville (Town)
			Voorheesville (Village)
			Westerlo (Town)

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4		Rensselaer	East Greenbush (Town) Rensselaer (City)		
	Eastern Rensselaer County Solid Waste Management Authority	Rensselaer	Castleton-on-Hudson (Village) Hoosick Falls (Village) Nassau (Village) Pittstown (Town) Schaghticoke (Town/Village) Stephentown (Town) Valley Falls (Village)		
			Columbia County	Columbia	All, <i>except Town of Canaan</i>
			Delaware County	Delaware	
			Greene County	Greene	
			Montgomery County	Montgomery	
			Otsego County	Otsego	
			Schoharie County	Schoharie	
	Schenectady County	Schenectady			
	5	Clinton County	Clinton		
Essex County		Essex			
County of Franklin Solid Waste Management Authority (CFSWMA)		Franklin			
Fulton County		Fulton			
Hamilton County		Hamilton			
Saratoga County		Saratoga			
Warren County		Warren			
Washington County		Washington			
6	Development Authority of the North Country (DANC)	Jefferson			
		Lewis			
		St. Lawrence			
	Oneida-Herkimer Solid Waste Authority	Oneida Herkimer			
7	Broome County	Broome			
	Cayuga County	Cayuga			
	Chenango County	Chenango			
	Cortland County	Cortland			
	Madison County	Madison			
	Onondaga County	Onondaga	All municipalities, <i>except Town and Village of Skaneateles (See below)</i>		
	Oswego County	Oswego			
	Tioga County	Tioga			
Tompkins County	Tompkins				
8	Chemung County	Chemung			
	GLOW Region Solid Waste Management Committee	Genesee			
		Livingston			
	Monroe County	Monroe			
	Ontario County	Ontario			
	Orleans County	Orleans			
	Schuyler County	Schuyler			
	Seneca County	Seneca			
	Steuben County	Steuben			
	Wayne County	Wayne			
Yates County	Yates				
9	Allegany County	Allegany			
	Cattaraugus County	Cattaraugus			
	Chautauqua County	Chautauqua			



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	GLOW Region Solid Waste Management Committee	Wyoming	
	Niagara	Niagara	
			Akron (Village)
			Alden (Town/Village)
			Angola (Village)
			Aurora (Town)
			<b>Blasdell</b> (Village)
			Boston (Town)
			Brant (Town)
			<b>Cheektowaga</b> (Town)
			Clarence (Town)
			<b>Colden</b> (Town)
			Collins (Town)
			<b>Concord</b> (Town)
			Depew (Village)
			East Aurora (Village)
			<b>Eden</b> (Town)
			Elma (Town)
			<b>Evans</b> (Town)
			Farnham (Village)
			Gowanda (Village)
			Hamburg (Town/Village)
			Holland (Town)
			<b>Lackawanna</b> (City)
			Lancaster (Town/Village)
			Marilla (Town)
			<b>Newstead</b> (Town)
			North Collins (Town/Village)
			Orchard Park (Town/Village)
			<b>Sardinia</b> (Town)
			Sloan (Village)
			Springville (Village)
			Wales (Town)
			West Seneca (Town)
9	Northeast-Southtowns Solid Waste Management Board (NEST)	Erie	
			Amherst (Town)
			Grand Island (Town)
			<b>Kenmore</b> (Village)
			Tonawanda (Town/Village)
			Williamsville (Village)
	Northwest Communities Solid Waste Management Board (NWCB)	Erie	

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### Municipalities Not Currently Affiliated With a Recognized Planning Unit

DEC Region	County	Non-Member Municipality	
1	Nassau	North Hempstead	Great Neck Estates (Village)
			Great Neck Plaza (Village)
			Mineola (Village)
			New Hyde Park (Village)
			Plandome (Village)
			Plandome Manor (Village)
			Westbury (Village)
			Williston Park (Village)
		Oyster Bay	Bayville (Village)
			Brookville (Village)
			Centre Island (Village)
			Cove Neck (Village)
			Glenwood – Glen Head Garbage District
			Lattington (Village)
			Laurel Hollow (Village)
			Matinecock (Village)
			Mill Neck (Village)
			Muttontown (Village)
			Old Brookville (Village)
			Old Westbury (Village) (portion)
			Oyster Bay Cove (Village)
Roslyn Harbor (Village) (portion)			
Sea Cliff (Village)			
Upper Brookville (Village)			
4	Albany	Coeymans (Town)	
		Ravena (Village)	
	Rensselaer	Berlin (Town)	
		Brunswick (Town)	
		Grafton (Town)	
		Hoosick (Town)	
		Nassau (Town)	
		Petersburg (Town)	
		Poestenkill (Town)	
		North Greenbush (Town)	
		Sand Lake (Town)	
		Schodack (Town)	
		Troy (City)	
Columbia	Canaan (Town)		
7	Onondaga	Skaneateles (Town/Village)	
9	Erie	Buffalo (City)	

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New York State Department of Environmental Conservation  
Division of Materials Management  
Bureau of Solid Waste Management

## MATERIAL MANAGEMENT PROGRAM CONTACTS

### CENTRAL OFFICE

Bureau of Solid Waste Management  
625 Broadway  
Albany, NY 12233-7260  
Phone: (518) 402-8678

For Submission of Solid Waste Management Facility Annual Reports only:

Fax: (518) 402-9041

Email: [swmfannualreport@dec.ny.gov](mailto:swmfannualreport@dec.ny.gov)

### REGIONAL OFFICE ADDRESS & LEAD CONTACT PERSON

#### REGION 1 (Nassau, Suffolk)

Syed Rahman / David Gibb  
SUNY @ Stony Brook  
50 Circle Road  
Stony Brook, NY 11790  
Phone: (631) 444-0375  
SWMFannualreportR1@dec.ny.gov

#### REGION 2 (Bronx, Kings, New York, Queens, Richmond)

Mahmoud Assi  
47-40 21st Street  
Long Island City, NY 11101-5407  
Phone: (718) 482-4896  
SWMFannualreportR2@dec.ny.gov

#### REGION 3 (Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester)

Lee Reiff  
21 South Putt Corners Road  
New Paltz, NY 12561  
Phone: (845) 256-3134  
SWMFannualreportR3@dec.ny.gov

#### REGION 4 (Albany, Columbia, Delaware, Greene, Montgomery, Otsego, Rensselaer, Schenectady, Schoharie)

Brian Maglienti  
1130 North Westcott Road  
Schenectady, NY 12306  
Phone: (518) 357-2085  
SWMFannualreportR4@dec.ny.gov

#### REGION 5 (Clinton, Essex, Franklin, Fulton, Hamilton, Saratoga, Warren, Washington)

Jessie Sangster  
1115 State Route 86, PO Box 296  
Ray Brook, NY 12977  
Phone: (518) 897-1266  
SWMFannualreportR5@dec.ny.gov

#### REGION 6 (Herkimer, Jefferson, Lewis, Oneida, St. Lawrence)

Gary McCullouch  
317 Washington Street  
Watertown, NY 13601  
Phone: (315) 785-2513  
SWMFannualreportR6@dec.ny.gov

#### REGION 7 (Broome, Cayuga, Chenango, Cortland, Madison, Onondaga, Oswego, Tioga, Tompkins)

Steve Perrigo  
615 Erie Boulevard West  
Syracuse, NY 13204  
Phone: (315) 426-7419  
SWMFannualreportR7@dec.ny.gov

#### REGION 8 (Chemung, Genesee, Livingston, Monroe, Ontario, Orleans, Schuyler, Seneca, Steuben, Wayne, Yates)

Greg MacLean  
6274 East Avon-Lima Road  
Avon, NY 14414  
Phone: (585) 226-5411  
SWMFannualreportR8@dec.ny.gov

#### REGION 9 (Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Wyoming)

Peter Grasso  
700 Delaware Avenue  
Buffalo, NY 14209  
Phone: (716) 851-7220  
SWMFannualreportR9@dec.ny.gov

December 2022