

Utah Division of Water Quality



UTAH DEPARTMENT *of*
ENVIRONMENTAL QUALITY
**WATER
QUALITY**

Dental Rule Implementation

United States
Environmental Protection
Agency

Office of Water
Washington, DC 20460

EPA-821-R-16-005
December 2016



Technical and Economic Development Document for the Final Effluent Limitations Guidelines and Standards for the Dental Category

Oral Health Topics

Amalgam Separators and Waste Best Management

Key Points

- Dentists are encouraged to follow dental best management practices for amalgam waste handling and disposal.
- The EPA requires amalgam separators to achieve at least a 95% removal efficiency.
- The EPA final rule on amalgam separators is effective as of July 14, 2017, and the date for compliance is July 14, 2020.

Introduction

Current estimates indicate that less than 1% of the mercury released into the environment comes from dental preparations and uses.^{1, 4} The majority of mercury from dentistry-related origin is in the form of elemental mercury in amalgam and not methylmercury, which is the form of mercury of particular environmental concern. Notwithstanding, following are insights about stewardship efforts with respect to dental amalgam in the waste stream.

American National Standards Institute/American Dental Association (ANSI/ADA) Standard No. 109 defines amalgam waste as including amalgam (scrap), chair-side trap filters containing amalgam vacuum pump filters containing amalgam, saliva ejectors if used in dental procedures involving amalgam, used amalgam capsules, extracted teeth with amalgam restorations, and waste items that are contaminated with amalgam.⁴

Amalgam Waste Best Management Practices

Dental best management practices for amalgam waste handling and disposal⁴ include use of chair-side traps, use of amalgam separators, regular inspection and cleaning of traps, and use of appropriate commercial waste service to recycle and/or dispose of collected amalgam (Table). Compliance with the EPA final rule on amalgam separators is required.

Table. Best Management Practices for Amalgam Waste*

Do	Don't
Do use preencapsulated alloys and stock a variety of capsule sizes	Don't use bulk mercury
Do recycle used disposable amalgam capsules	Don't put used disposable amalgam capsules in biohazard containers
Do salvage, store, and recycle non-contact (scrap) amalgam	Don't put non-contact amalgam waste in biohazard containers, infectious waste containers (red bags), or regular garbage
Do salvage (contact) amalgam pieces from restorations after removal and recycle their contents	Don't put contact amalgam waste in biohazard containers, infectious waste containers (red bags), or regular garbage
Do use chair-side traps, vacuum pump filters, and amalgam separators to retain amalgam and recycle their contents	Don't rinse devices containing amalgam over drains or sinks
Do recycle teeth that contain amalgam restorations (Note: Ask your recycler whether extracted teeth with amalgam restorations require disinfection)	Don't dispose of extracted teeth that contain amalgam restorations in biohazard containers, infectious waste containers (red bags), sharps containers, or regular garbage
Do manage amalgam waste through recycling as much as possible	Don't flush amalgam waste down the drain or toilet
Do use line cleaners that minimize dissolution of amalgam	Don't use bleach or chlorine-containing cleaners to flush wastewater lines

<https://www.ada.org/en/member-center/oral-health-topics/amalgam-separators>

Amalgam Separators

Amalgam separators remove amalgam particles from the wastewater to reduce the amount of amalgam entering the sewage system. Amalgam separators are devices designed to capture amalgam particles from dental office wastewater through sedimentation, filtration, centrifugation, or a combination of these mechanisms.³ Some separators may also use ion exchange technology to remove mercury from wastewater.⁵ Whenever there is need for plumbing work or other activities that might dislodge amalgam waste adhering to the inside of the pipes, it is recommended that steps be taken to minimize potential health or environmental issues.

The Environmental Protection Agency (EPA) [regulation on the use of amalgam separators](#) was recently finalized⁶ and is effective as of July 14, 2017 with the date for compliance being July 14, 2020.

<https://www.ada.org/en/member-center/oral-health-topics/amalgam-separators>

Frequently Asked Questions for Control Authorities on the Dental Rule (40 CFR Part 441)

1. Does the dental office category rule apply to dental facilities that discharge to publicly owned treatment works (POTWs) (e.g., municipal sewage system) that have a dental amalgam program?

Yes. The federal rule applies to dental dischargers irrespective of any state or local dental amalgam program.

2. Is a dental discharger considered an “industrial user”?

Yes. An “industrial user” is a nondomestic source of indirect discharge into a POTW. Dental facilities are therefore considered industrial users under the general pretreatment regulations in 40 CFR 403.10. This rule does not alter that status. EPA has established that dental dischargers are not significant industrial users (SIUs) or categorical industrial users (CIUs) as defined in 40 CFR part 403 unless designated as such by the control authority.

3. Are control authorities required to identify all dental dischargers?

Because dental dischargers are industrial users as explained in question two, the requirements of §122, which pertain to control authority identification and oversight of all industrial users, apply. Because dental dischargers are generally neither SIUs nor CIUs per 40 CFR §441.10(f), they are not required, under 40 CFR §403, to be individually identified in the POTW’s annual report or National Discharge Elimination System (NPDES) permit application, unless otherwise required under applicable state or local authorities.

4. As a control authority, what are my oversight and enforcement responsibilities regarding dental dischargers?

As noted in section VI.D.4 of the Preamble to this rule, “Control Authorities have discretion to determine the appropriate manner of oversight, compliance assistance, and enforcement (40 CFR 403.164). However, while dental dischargers are not CIUs or SIUs, they continue to be industrial users as defined broadly at 40 CFR §403.3 as a “source of Indirect Discharge.” 40 CFR §403.8(f) directs control authorities to establish procedures and standards to identify all IUs, including dental dischargers, to ensure compliance with the general and specific prohibitions in order to protect against pass through and interference with the POTW’s operations. However, control authorities, however, have discretion and flexibility on what those requirements should be for dental dischargers. As a POTW’s procedures are tailored to the capacity and capability of each POTW, NPDES permit requirements for the individual receiving water body, they will be different for each POTW. Refer to your program’s procedures and NPDES permit conditions to understand how they relate to industrial users. If necessary, control authorities have the option to modify their otherwise applicable procedures to dental dischargers. In some circumstances, such a modification is considered a substantial modification, which has special requirements described in 40 CFR §403.164.

Control authorities may work with their approval authority for assistance with questions on handling specific oversight, enforcement or program modification questions.

5. What are the recordkeeping requirements for the dental office category rule for a control authority?

The rule does not impose additional recordkeeping requirements on a control authority. See the recordkeeping requirements for a control authority found in 40 CFR §403.12(o).

6. Does a dental discharger that places or removes amalgam and submitted a one-time compliance report need to submit another one-time compliance report if there are changes to the information in the report (e.g., I replace my amalgam separator or change the total number of chairs)?

No. If, however, a dental discharger transfers ownership of the facility, the new owner must submit a one-time compliance report. In addition, if a dental discharger submits a one-time compliance report certifying that the dental discharger does not place or remove dental amalgam under limited circumstances but the dental discharger changes the practice such that the information in the report is not accurate, a new one-time compliance report should be submitted that includes the information for dental dischargers subject to the standards of Part 441 (see 40 CFR §441.50(a)(3)(iii)).

7. Can control authorities modify the language in the sample one-time compliance report?

Yes. The sample form for the one-time compliance report developed by EPA contains the minimum information that dental facilities must submit in a one-time compliance report to comply with the rule. Control authorities may request additional information on their one-time compliance report with the provisions of their pretreatment program’s legal authority, or in accordance with applicable state or local laws. EPA recommends that control authorities cite the authority under which they are requesting additional information, should they choose to do so. A sample one-time compliance report is available for download on EPA’s website here: <https://www.epa.gov/eg/dental-effluent-guidelines>

8. Does the 2015 NPDES Electronic Reporting Rule (40 CFR Part 127) require dentists to submit their one-time compliance reports electronically?

No. The 2015 NPDES Electronic Reporting Rule (“NPDES eRule”) does not require electronic submission of one-time compliance reports because it is not listed in Table 1 of Appendix A of the NPDES eRule (40 CFR 127).

9. Can a control authority set up an electronic reporting system to collect the one-time compliance reports?

The dental office category rule does not preclude control authorities from collecting their reports electronically. Note: If a control authority establishes an electronic reporting system, it must be compliant (Cross-Media Electronic Reporting Rule, 40 CFR §3).

10. Does the dental office category rule apply to septage haulers who service the septic tank facilities?

No. The dental office category rule applies only to dental dischargers – i.e. a facility where the practice of dentistry is performed that discharges wastewater to publicly owned treatment works (40 CFR 441.20(e)). It does not apply to dental discharges to septic systems.

Note: dental discharges to septic systems would be subject to regulation under the Safe Drinking Water Act Underground Injection Control Program, which may be implemented by EPA or the State depending on whether the State has primary enforcement responsibility. Other state and local regulations regarding the disposal of nondomestic wastewater to septic systems may also apply. Also note that control authorities may impose controls on the receipt of hauled nondomestic septage under federal Clean Water Act authorities.

11. There is a dental facility that collects all amalgam process wastewater in a wastewater retaining tank, which is then pumped out of the tank and transferred to a privately owned wastewater treatment facility (a Centralized Waste Treatment, or CWT, facility as defined in 40 CFR Part 437). The CWT does not discharge the dental amalgam process wastewater to a POTW. Are these dentists subject to the rule and thereby required to submit a one-time compliance report?

No. See §441.10(e). Dental facilities that do not discharge amalgam process wastewater to a POTW are not subject to this rule. As EPA noted in the preamble to the final rule, “[d]ental offices using wastewater retention tanks must ensure that all amalgam process wastewater is collected by the wastewater retention tanks. Any uncollected amalgam process wastewater that is discharged to the POTW is subject to this rule.” 82 FR 27160, footnote 4.

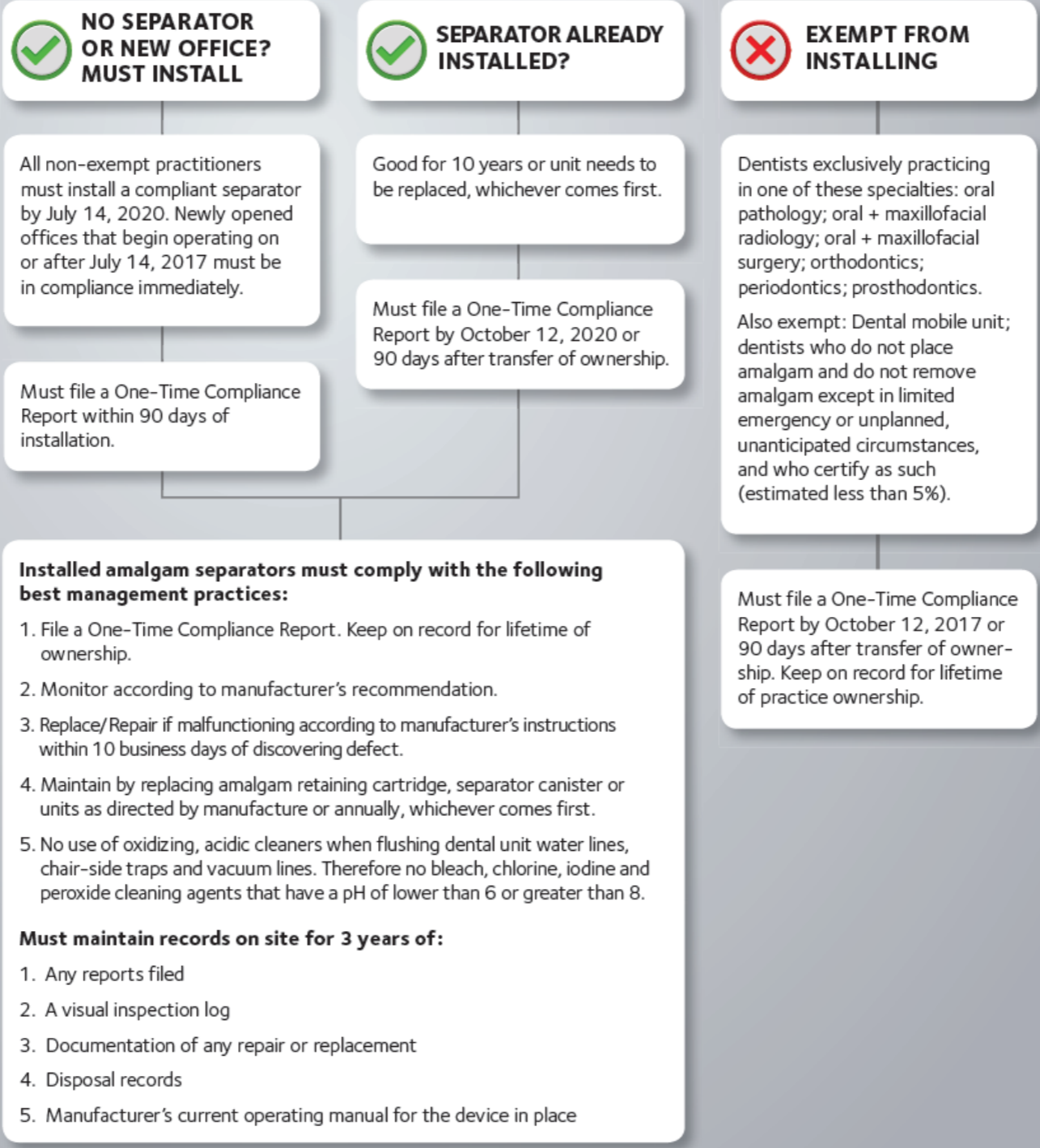
12. Are there any requirements in the dental office rule that apply to POTWs that discharge to a water body listed as impaired on the State’s CWA 303(d) list due to mercury?

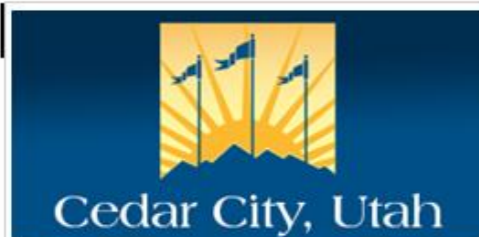
No. Discharge limits for a direct discharger, such as a POTW, are established in the NPDES permit for the facility by the NPDES permitting authority. These requirements are separate from the pretreatment requirements for dental dischargers established in part 441, which are self-implementing. Additionally, as dental dischargers are neither CIUs or SIUs, they do not need to be identified in the NPDES permit or application per the NPDES application requirements at 40 CFR 122.21(j)(6).

13. What are the regulatory consequences for dental dischargers that fail to comply with Part 441?

Part 441 contains Pretreatment Standards and Requirements applicable to specific industrial users of a POTW (dental dischargers). Pursuant to Section 307(d) of the Clean Water Act, a failure to comply with such applicable standards and requirements would constitute a violation of the Clean Water Act and potentially therefore subject the industrial user, in this case the dental discharger, to federal civil and criminal penalties under Section 309 of the Clean Water Act, and to civil and criminal penalties under state and local law implementing the CWA pretreatment program.

EPA Amalgam Recycling Rule





Friendly Reminder

If you have questions,
please contact us

Pete Sury: 435-865-4552
spete@cedarcity.org

Kurt Raffield: 435-867-9430
rkurt@cedarcity.org

Cedar City Corporation
CCRWF Pretreatment Program
10 North Main Street
Cedar City, UT 84720



Dental Amalgam Rule:

- **New dental practices** have 90 days to install an Amalgam Separator.
- **Existing dental practices** have until July 14, 2020 to install an Amalgam Separator.
- **Existing dental practices** who installed an Amalgam Separator, prior to June 14, 2020, (and which satisfies the requirements i.e. (a)(1)(i) and (ii) of 40 CFR 441.30)) are compliant with the rule until the existing Separator is replaced or until June 14, 2017, whichever is sooner.
- **In the event that an Amalgam Separator is not functioning properly**, device shall be repaired consistent with MFG instructions or replaced as soon as possible, but no later than ten (10) business days.

HAPPY NEW YEAR!



Cedar City Corporation
CCRWTF Pretreatment Program
10 North Main Street
Cedar City, UT 84720

**If you have questions,
please contact us**

Pete Sury: 435-865-4552
spete@cedarcity.org

Kurt Raffield: 435-867-9430
rkurt@cedarcity.org

Dental Amalgam Rule:

- **New dental practices** have 90 days to install an Amalgam Separator.
- **Existing dental practices** have until July 14, 2020 to install an Amalgam Separator.
- **Existing dental practices** who installed an Amalgam Separator, prior to June 14, 2020, (and which satisfies the requirements i.e. (a)(1)(i) and (ii) of 40 CFR 441.30)) are compliant with the rule until the existing Separator is replaced or until June 14, 2017, whichever is sooner.
- **In the event that an Amalgam Separator is not functioning properly**, device shall be repaired consistent with MFG instructions or replaced as soon as possible, but no later than ten (10) business days.

Table. Best Management Practices for Amalgam Waste⁴

Do	Don't
<i>Do use precapsulated alloys and stock a variety of capsule sizes</i>	<i>Don't use bulk mercury</i>
<i>Do recycle used disposable amalgam capsules</i>	<i>Don't put used disposable amalgam capsules in biohazard containers</i>
<i>Do salvage, store, and recycle non-contact (scrap) amalgam</i>	<i>Don't put non-contact amalgam waste in biohazard containers, infectious waste containers (red bags), or regular garbage</i>
<i>Do salvage (contact) amalgam pieces from restorations after removal and recycle their contents</i>	<i>Don't put contact amalgam waste in biohazard containers, infectious waste containers (red bags), or regular garbage</i>
<i>Do use chair-side traps, vacuum pump filters, and amalgam separators to retain amalgam and recycle their contents</i>	<i>Don't rinse devices containing amalgam over drains or sinks</i>
<i>Do recycle teeth that contain amalgam restorations (Note: Ask your recycler whether extracted teeth with amalgam restorations require disinfection)</i>	<i>Don't dispose of extracted teeth that contain amalgam restorations in biohazard containers, infectious waste containers (red bags), sharps containers, or regular garbage</i>
<i>Do manage amalgam waste through recycling as much as possible</i>	<i>Don't flush amalgam waste down the drain or toilet</i>
<i>Do use line cleaners that minimize dissolution of amalgam</i>	<i>Don't use bleach or chlorine-containing cleaners to flush wastewater lines</i>

Best Management Practices for Amalgam Waste



American Dental Association • October 2007

ADA American Dental Association®
America's leading advocate for oral health

ation demonstrates how to
dental amalgam waste to help
ent.

Amalgam Waste Terms

Device is an apparatus such as
vacuum pump filter or amalgam
captures amalgam particles.

A mixture of liquid and solid
particles within vacuum pump filters,
traps, or other amalgam capture
devices used.

Elemental mercury is amalgam that has been in
contact with dentin. Examples are extracted
teeth restorations, carving scrap
metal, and amalgam captured by
traps, or screens.

Best Management Practices are a series
of handling and disposal practices
that are not limited to, initiating bulk
mercury programs, using chair side
separators compliant with ISO
11143, collection, inspecting and
recycling or using a commercial
service to dispose of the amalgam

Amalgam capsules are the individually
wrapped over after mixing
of dental amalgam.

Amalgam (scrap) is excess mix
of a dental procedure.

Measures against the use of bulk
mercury so referred to as liquid or raw
mercury in dental office. Since 1984,
the use of pre-capsulated

Elemental mercury in the
recycling cycle. Check with a licensed
recycler whether they will accept bulk
mercury or down the drain. You also
check with your state regulatory agency and
check if a bulk mercury collection

program is available. Such bulk mercury collection
programs provide an easy way to dispose of bulk
mercury.

© 2004, 2007 American Dental Association. All Rights Reserved. Noncommercial use, reproduction and distribution of all or any portion of the American Dental Association's Best Management Practices for Amalgam Waste is permitted solely for educational or scientific purposes, provided that this copyright notice is prominently displayed on each copy of the work. Third parties are expressly prohibited from creating derivatives of this work without the prior written permission of the American Dental Association. This work is educational only and does not constitute legal or professional advice.

Steps for Recycling Amalgam Waste

1. Stock amalgam capsules in a variety of sizes to minimize the amount of amalgam waste generated.
2. Amalgam waste may be mixed with body fluids, such as saliva, or other potentially infectious material, so use personal protective equipment such as utility gloves, masks, and protective eyewear when handling it.
3. Contact an amalgam waste recycler about any special requirements that may exist in your area for collecting, storing and transporting amalgam waste.
If you need to find a recycler, check with your city, county or local waste authority to see whether they have an amalgam waste recycling program.
4. Store amalgam waste in a covered plastic container labeled "Amalgam for Recycling" or as directed by your recycler. Your recycler may have its own requirements, so ask your recycler about containers and what may be placed in them.
5. Look for recyclers who comply with the ADA-ANSI standard. This standard is meant to encourage recycling.

Questions to Ask Your Amalgam Waste Recycler

Below is a list of questions you may want to ask your amalgam waste recycler. Note that not all recycling companies accept every type of amalgam waste, and the services offered by recyclers vary widely. The ADA recommends that you contact a recycler before recovering amalgam and ask about any specific handling instructions the recycler may have. Importantly, select a reputable company that complies with applicable federal and state law and provides adequate indemnification for its acts and omissions. Look for recyclers who comply with ANSI/ADA Specification 109: Procedures for Storing Dental Amalgam Waste and Requirements for Amalgam Waste Storage/Shipments Containers.¹ This standard is meant to encourage recycling.

amalgam

- Do you pay for clean non-contact amalgam (scrap)?
- Do you accept extracted teeth with amalgam restorations?
- Does your company have an EPA or applicable state license?
- Does the company use the proper forms required by the EPA and state agencies?
- Do your procedures comply with ANSI/ADA Specification 109: Procedures for Storing Dental Amalgam Waste and Requirements for Amalgam Waste Storage/Shipments Containers?*

Practices for Amalgam Waste

DON'T	
	Don't use bulk mercury
	Don't put used disposable amalgam capsules in biohazard containers, infectious waste containers (red bags) or regular garbage
im	Don't put non-contact amalgam waste in biohazard containers, infectious waste containers (red bags) or regular garbage
m	Don't put contact amalgam waste in biohazard containers, infectious waste containers (red bags) or regular garbage
e	Don't rinse devices containing amalgam over drains or sinks
is.	Don't dispose of extracted teeth that contain amalgam restorations in biohazard containers, infectious waste containers (red bags), sharps containers or regular garbage
	Don't flush amalgam waste down the drain or toilet
	Don't use bleach or chlorine-containing cleaners to flush wastewater lines

¹International Standards Organization 11143:1999. Dental Equipment – Amalgam Separators.

²American Dental Association Council on Scientific Affairs. American National Standard/American Dental Association Specification No. 109. Procedures for storing dental amalgam waste and requirements for amalgam waste storage/shipment containers, 2006.

How to Integrating BMPs Into Your Practice

Scrap amalgam

act, scrap amalgam in wide-
mouthed, airtight container that is marked "Non-contact
Waste for Recycling."

When container lid is well sealed,
when container is full, send it to a recycler.

Vacuum pump filters

Change the filter according to the manufacturer's
recommended schedule. Note: The following
instructions assume that your recycler will accept
whole filters; some recyclers require different
handling of this material, so check with your
recycler first.

Remove the filter.
Put the lid on the filter and place the sealed
container in the box in which it was originally
shipped. When the box is full, the filters should be
recycled.

Amalgam separators

Select an amalgam separator that complies with
ISO 11143.
Follow the manufacturer's recommendations for
maintenance and recycling procedures.

Line cleaners

Use non-bleach, non-chlorine-containing line
cleaners, which will minimize amalgam dissolution,
such as those listed in the Additional Resources
section of this document.

Side traps

Expose the trap.
Remove the trap and empty the contents into a
sealed airtight container that is marked
"Amalgam Waste for Recycling."

Resources

Articles published in the Journal of the American Dental Association are available through the ADA Division
of Research and are available to ADA members online.
For information on proper mercury hygiene practices see "Dental Mercury Hygiene Recommendations",
2006;137(10):1419-25.

For information on choosing line cleaners that minimize the dissolution of mercury from amalgam see: "The effect of
disinfectants and line cleaners on the release of mercury from amalgam" 2006;137(10):1419-25.

For information on amalgam separators see:

- "Laboratory evaluation of amalgam separators" 2002;133:577-89.
- "Evaluating amalgam separators using an international standard" 2006;137:999-1005.
- "Purchasing, installing and operating dental amalgam separators: Practical issues" 2003 134: 1054-65.

Cedar City Regional Wastewater Treatment Facility
(CCRWTF)
Pretreatment Program

*Frequently Asked Questions on the Dental Office
Category Rule:*

The Cedar City Regional Wastewater Treatment Facility (CCRWTF) Pretreatment Program had recently sent your Dental Practice a letter with an enclosed One-Time Compliance Report and Questionnaire. The Report/Questionnaire are not geared toward causing you problems but instead are designed to help ensure your office and the City are in compliance with new Federal environmental regulations.

As pertaining to your completion and submission of subject Report/Questionnaire, the Cedar City Pretreatment Program understands how overwhelming regulations are to assimilate. Therefore, please know we are here to help. Based on the Dental Office Category Rule at 40 CFR Part 441, below please find FAQs of which may grant you additional guidance and/or understanding into your Dental Practice regulatory applicability:

Who must comply with this rule?

The vast majority of dental facilities that discharge wastewater into a publicly owned treatment works (POTW) (e.g., municipal sewage system) are subject to this rule ("dental dischargers"). However, there are some exceptions.

Dental dischargers that do not place dental amalgam, and do not remove dental amalgam except in limited emergency or unplanned, unanticipated circumstances are exempt from any further requirements as long as they certify as such in a one-time compliance report to their Control Authority.

Dental dischargers that exclusively practice one or more of the following specialties are not subject to any of the rule's requirements, including submission of a one-time compliance report to their Control Authority:

- Oral pathology
- Oral and maxillofacial radiology
- Oral and maxillofacial surgery
- Orthodontics
- Periodontics
- Prosthodontics

1 | Page

Yes. For an existing source see [§ 441.30\(a\)\(1-2\)](#). For a new source, see [§ 441.40](#).

2 | Page

Yes. See [§ 441.30](#).

3 | Page

...but not limited to...") is not an exhaustive list of oxidizing or acidic cleaners or qualities that make a cleaner oxidizing or acidic. For example, a cleaner that is oxidizing would be prohibited even if its pH is between 6 and 8.

Does the prohibition on the use of oxidizing or acidic cleaners in dental unit water lines apply to cleaners used in the water supply lines that connect to items such as handpieces, ultrasonic scalers or air/water syringes?

No. The purpose of the best management practice (BMP) specified in [§ 441.30\(b\)\(2\)](#) is to prohibit the use of cleaners that solubilize mercury from dental amalgam in the wastewater lines in a dental facility.

4 | Page

5 | Page

rule's requirements, including submission of a mobile unit is a specialized mobile self-entry services at multiple locations.

cess wastewater into a POTW are also not mission of a one-time compliance report to their charge amalgam process wastewater into a

§ 441.10 (Applicability).

rule are detailed in the rule. Here, they are

om all amalgam process wastewater via at meet the standard of the final rule. See [§ 40](#) for a new source.

ices. See [§ 441.30\(b\)](#) for an existing source and [§](#)

.50(a).

ain records documenting compliance. See [§](#)

charging into POTWs prior to **July 14, 2017** ndards by **July 14, 2020**, and submit a one-time

urs after **July 14, 2017** ("new sources") must be nit a one-time compliance report certifying such

the deadlines for a new owner to submit a one-

rship, the new owner must submit a new one-ber **12, 2020**, or if the transfer occurs **after July** ew source" dental discharger transfers e compliance report to the Control Authority no

m separator I install?

existing separator?

(1)(iii) of the rule allows dental dischargers that had installed and were using an r to **June 14, 2017** to continue to use it until **June 14, 2027** if it is functioning eed to be replaced. This is referred to as a "grandfathering" provision or clause. e a one-time compliance report certifying such by **October 12, 2020**. If the ets the standards of the rule, see [§ 441.30\(a\)\(1-2\)](#), the grandfathering provision

covered by the grandfather clause transfers ownership, the new owner may dfathered separator until **June 14, 2027** if it is functioning properly and does not ie new owner must still file the one-time compliance report.

ates that are relevant to the grandfathering provision in § 441.30(a)(1)(iii)?

egister publication of the final rule, there was a typographical error in one of the ring provision. The corrected version of the provision is: "A dental discharger operates an amalgam separator that was installed at a dental facility prior to the requirements of paragraphs **(a)(1)(i) and (ii)** of this section until the existing described in paragraph **(a)(1)(v)** of this section or until **June 14, 2027**, whichever dded)

taining tank technology that collects all amalgam process wastewater and my discharge any amalgam process wastewater to a POTW. Am I exempt from the Rule?

long as the dental facility does not discharge any amalgam process wastewater vise, it is not subject to any of the rule's requirements, including submission of a port to their Control Authority.

technology that removes amalgam from wastewater as efficiently as an it is a different type of device, and therefore does not qualify to meet the ISO separators. Does this device satisfy the requirements of this rule?

ision at [§ 441.30\(a\)\(2\)](#) that allows the performance standard of the rule to be amalgam-removing technology other than an amalgam separator (i.e., equivalent is provision to allow use of amalgam removal devices that are equivalent to several respects (e.g. the percentage of removal of mass of solids) but that may gam separator classification. The equivalent device is required to meet the same val efficiencies, as specified in [§ 441.30\(a\)\(1-2\)](#) or [§ 441.40](#).

ordkeeping requirements for dental dischargers?

pection or maintenance requirements for dental dischargers?

time compliance report?

liance report that includes the information required by the rule [etal-effluent-guidelines](#).

ase contact your Control Authority to ensure that you have your Control Authority. In addition, you may be subject to nts in accordance with state and local law.

if their one-time compliance report?

ts should obtain and send their one-time compliance report to Your Control Authority is either a local wastewater utility, a state gional Office.

ima, Connecticut, Mississippi, Nebraska or Vermont: your Control Contact information for each state is available at us-national-pretreatment-program (select the "State Agency

contact your U.S. EPA Regional Office, your local wastewater treatment Coordinator to identify your Control Authority. ion for EPA headquarters, EPA Regions, and state agencies is es/contact-us-national-pretreatment-program (select the

standards in the rule and has submitted a one-time compliance Do I or the new owner need to submit a new one-time

nership of the facility, then the new owner must submit a new trol Authority. See above for compliance deadlines and [§](#)

my one-time compliance report electronically?

oxidizing or acidic cleaners in dental unit water lines, chair-side

the use of cleaning products that may be used in dental y lines such as handpieces, ultrasonic scalers, or air/water products may eventually be indirectly discharged through a ibition in [§ 441.30\(b\)\(2\)](#) was not intended to prohibit dental e products are used in water supply lines to ensure the ir patient's mouth.

considered a hazardous waste under the Resource

likely to be a hazardous waste under RCRA due to the However, dental offices producing less than 100 kg of of acute hazardous waste per month are considered "Very ulated under [§ 262.14](#)) and are exempt from most RCRA dous waste (Note that VSQGs were formerly called ators" (CESQGs) but were renamed in **November 2016**). EPA lecting amalgam waste to be above the VSQG threshold.

waste it generates in a calendar month, not just the amount ator category is appropriate. If you believe you may qualify ce that produces 100-1000 kg of hazardous waste per month er month) or a "Large Quantity Generator" (dental office waste per month OR more than 1 kg of acute hazardous s hazardous waste authority to understand your dous waste. Links to state environmental agencies are on rs/links-hazardous-waste-programs-and-us-state-

irement), not a ceiling, for regulating discharges of dental additional requirements under state or local law that go ry Rule.

ng with other information, can be found on EPA's Effluent tal-effluent-guidelines.

Cedar City Regional Wastewater Treatment Facility,
(CCRWTF)

Pretreatment Dental Program:

40 CFR Part 441 – Effluent Limitations Guidelines and Standards
for the Dental Category:

Definitions:

- **POTW** = Publicly Owned Treatment Works (municipal wastewater treatment plant and sanitary sewer collection system)
- **Control Authority (CA)** = For dental practices in larger cities, the local POTW Pretreatment Program Administrator is the CA.

Exemption for Specialty Practices: - Dental specialty practices that exclusively practice oral pathology, oral and maxillofacial radiology, oral and maxillofacial surgery, orthodontics, periodontics or prosthodontics; - or are mobile units; or do not discharge to a POTW are exempt from the rule.

Partial Exemption: - Facilities that do not place dental amalgam at all AND only remove amalgam 5% or less of the total number of procedures conducted annually (One-Time Compliance Report is required) and specific internal documents (checklists etc.) may be required by CA.

Existing Source Requirements:

Equipment:

- Amalgam separators meeting ISO 11143 standards and sized as required in rule must be installed by July 14, 2020.
- If amalgam separator is currently in use, but does not meet the ISO 11143 standard and/or sizing requirements, it may continue to be used until replacement required or July 14, 2027, whichever is sooner.
- Inspections, operations and maintenance per the manufacturer's instructions are required.
 - Repairs within 10 days of discovery are required.
 - Other amalgam removal devices are permissible, but must meet the requirements in 441.30(a)(2).

Cedar City Regional Wastewater Treatment Facility,
(CCRWTF)

Pretreatment Dental Program:

Best Management Practices (BMPs):

- Waste amalgam may not be discharged to a POTW.
- Plumbing that discharges amalgam process wastewater must not be cleaned with oxidizing or acidic cleaners*, including but not limited to bleach, chlorine, iodine and peroxide outside of pH range of 6-8 standard units. * These cleaners dissolve mercury.

Reporting and Record-keeping:

- Submit One-Time Compliance Report by October 12, 2020 and keep a copy on-site for life of facility.
- Records required to be kept for three years: inspection documentation, amalgam retaining container replacements, dental amalgam pick-up or shipment documentation, repair/replacement of amalgam separator replacement, and the operating manual for the current separator in use (for maintenance purposes, dentists may want to consider retaining the operator manual for the life of the separator).
- Transfer of Ownership notification. If a dental discharger transfers ownership of the facility, the new owner must submit a new One-Time Compliance Report to the Control Authority no later than 90 days after the transfer.

New Source Requirements:

Any new dentist/dental practice that opens on or after July 14, 2017 is considered a "new source" and must comply with the Rule (amalgam separator, BMPs, record keeping) prior to discharging dental wastewater to a POTW. "New Sources" must comply immediately with all the requirements upon opening the practice and do not get the 3-year compliance period allowed for an "existing source." The New Source One-Time Compliance Report is due no later than 90 days following introduction of wastewater into a POTW

If you desire access the USEPA Dental Amalgam Rule can be achieved using this Link:

<https://www.epa.gov/eg/dental-effluent-guidelines>



