EPA United States Environmental Protection Agency

EPA Region 10 Enforcement Division

INSPECTION REPORT

Inspection Entry Date/Time	08/23/2022 09:28 AM (AKT)	Announced: No
Inspection Exit Date/Time	08/23/2022 11:28 AM (AKT)	Access: Granted
Weather	N/A	
Regulatory Program	RCRA	
Type of Inspection	CEI - Compliance Evaluation Inspection	
Company Name	Cellnetix Pathology and Laboratories	
Facility or Site Name	Cellnetix Pathology and Laboratories	
Facility/Site Identifier	AKR000204651	
Facility/Site Physical Address	2490 S. Woodworth Loop, Suite 410 (Medical Plaza 1)	
City, State, Zip Code	Palmer, AK 99645	
County/Borough	Matanuska-Susitna Borough	
Generator Status	SQG	
NAICS	621511 – Medical laboratories	
Type of Operation	Pathology Lab	
Size of Facility	1,700 sq. Ft.	
Length of Facility at Location	10 years	
Geographic Coordinates	61.56198, -149.26056	
Mailing Address/Secondary Address	Ms. Briena Mugridge, Alaska Laboratory Technical Site Supervisor 2490 S. Woodworth Loop, Suite 410 bmugridge@cellnetix.com	
City, State, Zip Code	Palmer, AK 99645	
Permit Number (If Applicable)	Not Applicable	

Additional Persons Participating in Inspection:

Name	Title	Organization	Email	Phone

Lead Inspector:

Jon Jones	JONATHAN JONES Digitally signed by JONATHAN JONES Date: 2022.10.21 12:46:35 -08'00'		
	EPA Region 10	Jones.Jon@epa.gov	(907) 271-6329

Supervisor Review:

Jen Sullivan	Jennifer A Sullivan Digitally signed by Jennifer A Sullivan Date: 2022.10.24 07:29:47 -07'00'		
	EPA Region 10	Sullivan.Jennifer.A@epa.gov	(206) 553-6978

SECTION I – INTRODUCTION

Site Entry and Purpose of the Inspection

Type of inspection: CEI - Compliance Evaluation Inspection

This was a Resource Conservation and Recovery Act (RCRA) inspection. The facility was inspected to ensure compliance with standards for hazardous waste generators (40 C.F.R. Part 262 through 272). The inspection was conducted as part of a Core Program requirement for FY 2022.

This report is based on information supplied by Cellnetix Pathology and Laboratories Facility representatives, observations made by the EPA Region 10 inspector, and records and reports maintained by the facility including, but not limited to: direct observations made by the EPA Region 10 Inspector(s), photographs taken by EPA Region 10 inspector(s), physical evidence collected by the EPA Region 10 inspector(s), measurements or samples taken by EPA Region 10 inspector(s), verbal or written statements made by and supplied by the facility representatives during or subsequent to the on-site Inspection, and materials, processes, data, photographs, or documents shown, demonstrated, or submitted to the EPA Region 10 inspector(s) by the facility representatives during or subsequent to the on-site Inspection. In addition, information gathered prior to or after the Inspection from a review of USEPA, State, and public records may be included in this report.

Attendees

Title/Organization	Name	Phone	Email	Opening Conf.	Closing Conf.
Lead Inspector/EPA Region 10	Jon Jones	9072716329	Jones.Jon@epa.gov	Yes	Yes
Alaska Laboratory Technical Site Supervisor/Cellnetix Pathology and Laboratories	Briena Mugridge	(907) 746-6791	bmugridge@cellnetix.com	Yes	Yes

Opening Conference

EPA Lead Inspector Jon Jones arrived at the Cellnetix Pathology And Laboratories at 09:28 AM (AKT) on 08/23/2022 for an inspection. I presented my credentials to and informed Briena Mugridge that this was an EPA RCRA inspection. The table above presents all the inspection participants in opening and closing conferences.

Facility/Site Information

Operating Hours	Monday through Friday, 8:00 a.m. to 6:00 p.m.
Weather Conditions	N/A (Inspection was conducted indoors)
Number of employees	10
Safety Training Provided to Inspector(s)?	No
What type of generator facility notified?	Small Quantity Generator (SQG)
What type of generator facility verified as?	Verified as SQG by Ms. Mugridge

Process Description

During the opening conference, I asked Ms. Mugridge to tell me about the wastes generated in the lab. Ms. Mugridge told me about the following wastes and generation rates:

- Silver waste (ammoniacal silver) - generated about once per year, since 2021 .
- Solvent waste – According to Ms. Mugridge, General H&E staining (staining of tissue) generates ignitable solvent waste that is shipped out every 3 to 4 weeks
- Chromic acid waste - generated since last quarter of 2021
- Picric acid waste - generated very infrequently.
- Gold Chloride waste - generated since last quarter of 2021

According to Ms. Mugridge, the facility does not generate any universal waste or used oil.

Cellnetix Pathology and Laboratories, located in Medical Plaza 1, performs specimen analytical work for the Mat-Su Regional Medical Center (adjacent to Medical Plaza 1) and Alaska Regional Hospital in Anchorage.

Building(s)

Building/Area/Sub-area	Process Description	Area of Concern
Medical Plaza 1		**No**
Cellnetix Suite 410		No
Chemical room	SAA/CAA - waste solvent - waste picric acid - waste gold chloride - waste chromic acid - waste ammoniacal silver	Yes
Cytology	Wet slide prep and staining	No
Main lab	Wet slide prep and staining	No

SECTION II – OBSERVATIONS

Building: Medical Plaza 1/Cellnetix Suite 410/Cytology			
Observation #: JJ1-OB-001	**Date:** 08/23/2022	**Contains AOC:** No	**Contains CBI:** No
Person Interviewed: Briena Mugridge		**Title:** Alaska Laboratory Technical Site Supervisor	
According to Ms. Mugridge, when stains and reagents become dirty the waste stains and reagents (D001) are poured into a one-gallon transfer container. The transfer container is then taken into the Chemical Room and the contents are poured into a 55-gallon satellite accumulation area (SAA) container.			
Photo(s) 1. IMG-20220823095644564519380.jpg 2. IMG-20220823095653565346137 7.jpg			

Building: Medical Plaza 1/Cellnetix Suite 410/Main lab			
Observation #: JJ1-OB-002	**Date:** 08/23/2022	**Contains AOC:** No	**Contains CBI:** No
Person Interviewed: Briena Mugridge		**Title:** Alaska Laboratory Technical Site Supervisor	

During the inspection, Ms. Mugridge showed me another area where waste stains and reagents were generated. Ms. Mugridge told me that when they are generated, the waste stains and reagents will be hazardous waste. Adjacent to this area, there was a small plastic tote that held two one-gallon containers. Only one container was present when the photo was taken. At the time of the inspection, these two containers were empty. Ms. Mugridge told me they will be used to collect and then transfer the hazardous waste stain and reagents to an SAA in the Chemical Room. These containers were not labeled with the words hazardous waste or a hazard indicator. I explained to Ms. Mugridge that the containers will need to be labeled with the words hazardous waste and a hazard indicator before any hazardous waste enters them.

Photo(s)

1. IMG-20220823100136136460203.jpg
2. IMG-20220823100144144307001.jpg

Building: Medical Plaza 1/Cellnetix Suite 410/Chemical room

Observation #: JJ1-OB-003 **Date:** 08/23/2022 **Contains AOC:** No **Contains CBI:** No

Person Interviewed: Briena Mugridge **Title:** Alaska Laboratory Technical Site Supervisor

At the time of the inspection, I saw a yellow flammable storage cabinet that held several quart-size SAA containers of the following lab wastes:

- waste silver (ammoniacal silver)
- waste picric acid
- waste chromic acid
- waste gold chloride

These SAA containers were all labeled with the words hazardous waste and hazard indicators.

Photo(s)

1. IMG-20220823101537153732 7507.jpg
2. IMG-20220823101547154733 5149.jpg
3. IMG-20220823101631163115 3153.jpg
4. IMG-20220823101636163620 9404.jpg
5. IMG-20220823101650165018 2052.jpg
6. IMG-20220823101705175199327.jpg
7. IMG-20220823101722172209 0.jpg

Building: Medical Plaza 1/Cellnetix Suite 410/Chemical room

Observation #: JJ1-OB-004 **Date:** 08/23/2022 **Contains AOC:** Yes **Contains CBI:** No

Person Interviewed: Briena Mugridge **Title:** Alaska Laboratory Technical Site Supervisor

During the inspection, I saw a 55-gallon SAA container being utilized to accumulate waste solvent (Stains/Reagents). Ms. Mugridge confirmed that the waste solvent in the container was hazardous waste. At the time of the inspection, the container was not labeled with the words “Hazardous Waste.” A funnel was in the bung opening so the container was not closed. The container was labeled with a hazard indicator.

Ms. Mugridge removed the funnel and screwed the bung back into the bung hole, closing the container, and she also labeled it with the words “Hazardous Waste” while I was present.

Photo(s)

1. IMG-20220823102143214333O157.jpg
2. IMG-20220823102153215325377 7.jpg
3. IMG-20220823102158215829644 4.jpg
4. IMG-20220823102206226244563.jpg
5. IMG-20220823102544254432442 56.jpg
6. IMG-20220823102554255426475 9.jpg

SECTION III – RECORDS REVIEW

Record: Preparedness and Prevention		**AOC:** Yes
Ref #: JJ1-RR-003	**Reviewed By:** Jon Jones	**Reviewed Date:** 08/23/2022

At the time of the inspection, Emergency Information was not posted next to a phone. Following the inspection, I provided Ms. Mugridge with a sample emergency information sheet that is publicly available on the McCoy Seminars RCRA website. On 9/8/2022, I received an email Ms. Mugridge that included a photo of the facility's emergency information and a photo showing that it was posted next to a phone.

Record: Inspections		**AOC:** Yes
Ref #: JJ1-RR-005	**Reviewed By:** Jon Jones	**Reviewed Date:** 10/13/2022

During the inspection, I asked Ms. Mugridge to provide me with copies of the facility's weekly hazardous waste inspections for the years 2019 through 2022. Ms. Mugridge told me that the facility's hazardous waste transporter comes to their facility to pick up their hazardous waste on a routine basis, approximately every three weeks. Ms. Mugridge told me that because of this pick-up schedule, their 55-gallon SAA container of waste solvent was never completely filled, so it has not become a central accumulation area container. According to the documents received, the facility ceased weekly hazardous waste inspections in 2020 and began conducting monthly facility inspections.

Following the inspection, I reviewed the facility's manifests again in EPA’s RCRAInfo E-manifest database. During this review, I saw that most of the manifests documented a waste pick-up of a single 55-gallon container of the waste solvent every few months, consistent with what Ms. Mugridge had explained. According to the weight on each of these manifests, there was a fluctuation between 300 to 525 pounds, consistent with the container not reaching full capacity prior to shipment. However, during this expanded review of the facility's manifests following the inspection, I identified the following instances where multiple 55-gallon containers of waste solvent were shipped indicating that weekly hazardous waste inspections should have been conducted in 2021 and 2022:

(The list below also shows prior shipments as a reference. The shipments that include a container(s) that would have required a weekly hazardous waste inspection are marked in bold.)

Manifest #	Shipment Date	# of containers	weight of containers
003185558CLE	5/25/21	1 X 55	400 pounds

003210348CLE 6/24/21 2 X 55 800 pounds
According to the previous waste shipment on 5/25/21, two, 55-gallon containers of waste solvent were generated within the following 30 days and shipped out on 6/24/21. One of the two waste solvent containers would have become full and would have become an accumulation container of waste solvent vs an SAA container. This would have resulted in the accumulation container having to be inspected during at least one week prior to the 6/24/21 shipment date.

003355180CLE 11/9/21 1 X 55 500 pounds
012646548FLE 12/10/21 2 X 55 700 pounds
The same would have applied to the two, 55-gallon containers above, between the 11/9/21 and 12/10/21 shipments. This would have resulted in the accumulation container having to be inspected during at least one week prior to the 12/10/21 shipment date.

013167018FLE 4/12/22 1 X 55 440 pounds
017106661FLE 6/20/22 3 X 55 950 pounds
The same would have applied to the three, 55-gallon containers above, between the 4/12/22 and 6/20/22 shipments. This would have resulted in the first accumulation container having to be inspected during at least six weeks prior to the 12/10/21 shipment date and the second accumulation container having to be inspected during at least three weeks prior to the 12/10/21 shipment date.

015839979FLE 8/6/22 2 X 55 900 pounds
The same would have applied to the two, 55-gallon containers above, between the 6/20/22 and 8/6/22. This would have resulted in the first accumulation container having to be inspected during at least two weeks, possibly three weeks, prior to the 12/10/21 shipment date

Document(s)

1. Manifest_013167018FLE.pdf
2. Manifest-017106661FLE.pdf
3. Manifest-015839979FLE.pdf
4. Manifest_003185558CLE.pdf
5. Manifest_003210348CLE.pdf
6. Manifest_003355180CLE.pdf
7. Manifest_012646548FLE.pdf
8. 2019 wkly inspections.pdf
9. 2020 monthly insp.pdf
10. 2021 monthly insp.pdf
11. 2022 monthly insp.pdf

Record: Manifests **AOC:** No

Ref #: JJ1-RR-006 **Reviewed By:** Jon Jones **Reviewed Date:** 10/13/2022

During another review of the facility's hazardous waste manifests following the inspection, I saw a manifest that had been signed by a Cellnetix employee who had not received DOT training. Manifest # 013166985FLE, dated 3/8/22 was signed by John Fink, MD (Cellnetix attending Pathologist). At the time, Dr. Fink had not had DOT training, which is a requirement for anyone signing a hazardous waste manifest.

I contacted Ms. Mugridge on 10/12/22 by email and spoke to her over the phone regarding this area of concern. Ms. Mugridge emailed the DOT training certificates for her staff that sign manifests, as well as an internal corrective action document regarding the staff member signing the manifest and the lack of required DOT training. I did not receive a copy of Ms. Mugridge' s DOT certificate; however, she told me that she had taken the training in April of 2019. She told me that her DOT training expired in April 2022 and that she needed to

renew it prior to signing any manifests. My review of the manifests indicated that Ms. Mugridge had not signed any manifests in 2022.
Document(s) 1. CA-Manifest_DOT.pdf 2. DOT Training Cert's.pdf 3. 10-12-22 email from facility.pdf 4. Manifest_013166985FLE.pdf

SECTION IV – AREAS OF CONCERN

The presentation of areas of concern does not constitute a formal compliance determination or violation.

Building: Medical Plaza 1	**Area:** Cellnetix Suite 410	**Sub-area:** Chemical room
JJ1-OB-004		
During the inspection, I saw a 55-gallon SAA container being utilized to accumulate hazardous waste solvent (Stains/Reagents). At the time of the inspection, the container was not labeled with the words “Hazardous Waste” and was not closed.	**Citations:** 262.15(a)(4), 262.15(a)(5)(i)	**Sections:**

Record: Preparedness and Prevention		
JJ1-RR-003		
Emergency information was not posted next to a phone.	**Citations:** 262.16(b)(9)(ii)(A), 262.16(b)(9)(ii)(B), 262.16(b)(9)(ii)(C)	**Sections:**
Record: Inspections		
JJ1-RR-005		
The facility did not conduct 13 to 14 weekly hazardous waste inspections in 2021 and 2022 when accumulation containers were stored in their Chemical Room CAA. *(The list below also shows prior shipments as a reference. The shipments that include a*	**Citations:** 262.16(b)(2)(iv)	**Sections:**

container(s) that would have required a weekly inspection are marked in bold.) Manifest #, Date, # of containers, weight 003185558CLE, 5/25/21, 1 X 55, 400 pounds **003210348CLE, 6/24/21, 2 X 55, 800 pounds** 003355180CLE, 11/9/21, 1 X 55, 500 pounds **012646548FLE, 12/10/21, 2 X 55, 700 pounds** 013167018FLE, 4/12/22, 1 X 55, 440 pounds **017106661FLE, 6/20/22, 3 X 55, 950 pounds** **015839979FLE, 8/6/22, 2 X 55, 900 pounds**		

SECTION V – CLOSING CONFERENCE AND FOLLOW UP

Closing Conference

At the end of the inspection, I held a closing conference to discuss the initial findings of my inspection with Ms. Mugridge, Cellnetix Alaska Laboratory Technical Site Supervisor. I explained that I had inspected the Cellnetix facility looking at areas where solid and hazardous wastes were managed. I discussed all the areas of concern in Section III that were identified during the on-site inspection, and I explained the follow-up process that would take place after the inspection.

SECTION VI – SAMPLING ACTIVITIES AND ANALYTICAL RESULTS - No sampling was conducted.

SECTION VII – LIST OF APPENDICES

1. Photo Log
2. Document Log

APPENDIX 1: PHOTO LOG

[Title]	IMG-20220823101537153732750 7.jpg	
08/23/2022 10:15 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
View of yellow flammable storage cabinet that held quart-size SAA containers of waste ammoniacal silver, waste picric acid, waste chromic acid, and waste gold chloride.		

[Title]	IMG-20220823101547154733514 9.jpg	
08/23/2022 10:15 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
Close-up view of the SAA containers.		

[Title]	IMG-20220823101631163116015 3.jpg	
08/23/2022 10:16 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
Close-up view of the waste ammoniacal silver SAA container.		

[Title]	IMG-20220823101636163620940 4.jpg	
08/23/2022 10:16 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
Close-up view of the waste ammoniacal silver SAA container.		

[Title]	IMG-20220823101650165018205 2.jpg	
08/23/2022 10:16 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
Close-up view of the waste gold chloride SAA container.		

[Title]	IMG-20220823101705175199327.jpg	
08/23/2022 10:17 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
Close-up view of the waste chromic acid SAA container.		

[Title]	IMG-20220823101722172209O.jpg	
08/23/2022 10:17 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
Close-up view of the waste picric acid SAA container.		

[Title]	IMG-20220823102143214333O157.jpg	
08/23/2022 10:21 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
View of 55-gallon container being utilized as a SAA container to accumulate hazardous waste solvent. The container was not labeled with the words “Hazardous Waste” and was not closed. The container was labeled with a hazard indicator.		

[Title]	IMG-20220823102153215325377 7.jpg	
08/23/2022 10:21 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
View of the signage on wall adjacent to the hazardous waste solvent SAA container.		

[Title]	IMG-20220823102158215829644 4.jpg	
08/23/2022 10:21 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
View looking down into the funnel, showing that the hazardous waste solvent SAA container was not closed.		

[Title]	IMG-20220823102206226244563.jpg	
08/23/2022 10:22 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
View of the funnel, showing that the hazardous waste solvent SAA container was not closed.		

[Title]	IMG-20220823102544254432425 6.jpg	
08/23/2022 10:25 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
View of the hazardous waste solvent SAA container after Ms. Mugridge closed the container and labeled it with the words “Hazardous Waste” during the inspection.		

[Title]	IMG-20220823102554255426475 9.jpg	
08/23/2022 10:25 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Chemical room	No CBI	No PII
Close-up view after being labeled and closed.		

[Title]	IMG-20220823095644564451938 0.jpg	
08/23/2022 09:56 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Cytology	No CBI	No PII
View of the stains and reagents that, when dirty, are managed as waste solvent.		

[Title]	IMG-20220823095653565346137 7.jpg	
08/23/2022 09:56 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Cytology	No CBI	No PII
Close-up view of the stains and reagents that, when dirty, are managed as waste solvent.		

[Title]	IMG-20220823100136136460203.jpg	
08/23/2022 10:01 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Main lab	No CBI	No PII
View of one of the two transfer containers that will be used to transfer the waste solvent to a waste solvent SAA container.		

[Title]	IMG-20220823100144144307001.jpg	
08/23/2022 10:01 AM	Photographer: Jon Jones	
Cellnetix Suite 410/Main lab	No CBI	No PII
Close-up view of one of the two transfer containers that will be used to transfer waste solvent to a waste solvent SAA container.		

APPENDIX 2: DOCUMENT LOG

Document Type	Document Name	Contains CBI	Contains PII	Uploaded By	Date Received
Facility Map	Capture.PNG	No	No	Jon Jones	10/11/2022
Records Review	Manifest_013167018FLE.pdf	No	No	Jon Jones	10/13/2022
Records Review	Manifest-017106661FLE.pdf	No	No	Jon Jones	10/13/2022
Records Review	Manifest-015839979FLE.pdf	No	No	Jon Jones	10/13/2022
Records Review	Manifest_003185558CLE.pdf	No	No	Jon Jones	10/13/2022
Records Review	Manifest_003210348CLE.pdf	No	No	Jon Jones	10/13/2022
Records Review	Manifest_003355180CLE.pdf	No	No	Jon Jones	10/13/2022
Records Review	Manifest_012646548FLE.pdf	No	No	Jon Jones	10/13/2022
Records Review	2019 wkly inspections.pdf	No	No	Jon Jones	10/13/2022
Records Review	2020 monthly insp.pdf	No	No	Jon Jones	10/13/2022
Records Review	2021 monthly insp.pdf	No	No	Jon Jones	10/13/2022
Records Review	2022 monthly insp.pdf	No	No	Jon Jones	10/13/2022
Records Review	CA-Manifest_DOT.pdf	No	No	Jon Jones	10/13/2022
Records Review	DOT Training Cert's.pdf	No	No	Jon Jones	10/13/2022
Records Review	10-12-22 email from facility.pdf	No	No	Jon Jones	10/13/2022
Records Review	Manifest_013166985FLE.pdf	No	No	Jon Jones	10/13/2022