

DEPARTMENT: Engineering	POLICY DESCRIPTION: Hospital Reporting on
	Mercury Reduction and Virtual Elimination
PAGE: 1 of 2	REPLACES POLICY DATED:
EFFECTIVE DATE: February 1, 2020	REFERENCE NUMBER: ENV.021
APPROVED BY: Ethics and Compliance Policy Committee	

SCOPE: All Company-affiliated hospitals.

PURPOSE: To provide a process for hospitals to document efforts of reducing and seeking to achieve virtual elimination of mercury and mercury-containing devices in accordance with the Mercury Reduction and Virtual Elimination Policy, ENV.020.

POLICY:

HCA Healthcare-affiliated hospitals are committed to continuous improvement of the effect on the indoor environment by:

- 1. Seeking to achieve virtual elimination of mercury in the facility;
- 2. Using a framework for action provided by the Company;
- 3. Reporting status of achieving virtual elimination of mercury; and
- 4. Adhering to applicable federal, state, and local environmental laws, regulations, and requirements concerning the safe and appropriate removal, replacement, or disposal of mercury and mercury containing devices.

This commitment is consistent with the Company's Sustainability Plan.

Definition:

Virtual elimination of mercury means the healthcare sector recognizes that in some cases full elimination of mercury and mercury-containing devices in healthcare might not be possible.

PROCEDURE:

- 1. For most mercury-containing products, the preferred best management practice is to replace the item with a mercury-free product. However, it may not be possible to replace all of a hospital's mercury products at once and there may not be substitutes that are considered to be reliable and cost effective when delivering patient care.
- 2. This policy is to work in conjunction with the Mercury Reduction and Virtual Elimination Policy, ENV.020.
- 3. Hospital leadership must determine and assign a person to be responsible for:
 - a. Conducting at least a baseline inventory and survey using a template recommended by Corporate Engineering and Corporate Sustainability;
 - b. Where appropriate, determining and managing a plan to substitute non-mercury devices, considering factors such as delivering patient care;
 - c. Sharing the plan with the hospital COO or the COO's designated responsible party, or other member of hospital leadership as appropriate;
 - d. Reporting results of the hospital inventory and survey to Corporate through a process identified and managed by Corporate Engineering and Corporate Sustainability;
 - e. First reporting within six-months of the effective date of ENV.021, or applicability for a new facility; and
 - f. Reporting thereafter on a schedule determined by Corporate Engineering and Corporate Sustainability.



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4. Questions about this policy should be directed to Corporate Engineering or HCA Healthcare's Sustainability email box: <u>Corp.ECHO@HCAhealthcare.com</u>.

REFERENCES:

- 1. HCA Healthcare Sustainability Plan
- 2. Environmental and Waste Management Policy, ENV.001
- 3. Mercury Reduction and Virtual Elimination Policy, <u>ENV.020</u>
- 4. <u>HCA Healthcare Mercury Pollution Prevention Guidelines' Sample Mercury Inventory and Survey</u>
- 5. U.S. Environmental Protection Agency: <u>www.epa.gov</u>
- 6. Occupational Safety and Health Administration: www.osha.gov