**Waste Receipt Log**

**Document Number: 504**

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| **Facility Name** |  |
| **Month/Year** |  | **Waste receipt location** |  |

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| **Day** | **Daily Totals - Type and amount of waste received** | **Comments** |
| **Sharps***(kg or # of boxes)* | **Infectious** *(kg or # bags)* | **Pathological/ anatomical** *(kg or # bags)* | **Non-infectious** *(kg or # bags)* |
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| **Total** |  |  |  |  |  |