



UNIVERSITY STANDART

WASTE MANAGEMENT PROCEDURE

Astana city



PREFACE

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7 FREQUENCY OF REVISION as needed

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1 PURPOSE AND SCOPE OF APPLICATION

1.1 This standard establishes the waste management procedure at the NJSC "Astana Medical University" (hereinafter referred to as the University) and has been developed in accordance with the regulatory and legislative acts of the Republic of Kazakhstan.

1.2 This standard considers all types of waste generated as a result of the University's activities in all areas of its activities.

1.3 This standard is applied by the University staff performing work on the collection, storage, placement and disposal of waste.

1.4 The requirements of this standard are uniform for all departments of the University.

REGULATORY REFERENCES 2

- 2.1 This University standard contains references to the following normative documents:
- Environmental Code of the Republic of Kazakhstan No. 212-III dated 09.01.2007;
- MS ISO 9000:2005. Quality management systems. Basic provisions and vocabulary;
- MS ISO 9001:2008. Quality management systems. Requirements;
- MS ISO 14001:2004. Environmental management system;
- KP-MUA-PU-01. The process map. University Management;

- SU-MUA-01. The standard of the university. General requirements for the content, presentation and documentation of an integrated management system;

- SU-MUA-02. The standard of the university. Documentation management;
- SU-MUA-03. The standard of the university. Record Management;
- SU-MUA-04. The standard of the university. Terms and definitions;
- SU-MUA-09. The standard of the university. Analysis by management.

3 **TERMS AND DEFINITIONS**

In this standard, the terms and their corresponding definitions are used in accordance with the 3.1 MS ISO 14001:2004, ISO 9000:2005 and the University standard "Terms and Definitions" (SU-MUA-04), given in Table 1.

Terms	Definitions	
Integrated management system	It is a part of the organization's general management system that meets the requirements of two or more international standards for management systems and functions as a whole.	
Environmental impact	t any change in the environment of a negative or positive nature, fully or partially resulting from the environmental aspects of the organization.	
Municipal waste	consumer waste generated in populated areas, including as a result of human activity, as well as industrial waste close to them in composition and nature of education.	
Environment	the environment in which the organization operates, including air, water, land, natural resources, flora, fauna, and people in their interaction.	
Hazardous waste	wastes that contain harmful substances with dangerous properties (toxicity, explosion hazard, radioactivity, fire hazard, high reactivity) and may pose an immediate or potential danger to the environment and human health independently or when coming into contact with other substances.	
Environmental protection	a system of state and public measures aimed at preserving and restoring the environment, preventing the negative impact of economic and other activities on the environment and eliminating its consequences.	

Table 1 Terms and definitions



Pollution prevention	The use of processes, practices, technical solutions, materials, products, services or energy in order to avoid, reduce or control (individually or in combination) the formation, release or discharge of any type of pollutant or waste in order to reduce negative environmental impacts. (Pollution prevention may include the elimination or reduction of the source (pollution), changes to the process, products or services, efficient use of resources, replacement of used materials and types of energy, reuse, restoration, recycling, disposal and purification).
Environmental damage	environmental pollution or the withdrawal of natural resources in excess of established standards, which caused or causes degradation and depletion of natural resources or the death of living organisms.
Environmental management system	A part of an organization's management system used to develop and implement environmental policy and manage its environmental aspects. ((A management system is a set of interrelated elements used to establish policies and objectives and achieve these goals. The management system includes the organizational structure, planning activities, allocation of responsibilities, practices, procedures, processes and resources).
Inert waste	waste that does not undergo significant physical, chemical or biological transformations and does not adversely affect the environment and human health.
Waste disposal	storage or disposal of production and consumption waste.
Waste storage	storage of waste in specially designated areas for their subsequent safe disposal.
Waste classificationthe procedure for classifying waste in accordance with their danger to the and human health.	
Type of waste	a collection of waste having common characteristics in accordance with their origin, properties and technology of treatment, determined on the basis of the waste classifier.
Waste management	waste-related activities, including prevention and minimization of waste generation, accounting and control, waste accumulation, as well as collection, processing, disposal, neutralization, transportation, storage (warehousing) and disposal of waste.
Limit on waste disposal	the maximum permissible amount of waste of a specific type, which is allowed to be placed in a certain way for a specified period in waste disposal facilities, taking into account the environmental situation in this territory.
Waste generation standard	the set amount of waste of a specific type in the production of a unit of production.
Property	machinery and equipment, stationery machines and computers, fixed assets not included in other groups.
Commission	a consultative and advisory body, whose main task is to develop proposals for the use of property released for unsuitability.
Unused (released) property	unusable for its intended purpose, decommissioned, expired warranty periods of storage in stocks, excessive and not in use.
Emissions into the environment	emissions, discharges of pollutants, placement of production and consumption waste in the environment, harmful physical effects.
An environmentally hazardous facility	an economic and other object, the construction and activity of which may or may have a harmful effect on human health and the environment.
Incongruity	(non-compliance with the requirements of standards, performance of works, practices and procedures, rules,



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показателей работы системы менеджмента и т.д., которое может прямо или косвенно стать причиной травмы, болезни, ущербу для собственности, повреждению рабочего места или комбинации вышеперечисленного.

4 ABBREVIATIONS AND DESIGNATIONS

4.1 The following abbreviations and designations are used in this standard and in accordance with Table 2.

Table 2. Abbreviations and designations

N⁰	Designations and The full name of the given designations and abbreviations		
п/п	abbreviations		
1	IS	International standard	
2	ISO	International Organization for Standardization/ Международная организация по стандар-	
		тизации	
3	NJSC AMU,	NJSC "Astana Medical University"	
	University		
4	IMS	Integrated management system	
	SDB	Safe Disposal boxes	
5	EP	Environmental protection	
6	RK	The Republic of Kazakhstan	
7	SD	Structural division	
8	EMS	Environmental management system	
9	SEM	Service and economic management	

5 **RESPONSIBILITY AND AUTHORITY**

5.1 The responsibility for the development of this University standard in accordance with the requirements of the University standard "Documentation Management" (SU-MUA-02) is borne by the Representative of the Integrated Management System Manual.

5.2 OMKiSP is responsible for the management of this University standard in accordance with the requirements of the University standard "Documentation Management".

6 **REQUIREMENTS**

6.1 General provisions

6.1.1 As a result of the educational, scientific and clinical activities of the University, waste is generated and accumulated in the departments, which are subject to accounting, collection, accumulation and storage, further disposal, neutralization and burial.

6.1.2 All waste, according to the degree of exposure of harmful substances to the ecological system, is divided into hazardous, non-hazardous and inert.

6.1.3 The Head of the SHU is responsible for organizing waste management activities based on the requirements of regulatory and legislative documents, targeted environmental management programs, etc.

6.1.4 To coordinate the activities of the University's structural divisions on waste management, the head of the School is:

a) receives permits, if necessary, for waste disposal and provides standards to structural units with an administrative document;

b) concludes contracts for the transfer of waste for disposal by specialized organizations that have licenses and other permits to carry out related activities;

c) coordinates the work of structural units on the transfer of waste for disposal to third-party organizations;

d) coordinates the control schemes of the structural units involved in the process of monitoring places of temporary storage, placement and disposal of waste.

6.1.1 In the departments of the University (OMTO, laboratories, library), materially responsible persons are appointed for waste management, who are charged with organizing accounting and reporting for waste generation and movement, waste storage in collection and temporary storage sites, coordinating waste transfer activities to third-party organizations licensed for this the type of activity that carries out the disposal and maintenance of the inventory list (Appendix 1), in 2 copies, 1 copy - on site, in the division, 2nd copy- It is assigned to the Chief Medical Equipment Engineer to compile an Analysis from the management side. The summary statement is formed by the responsible for EMS and the Chief Engineer for medical equipment. (Appendix 2).

6.1.2 Waste collection and temporary storage sites must meet environmental requirements. Waste storage conditions must comply with sanitary and epidemiological requirements for the maintenance of the territory of populated areas in accordance with environmental legislation.

6.1.3 The frequency of removal of waste accumulated in places of collection and temporary storage is regulated by the requirements of environmental legislation, established limits or other regulatory documentation.

6.1.4 The generated waste is subject to inventory with the preparation of an Inventory List of waste (Appendix 1), which includes a list, the physico-chemical characteristics of waste, their normative volume of formation and the maximum amount of accumulation, based on the specific norms of consumption of materials, taking into account the planned volume of production of products, places of temporary storage by divisions, methods and methods of disposal and neutralization.

6.1.5 The maximum permissible (normative) volume of waste generation (tons/year) and the maximum permissible volume of temporary accumulation (tons/batches) in places of temporary storage of waste by departments of the University are determined during the inventory of waste. The inventory list of waste is approved by the head of the joint venture.

6.1.6 Depending on the toxicological and physico-chemical characteristics of the waste and its components, waste may be temporarily stored:

- in a production or auxiliary room (warehouse, storeroom);

- in a temporary non-stationary warehouse;

- in the open area.

6.1.7 Methods of temporary storage of waste are determined by the hazard class of waste.

6.1.8 If substances of different hazard classes are present in the waste, the maximum amount of accumulation, time and method of storage are determined by the presence of the most dangerous substances.

6.1.9 During the temporary storage of waste in non-stationary temporary warehouses and on the University grounds in an open form (in bulk and in bulk) or in an unpressurized open container, the following conditions must be provided:

- the maximum permissible volume of temporary waste accumulation at the temporary storage site must correspond to the Inventory data; in case of exceeding the established limit amount, the waste must be immediately removed;

- waste is excluded from entering wastewater and soil.

6.1 The list of waste generated in the activities of the University and the procedure for handling them



6.2.1. Exclusion of literature from the library collection.

6.2.1.1 The identification and selection of publications and materials for exclusion from the library's collections is provided for in the work plans and is carried out according to the size of the library fund. The exclusion procedure is carried out in accordance with RI-MUA-05-13 "On the exclusion of publications and other materials from the library's collections".

6.2.1.2 Outdated books, publications and materials in all branches of knowledge, regardless of the language of the publication, which have lost their relevance, scientific, cultural and historical significance, are subject to exclusion from the fund, cognitive and productive value, unsuitable for practical use.

6.2.1.3 Dilapidated and defective (damaged) items, which include publications and materials that have fallen into an unusable condition and are not amenable to restoration, or when their restoration is economically impractical, are also subject to write-off.

6.2.1.4 Periodicals are excluded after the expiration of the storage periods determined by the library. 6.2.1.5 The exclusion of publications and materials from the library fund shall be formalized by acts. The decommissioned literature is given up for waste paper.

6.2.1.6 Electronic and audio documents are written off for the following reasons: poor-quality photographic and graphic images; microfilm defects (twisting, etc.); mechanical damage (tears, fragments, etc.). Written-off audiovisual documents are subject to demagnetization. To control the process of demagnetization of records, an act is drawn up or an entry is made in the appropriate journal.

6.2.2 Solid household waste.

6.2.2.1 Containers located on the territory of administrative, educational buildings, dormitories, residential buildings are intended for the collection of household garbage. The removal of household garbage with a volume of up to 6,000 m3 cubic meters per year is provided for in Contracts between the University and organizations that carry out the removal of household garbage. All operations for further treatment of solid household waste are carried out by organizations with which agreements have been concluded for the removal of solid household waste.

6.2.2.2 Cleaning of office and educational premises is carried out by a cleaning team that is part of the cleaning company, daily from 07.00 to 18.00, except Saturdays and Sundays. Cleaning of the adjacent territory is carried out by employees of the Agricultural school daily from 08.30 to 10.00. Periodically on Saturdays, employees of the structural divisions of the NJSC "AMU" hold clean-up days for cleaning the nearby territory. All the garbage accumulated during the working day in baskets is collected in plastic bags and taken out to containers located on the street.

6.2.2.3 Loading of biological, radioactive, food and chemical waste into containers for household garbage is not allowed.

6.2.3. Used mercury-containing lamps, thermometers, LCD monitors.

6.2.3.1 All mercury-containing waste and failed devices containing mercury are subject to collection and return for subsequent mercury regeneration in specialized organizations.

6.2.3.2 All operations for the installation and replacement of lamps, collection and further handling of used fluorescent lamps are carried out by specialists of the CCS.

6.2.3.3 Other employees who carry out their work on the premises of the University are prohibited from carrying out any actions related to fluorescent lamps.

6.2.3.4 Accumulation of used fluorescent lamps is not allowed in the premises of the office and warehouse.



6.2.3.1 Any employee of the University, in case of detection of a faulty lamp in the office premises, must notify a specialist of the CCS. Used fluorescent lamps are collected in tightly sealed containers that prevent fighting during storage and transportation. The containers are stored in auxiliary rooms.

6.2.4 Waste from mercury-containing devices

6.2.4.1 In the event of a fight with mercury-containing equipment, mercury is collected by a rubber bag. The place where the lamp broke is washed with 1% potassium permanganate solution. Lamp residues must be collected and neutralized by chemical demercurization. Mercury and its compounds are treated (with one of the compositions) – 20% aqueous solution of ferric chloride; 10% solution of potassium permanganate acidified with hydrochloric acid (5 ml of acid per 1 liter of solution); paste "Pereguda" (one weight part of manganese oxide and two weight parts of 5% hydrochloric acid).

6.2.4.2 If, as a result of an accident or incident, mercury has been spilled on furniture, appliances or on the floor of the workplace, work should be stopped immediately and it should be cleaned. The demercurization of the room and furniture is carried out in accordance with the mercury demercularization memo and includes three mandatory procedures: - mechanical cleaning of the room from visible mercury balls; - treatment of contaminated surfaces; - wet cleaning in order to thoroughly remove the products of the reaction of mercury with chemical reagents.

6.2.4.3 All actions with mercury-containing waste that are not provided for in the memo must be carried out in accordance with SanPiN 4607-88 "Sanitary rules for working with mercury, its compounds and devices with mercury filling", GOST 12.3.031-83 "Working with mercury. Safety requirements".

6.2.5 Used cartridges

6.2.4.1 Refilling of cartridges is carried out on the basis of a contract between the University and organizations that have the right to do so.

6.2.4.2 Spent cartridges are transferred by the University to the organization according to the agreement, which is engaged in the further management of this type of waste.

6.2.5 Used tires

6.2.4.1 Replacement and delivery of used tires is carried out at the service station on the basis of a contract between the University and organizations that have the right to do so.

6.2.5 Medical waste (in administrative buildings, laboratories)

6.2.4.1 Medical waste – waste generated during the provision of medical services and medical manipulations, as well as after the expiration date of medical first-aid kits must be disposed of in accordance with the procedure established by Order of the Minister of Health No. 362 dated June 23, 2008.

6.2.4.2 When medical waste appears, single-use waterproof paper bags, bags, plastic containers, safe disposal boxes (hereinafter referred to as KBU), containers will be used for their collection. Plastic containers and containers for the collection of hazardous waste must be tightly closed. For each class of waste, bags and collection bags must have different colors; containers and containers must be marked.

6.2.4.3 In case of occurrence of medical waste, they will be transferred for neutralization, storage and burial to specialized organizations on the basis of an agreement.

6.2.5 Rules of medical waste management at the University

6.2.4.1 Rules for the treatment of medical waste at the University, having hazard classes in accordance with the rules "Sanitary and epidemiological requirements for the collection, disposal, storage, transportation and burial of medical waste", approved by Order No. 362 of the Minister of Health of the Republic of Kazakhstan dated June 23, 2008. Medical waste is divided into five classes according to the degree of danger:

- Class A- medical waste, similar to solid household waste;
- Class B hazardous (risky) medical waste;
- class B extremely hazardous medical waste;
- class G medical waste, similar in composition to industrial waste;
- Class D radioactive medical waste.

6.2.4.2 Sanitary and epidemiological requirements for the collection and temporary storage of medical waste by hazard classes in the NJSC "AMU". Medical waste collection bags should have the following coloring6 -waste of class A – white; - waste of class B – yellow; - waste of class B – red; - waste of class G is black.

6.2.8.3.1 The following medical waste belongs to Class A: - in administrative and business premises; - in food blocks, buffets; - on the territory, outside the medical premises. Class A medical waste is collected in containers or disposable bags. Filled containers or packages are delivered to the container installation sites and reloaded into containers intended for the collection of medical waste of this class.

6.2.8.4.2 Class B includes medical waste generated by: - in clinical diagnostic and pathology laboratories; -laboratories working with microorganisms of 3-4 pathogenicity groups and vivariums; - in sanitary rooms, toilets. Medical devices of class B are subject to disinfection. Class B medical waste is pre-collected in disposable bags enclosed in containers with tightly closed lids. Used stabbing and other sharp objects (needles, feathers, razors, ampoules) are collected separately from other types of medical waste in safe disposal boxes (CBUS) without prior disassembly and disinfection. Containers and packages of all Class B medical waste must be labeled "Hazardous medical waste. Class B", with the application of the unit code, its name, date and surname of the person responsible for the collection of medical waste.

6.2.8.5.3 Class B includes medical waste generated by:

- in laboratories working with microorganisms of 1-2 pathogenicity groups. The collection of Class B medical waste is carried out in disposable bags enclosed in containers with tightly closed lids. Containers and packages of all Class B medical waste must be marked "Extremely hazardous medical waste. Class B", with the application of the unit code, its name, date and surname of the person responsible for the collection of medical waste. All manipulations with the pads are performed in rubber gloves and a mask. After filling the bags with medical waste of group B by 2/3, the person responsible for the collection of medical waste places the bags in containers installed in places intended for the collection of medical waste of class B.

- 6.2.8.6.4 Class D includes medical waste generated at the following facilities:
- in the pathology and anatomical departments;
- in chemical laboratories.

The degree of toxicity of each type of medical waste of class G is determined in accordance with the Order of the Minister of Health of the Republic of Kazakhstan dated March 24, 2005 No. 137 "On approval of sanitary and epidemiological rules and norms for communal hygiene", registered in the Register of State Registration of Regulatory Legal Acts of the Republic of Kazakhstan No. 3629 (Order No.137).

6.2.8.7.5 Class D includes medical waste generated at the following facilities:

- in diagnostic laboratories;

- in X-ray rooms.

Collection, storage, burial of medical waste of class D is carried out in accordance with the requirements of the Order of the Minister of the Republic of Kazakhstan dated January 31, 2003 No. 97 "On approval of sanitary rules and norms Sanitary and hygienic requirements for radiation safety", registered in the Register of State Registration of Regulatory Legal Acts No. 2198. Radioactive medical waste of Class D. having a short life cycle (solid, liquid and gaseous forms) is allowed to be stored in appropriate storage facilities until they are decomposed, and then they are disposed of as medical waste of Class A. Radioactive "long-lived" medical waste of Class D is sent for burial to special landfills (burial grounds).

6.2.8.8 Accounting and registration of medical waste is given in Appendix 3.

6.2.5 Medical waste in clinical diagnostic laboratories.

6.2.4.1 For day-to-day control of medical waste management in laboratories, a responsible specialist (epidemiologist, deputy chief physician) should be appointed, who should train staff in the rules of safe handling of medical waste, followed by monitoring their implementation at the workplace. The responsible person carries out daily quantitative and qualitative accounting of medical waste in the journal. (Appendix 3) according to the rules "Sanitary and epidemiological requirements for the collection, neutralization, storage, transportation and burial of medical waste".

6.2.4.2 Sanitary and epidemiological requirements for the collection and temporary storage of medical waste by hazard classes at the University. The following medical waste belongs to Class A:

- in administrative and business premises;

- in food blocks, buffets;

- on the territory, outside the medical premises.

6.2.4.3 Collection of Class A medical waste is carried out in containers or disposable bags. Filled containers or packages are delivered to the container installation sites and reloaded into containers intended for the collection of medical waste of this class.

6.2.4.4 Class B includes medical waste generated by:

- in clinical diagnostic and pathology laboratories;

-laboratories working with microorganisms of 3-4 pathogenicity groups and vivariums;

- in sanitary rooms, toilets.

6.2.4.5 Medical devices of Class B are subject to disinfection.

6.2.8.6 Class B medical waste is pre-collected in disposable bags enclosed in containers with tightly closed lids.

6.2.9.7 Used stabbing and other sharp objects (needles, feathers, razors, ampoules) are collected separately from other types of medical waste without prior analysis and desinfection.

6.2.5 Waste from the Radiochemistry and Radio Spectrometry testing laboratory

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6.2.4.1 Chemical reagents and precursors with expired shelf life are considered as waste. The person financially responsible for working with precursors draws up a list of expired cursors, prepares an application for write-off, then the decommissioned cursors must be transferred for neutralization, storage and burial to specialized organizations on the basis of the concluded contract.

6.3 The waste management procedure consists of the following steps:

- 1) Waste inventory;
- 2) identification of waste storage sites (or incineration);
- 3) conclusion of waste disposal contracts;
- 4) analysis of the quality of waste management.

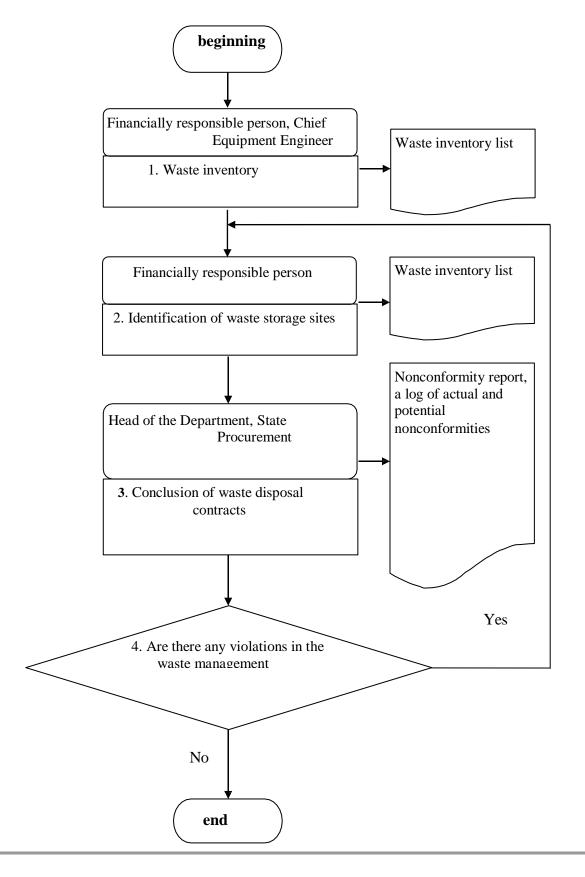
Table 3. Tabular form of the waste management procedure.

Name of the action	Responsible for the execution	Executor	The document regulating the mounting action	A record confirming the completion of the work
1. Waste inventory	Heads of structural divisions	Financially responsible person in the department	СУ-МУА-80	Waste inventory list
2. Identification of waste storage sites (or incineration)	Heads of structural divisions	Financially responsible person in the department	СУ-МУА-80	Inventory list of waste.
3. Conclusion of waste disposal contracts	Heads of structural divisions	Financially responsible person in the department	СУ-МУА-80	The standard contract of the Contract, Inventory list of waste.
4. Analysis of the quality of waste management	Heads of structural divisions	Financially responsible person in the department	СУ-МУА-80 СУ-МУА-74	Nonconformity report, a log of actual and potential nonconformities



Рисунок 1.

Flowchart Waste management procedure





7. RECORDS

7.1 Table 4 shows the records that are generated in this university standard and must be managed in accordance with the requirements of the University standard "Records Management" (SU-MUA-03).

Table 4. List of records

№	Name	The form	Responsibility	Keeping		The
п/п		of records	for record keeping	place	term	frequency of recording
1	inventory list	Application 1	Responsible	Laboratory, department.	Before the cancellation and withdrawal of documents	At least once a year
2	Summary inventory list of waste	Application 2	Accountant, Chief Medical Equipment Engineer	Laboratory, department.	Before the cancellation and withdrawal of documents	At least once a year
3	Journal of medical waste accounting	Application 3	Head of structural divisions, Financially responsible persons of departments	Laboratory, department.	Before the cancellation and withdrawal of documents	Every six months

7 REVISION, MODIFICATION, STORAGE AND DISTRIBUTION

7.1 The original of this University standard is registered and stored in the Department of Quality Management and Strategic Planning.Сканированная версия настоящего стандарта университета размещается на серверном компьютере Университета в папке общего доступа.

7.2 The registered copies of this standard of the university are sent to the top management and heads of all structural divisions:

- Department of Logistics;
- library;
- Department of automotive industry;
- Operation management;
- Institute of Radiobiological Research;
- laboratories.

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Appendix 1 The form "Inventory list of waste" F-07.12/33

Waste inventory list NJSC «Astana medical university» «.....»

Date of compilation

Sheet № ____of ____

Nº	List of waste	Physical and chemical characteristics	The normative volume of education and the maximum amount of accumulation (tons, kg, liters, etc.)	Temporary storage locations	Methods and methods of disposal and neutralization
1					
2					
3					
4					
5					

Head of the Department_____

(Full name)

Financially responsible person

(Full name)

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Application 2 The form ''Consolidated inventory list of waste'' F-07.12/34

I approve: Managing Director _____Ties A.S. «____» _____20....г.

Summary inventory list of waste

NJSC «Astana medicaluniversity» «.....»

Date of compilation_____

The normative volume of Physical and chemical Temporary Methods and methods of № List of waste education and the maximum characteristics disposal and storage amount of accumulation (tons, locations neutralization kg, liters, etc.) 1 2 3 4 5

(Full name)

Sheet № ____of ____

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Appendix 3 Form "Journal of medical waste accounting" ZHF-07.12/11

Journal of medical waste accounting

Name of the laboratory (divisions) ______ for 20 _____ years

Types of medical waste	Volume of medical waste, kg (hereinafter referred to as MO)	Put into temporary storage facilities of the Ministry of Defense	Burial or incineration of MO	Full name of the person responsible for collecting MO	Date of delivery

Head of the structural unit_____

(Full name)

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	rependix 4
The form "Act of exclusion from the library fund of long-term storag	e documents"
	F-08.7/03

The act of	exclu	sion o	f long-term storage documents from the library fund	
Reviewed by the Commission on the preservation of	l		I APPROVE	
Funds Protocol №	20			,
from « »	20	year	(signature of the person approving the a	
			from «»20 year	•
			Act N	
«»20year				
This act has been drawn up				
			(surnames, first names, patronymics of persons involved in the preparation of the act)	
on exclusion from the fund				
			(name of the structural division of the library)	
«» instances				
			(specify the type of document)	
for the amount of tg. for a r	reason			
			(specify the reason for the exception)	
List of retirees				
	(spea	cify the	e type of document)	
The «»sheet	ts are a	attache	ed.	

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The list of the act №_____

N⁰	No Inventor y	Author and title, year of	Price		Revaluation coefficient	Numbe r of	Cost
	number	publication	tg.	tg.		copies	

Members of the Commission:



Change registration sheet

N⁰	Shee	et (page) numb	ers	Total	The number of the	Signature of	Date of the
п/п	Modified	Replaced	New ones	Cancelled	sheets	section, subsection, paragraph of the standard to which the changes relate	the person who made the changes	change



The introduction sheet

№ п/п	Post	Full name	Date of introduction	Signature