Consult the MSDS for each chemical/product and complete a separate assessment for each process/method used

Substance Name: ...........................................
CAS. No: .................... UN No.  ....... Class: ............ PG No. ........
Risk Phrases:................................. Safety Phrases:.................................
Process/ Method:........................................ Quantity to be used: .................
Location(s) used: ..................................................
Assessed by: .............................................. Xtn.: ............. Date: ___ / ___ / ___

Assessment Approval:
Name: ................................................ Signature: ......................... Date .............

PLEASE CIRCLE RESPONSE

1. Toxicological details (refer to MSDS):
Are there short term/acute effects?  Yes No
If yes, by what route?  Skin Respiratory Ingestion Other
Are there long term/chronic effects?  Yes No
If yes, by what route?  Skin Respiratory Ingestion Other
Is the substance a carcinogen?  Yes No
Mutagen?  Yes No
Teratogen?  Yes No

2. Labelling:
Is the product labelled in accordance with regulations?  Yes No
Is it Flammable Toxic Corrosive Oxidising
Class 3 Class 6 Class 8 Class 5
Has the product been decanted?  Yes No
If yes, is the container labelled correctly?  Yes No

3. Method of use and exposure details:
Is the substance used as a  Solid Liquid Gas Solution
Is the substance heated?  Yes No
Are vapours, fumes, mists or dust particles given off?  Yes No
Is the substance used in a confined space?  Yes No
Is the substance used in a well ventilated space?  Yes No
Area of possible exposure  Ingestion Inhalation Skin Eye
Possible duration of exposure <1 minute < 1 hour Continuous
Possible frequency of exposure 1/day 2-5/day >5/day Monthly
Has environmental exposure monitoring been performed on the substance?  Yes No
Is medical surveillance required?  Yes No
Have any health problems been reported?  Yes No

If yes to any of the above three questions, what are the results?

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4. Existing Controls:

**Engineering controls:**
- Is it necessary to use a fume cupboard with this substance? Yes No
- Or is local exhaust ventilation adequate? Yes No
- Has training been given in the use of fume cupboards? and/or Local exhaust ventilation? Yes No

**Personal Protective Equipment (PPE):**
- Is eye protection required with this? Yes No
- Are gloves necessary for use with this substance? Yes No
- Is it necessary to use a respirator mask with this substance? Yes No
- Has training been given in the use of PPE? Yes No

5. Emergency and Response:

- Is an eye wash station/safety shower located near by? Yes No
- Are the correct first aid facilities available? Yes No
- Is fire fighting equipment near by? Yes No

What training has been given in the correct handling on the substance?

What are the disposal methods?

What steps are taken with regard to a spill of the substance?

7. Risk assessment classifications:

Based on the information collected on the hazardous substance and its use in the workplace, the following classifications may be made.

**Circle the description that relates to the risk level in this case**

1. Risks are not significant and are not likely to increase.
2. Risks are significant but are effectively controlled.
3. Risks are significant and are NOT adequately controlled.
4. Uncertain about risks, not enough information or uncertain about degree and amount of exposure.

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Retain a copy of this risk assessment and forward a copy to the relevant Laboratory Manager for inclusion in the Hazardous Substances Register

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