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|  | **COSHH Risk Assessment No: 00**  **Product Name: Mercury** | | | | | | | | | | |  |
| Company name: **Various Suppliers** | | | | | | | | Dept. (if applicable): N/A | | | | |
| Describe the activity or work process.  *(Inc. how long/ how often this is carried out and quantity substance used)* | | | **Used in Blood Pressure Monitors** | | | | | | | | | |
| Location of process being carried out? | | | **Examination Rooms** | | | | | | | | | |
| Identify the persons at risk: | | | | Employees  **X** | | | | | Sub-contractors | | Public  **X** | |
| Name the substance involved in the process and its manufacturer.  *(A copy of a current safety data sheet is attached to this assessment)* | | | | **Mercury**  **Various Suppliers** | | | | | | | | |
| Classification *(state the category of danger)* | | | | | | | | | | | | |
| |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | GHS-pictogram-explos.svg |  | Explosive | GHS-pictogram-flamme.svg |  | Flammable | GHS-pictogram-rondflam.svg |  | Oxidising | | GHS-pictogram-bottle.svg |  | Gas under pressure | GHS-pictogram-acid.svg | **X** | Corrosive |  | **X** | Acute Toxic | | GHS-pictogram-exclam.svg |  | Harmful / Irritant / Skin Sensitiser | Image result for new explosive COSHH hazard warning sign | **X** | Carcinogen / Germ Cell Mutagen / Reproductive Toxin | GHS-pictogram-pollu.svg | **X** | Hazardous to the Aquatic Environment | | | | | | | | | | | | | |
| Hazard Type | | | | | | | | | | | | |
| **X**  **X**  **X**    Gas Vapour Mist Fume Dust Liquid Solid Other (State) | | | | | | | | | | | | |
| Route of Exposure  **X**  **X** | | | | | | | | | | | | |
| **X**  **X**  Inhalation Skin Eyes Ingestion Other (State) | | | | | | | | | | | | |
| Workplace Exposure Limits (WELs) *please indicate n/a where not applicable* | | | | | | | | | | | | |
| Long-term exposure level (8hrTWA):  **0.02 mg/m3** | | | | | | | Short-term exposure level (15 mins): | | | | | |
| State the Risks to Health from Identified Hazards | | | | | | | | | | | | |
| **EC Classification:**  **H290** May be corrosive to metals. **H330** Fatal if inhaled. **H317** May cause allergic skin reaction. **H360** May damage fertility or the unborn child. **H372** Causes damage to organs through prolonged or repeated inhalation exposure.  **P201** Obtain special instructions before use. **P202** Do not handle until all safety precautions have been read and understood. **P234** Keep only in original container. **P260** Do not breathe fumes, mists, vapours, or spray. **P264** Wash hands thoroughly after handling. **P270** Do not eat, drink or smoke when using this product. **P271** Use only outdoors or in a well-ventilated area. **P284** In case of inadequate ventilation, wear respiratory protection. **P272** Contaminated work clothing must not be allowed out of the workplace. **P280** Wear protective gloves, protective clothing, and eye protection. **P304+P340** If inhaled: Remove person to fresh air and keep comfortable for breathing. **P310** Immediately call a doctor. **P302+P352** If on skin: Wash with plenty of water. **P333+P313** If skin irritation or rash occurs: Get medical attention. **P308+P313** If exposed or concerned: Get medical attention. **P363** Wash contaminated clothing before reuse. **P390** Absorb spillage to prevent material damage. **P403+P233** Store in a well-ventilated place. Keep container tightly closed. **P405** Store locked up. **P406** Store in corrosive resistant container or a container with a resistant inner liner. **P501** Dispose of contents and container according to local regulations | | | | | | | | | | | | |
| Control Measures: | | | | | | | | | | | | |
| Use in well ventilated areas | | | | | | | | | | | | |
| Is health surveillance or monitoring required?  **X**  Yes **No** | | | | | | | | | | | | |
| Personal Protective Equipment*(state type and standard)* | | | | | | | | | | | | |
| Dust mask | |  | | | | Visor | | | |  | | |
| **X**  **X**  Respirator | | Must be worn if the situation dictates | | | | Goggles | | | | Must be worn if the situation dictates | | |
| **X**      **X**  Gloves | | Must be worn if the situation dictates | | | | Overalls | | | | Must be worn if the situation dictates | | |
| Footwear | |  | | | | Other | | | |  | | |
| First Aid Measures | | | | | | | | | | | | |
| **Inhalation:**  If adverse effects occur, remove to uncontaminated area. If not breathing, give artificial respiration or oxygen by qualified personnel. Seek immediate medical attention.  **Skin:**  Wash skin with soap and water for at least 15 minutes while removing contaminated clothing and shoes. Get immediate medical attention. Thoroughly clean and dry contaminated clothing before reuse. Destroy contaminated shoes  **Eyes:**  Immediately flush eyes, including under the eyelids with copious amounts of water for at least 15 minutes. Seek immediate medical attention  **Ingestion:**  Contact a poison control centre immediately for instructions. If vomiting occurs, keep head lower than hips to prevent aspiration. Seek immediate medical attention. | | | | | | | | | | | | |
| Storage | | | | | | | | | | | | |
| **Storage:** Store and handle in accordance with all current regulations and standards. Keep separated from incompatible substances  **Conditions to Avoid**: Contact with combustible or incompatible materials. Incompatible Materials: Acids, combustible materials, amines, oxidizing materials, metals, halogens, metal carbide.  **Extinguishing Media:** Suitable: Regular dry chemical, carbon dioxide, water, regular foam.  **Methods and Materials for Containment and Clean up:** Do not touch spilled material. Notify safety personnel of spills. Absorb with sand or other non-combustible material. Collect spilled material in appropriate container for disposal. Isolate hazard area and deny entry, wear appropriate Personal Protective Equipment (PPE) to minimize exposure to this material | | | | | | | | | | | | |
| Disposal of Substances & Contaminated Containers | | | | | | | | | | | | |
| **X**  **X**  **Hazardous Waste** Skip Return to Depot Return to Supplier Other  (If Other Please State): | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
| Is exposure adequately controlled? | | | | | **X**  **Yes** No | | | | | | | |
| **Risk Rating Following Control Measures** | | | | | | | | | | | | |
| **X**  HighMedium **Low** | | | | | | | | | | | | |

Assessed by: Pete Reynolds Date: Review Date: