Control of Substances Hazardous to Health (COSHH) Assessment - APC01

Product Name: (Purchased product brand name)

Reference No: HSE4647

Killgerm ULV 500

Hazards identified on the container or Safety Data Sheet (SDS) (tick appropriate boxes)

Rev: 25.07.19





















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Hazard/Risks Identification:

H304: May be fatal if swallowed and enters airways

H336: May cause drowsiness or dizziness

H411: Toxic to aquatic life with long lasting effects

EUH066: Repeated exposure may cause skin dryness or cracking Asp TOX 1

P301+310: IF SWALLOWED: Immediately call a POISON CENTER or doctor/physician

P405: Store locked up

P331: Do NOT induce vomiting

P501: Dispose of contents/container in accordance with national regulations

A brief description of how the substance is to be used:

A ready to use, ULV, oil based formulation for the control of two winged flies (including mosquitoes), fleas, cockroaches, beetles, moths and booklice, ants, wasps, earwigs, silverfish and other bristletails, bedbugs, mites, spiders, ticks in domestic and public hygiene situations.

Who is likely to be affected by the substance?

Employees	V	Visitors	V
Cleaners	V	Patients / Residents / Service Users / Clients	$\sqrt{}$
General Public	$\sqrt{}$	Contractors	$\sqrt{}$

Existing Controls (Provide a brief description of how the hazards are currently controlled.)

Personal protection - In normal use and handling conditions please refer to the label and/or leaflet. In all other cases the following recommendations would apply.

Exposure controls - Refer to COSHH assessment (Control of Substances Hazardous to Health (Amendment) Regulations 2004). Engineering controls should be used in preference to personal protective equipment wherever practicable. Refer also to COSHH Essentials.

Respiratory protection - Half mask respirator to EN140 plus A1P2 class filter to EN141 (minimum).

Spillage - Half mask respirator to EN140 plus A1P2 class filter to EN141 (minimum)

Hand protection - Unlined synthetic rubber/PVC (300mm) (EN374:2003 J**) e.g. Solvex nitrile

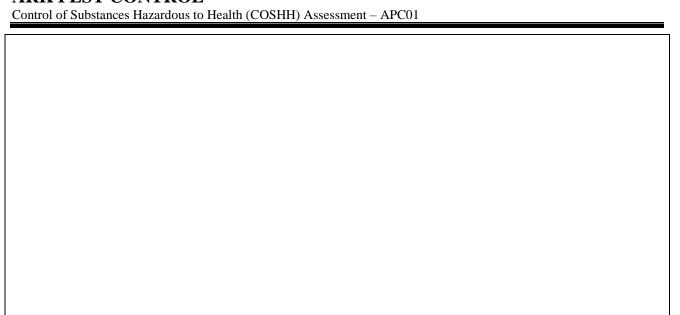
Spillage - Unlined synthetic rubber/PVC (300mm) (EN374:2003 J**) e.g. Solvex nitrile

Eye protection - Goggles to EN166 34

Spillage - Face shield to EN166 3

Skin and body protection - Low levels of contamination-Coverall type 5/6. High levels of contamination- Coverall type 4.

Spillage - Low levels of contamination-Coverall type 5/6. High levels of contamination- Coverall type 4.



Current storage arrangements and the quantity held in stock

This product is subject to the Food and Environment Protection Act, 1985 and The Control of Pesticides Regulations 1986 made under it. The product must be used and stored only in accordance with the product label. Keep away from sources of ignition – No smoking Wear suitable protective clothing. Do not breathe mist. Otherwise wear respiratory protective equipment and eye protection

Incompatible with strong oxidising agents, strong acids and strong bases.

Accidental release measures

Personal precautions, protective equipment and emergency procedures: Wear appropriate PPE. Remove sources of ignition. Indoors, wash area with soap and water. Outdoors, do not wash spillages or contaminated material to drains.

Environmental precautions: Shovel up contaminated soil, vegetation, etc., and transfer to a marked container. Dispose of via a contractor or contact supplier for advice. Use appropriate containment to avoid environmental contamination

Methods and material for containment and cleaning up: Absorb in sand, earth or proprietary product, shovel into marked container and contact a waste disposal firm or the supplier for disposal advice

Current Disposal Arrangements.

THIS MATERIAL AND ITS CONTAINER must be disposed of in a safe way. Use appropriate containment to avoid environmental contamination. Avoid release to the environment.

Empty containers: Do not re-use – empty completely. Dispose of as controlled waste. Ensure containers are empty. Treat as hazardous waste. Use EWC (European Waste Catalogue) code 20 01 19 on consignment notes. Treat empty packaging as hazardous waste, use EWC code 20 01 19. Unused/recovered materials: Do not dispose in domestic waste. Dispose of as controlled waste. Treat as hazardous waste. Use EWC code 20 01 19 Contaminated PPE/wipes/contaminated boxes/spill control material: Treat as controlled waste. For low levels of contamination, treat as non-hazardous waste. Use EWC code 15 02 03. For heavily contaminated items treat as hazardous waste and use EWC code 15 02 02*. Contact supplier for advice on disposal matters.

Can the substance be removed or replaced by a substance less hazardous?

YES / NO (Circle as appropriate)

How often do employees and others come into contact with the substance?

Continual use Frequent use

√ Minimal use

Using this information, it is now possible to determine the level of risk from the substance and decide on the controls required to remove or reduce the risks.

Do you consider the current control measures suitable and sufficient?

YES) NO (Circle as appropriate)

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EMERGENCY ARRANGEMENTS:

Fire Measures: What fire fighting measures are required to extinguish the substance?

WATER	FOAM	DRY POWDER	CO2	WET CHEMICAL	NONE
	√	$\sqrt{}$			

What methods are used to fire fight without putting yourself at risk? Is suitable PPE required and if so what?

DO NOT USE WATER JET. Self-contained breathing apparatus should be worn by fire fighters.

Special hazards arising from the substance or mixture: Advise Environment Agency (emergency telephone number 0800 807060) or the water company if material has entered the drains.

Advice for fire-fighters: Self-contained breathing apparatus should be worn by fire fighters. Warn those at risk that toxic fumes are evolved

First Aid Measures: These are the first aid measures required should contact the substance arise. It identifies each route of entry to the body and indicates what action must be taken should somebody become exposed.

General advice: Move out of dangerous area. Place and transport victim in stable position (lying sideways). Remove contaminated clothing immediately and dispose of safely. Keep under medical supervision for at least 48 hours.

Route of entry: First Aid Measures:

Inhalation:	Remove to fresh air. Loosen clothing at neck. Keep at rest. GET MEDICAL ATTENTION.
Absorption:	-
Ingestion:	DO NOT INDUCE VOMITING. GET MEDICAL ATTENTION. Wash out mouth with water. If spontaneous vomiting has occurred keep patient at rest, ensuring airways are clear, and phone for an ambulance with oxygen facilities. IF SWALLOWED: Immediately call a POISON CENTRE or doctor/physician.
Injection:	-
Skin Contact:	Remove contaminated clothing. Wash off with soap and water. GET MEDICAL ATTENTION.
Eye Contact:	Flush thoroughly with eye wash solution or clean water for 15 minutes. GET MEDICAL ATTENTION

Most important symptoms and effects, both acute and delayed

Symptoms: No further relevant information available

Indication of any immediate medical attention and special treatment needed

Risks: No further relevant information available

Are the first aiders aware of the arrangements to deal with this substance in the event of a first aid emergency? (YES) NO (Circle as appropriate)

Are there arrangements in place to deal with spillages? (eg is there an emergency procedure)?

? (YES) NO (Circle as appropriate)
(YES) NO (Circle as appropriate)

If you consider the controls adequate, then sign the CoSHH assessment off. If further controls are required, then identify them below. This CoSHH assessment must be reviewed at least annually. The CoSHH assessment must also be reviewed if there are any changes in circumstances and following

an accident or incident.

Extra controls required to reduce the risks.

Identify the persons who are required to implement the extra controls and set a realistic date for completion of these extra controls.

Action to be implemented by:	Target Date:	Completed Date:
n/a		

Initial Assessment Completed	Name:	Signature:	Date:
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By:	Andy Owden	A. Owden	25.07.19

ASSESSMENT REVIEW PROGRAM

Assessment Review	Nam	e	Signature Dat			e	
Completed by:							
Reason for review:	Annual Review		Changes		Accident/Incident		
Assessment Review	Nam	e	\$	Signature		Dat	e
Completed by:							
Reason for review:	Annual Review		Changes		Accident/Ir	ncident	

Assessment Review	Nam	e	Signature			D	ate	
Completed by:								
Reason for review:	Annual Review			Changes		Accident/Ir	cident	

Name, address and telephone number of supplier of substance:

Killgerm Chemicals Ltd,

Wakefield Road,

Ossett,

West Yorkshire,

WF5 9AJ.