



COSHH Risk Assessment

MD096

SUBSTANCE INFORMATION

Substance/material: Powder

Trade name: Centrimax M28 Powder

What is the substance used for? Fire Extinguishing Agent

(E.g. cleaning floors, protective coating, etc.)

What are the hazardous ingredients/chemicals in the substance? (List below)

Sodium Chloride CAS Number 7647-14-5

Do any of the chemicals have a:

Workplace Exposure Limit? (State opposite)

10mg/m³ total dust: 5 mg/m³ respirable dust 8-hour TWA

Is the substance: (Check for an orange 'CHIP' square on the product data sheet or packaging.)

- | | | | |
|---|-------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> Extremely flammable? | <input type="checkbox"/> Oxidising? | <input type="checkbox"/> Very toxic? | <input type="checkbox"/> Sensitising? |
| <input type="checkbox"/> Highly flammable? | <input type="checkbox"/> Harmful? | <input type="checkbox"/> Corrosive? | <input checked="" type="checkbox"/> Other? (Specify below.) |
| <input type="checkbox"/> Flammable? | <input type="checkbox"/> Toxic? | <input type="checkbox"/> Irritant? | Large doses may cause irritation of the stomach and an increase in blood pressure. |

Is the substance hazardous to health when:

- | | | |
|--|--|--|
| <input type="checkbox"/> In contact with skin? | <input type="checkbox"/> Breathed in? | <input checked="" type="checkbox"/> Other (Specify below) |
| <input type="checkbox"/> In contact with eyes? | <input checked="" type="checkbox"/> Swallowed? | Large doses may cause irritation of the stomach and an increase in blood pressure. |

USE OF SUBSTANCE

How should the substance be used? Powder sprayed on to fire from Fire Extinguisher nozzle

(E.g. diluted in water, applied with a brush, sprayed, etc.)

How much is used every week? (State quantity in litres or kilos as appropriate.) 6 x 9Kg bags used daily.

Who is exposed to the substance?

(E.g. those using it, pupils, service users, etc.) Those using it.

Does the substance present additional risks to certain groups or individuals?

(E.g. young people, expectant mothers.) No

CONTROL MEASURES






Can a less hazardous substance be used to do the same job? Yes No

(If you don't know, please contact your supplier for further information.)

What controls are required for this substance, other than Personal Protective Equipment (PPE)?

(E.g. well ventilated areas, not in spray/mist form, mechanical ventilation, authorised persons only.)

Is any Personal Protective Equipment (PPE) required when using the substance?

- | | |
|---|--|
|  <input checked="" type="checkbox"/> Eye protection? (State type required) |  <input checked="" type="checkbox"/> Gloves? (State type required) |
|  <input checked="" type="checkbox"/> Overalls/clothing? (State type required) |  <input checked="" type="checkbox"/> Mask/respirator? (State type required) |
|  <input type="checkbox"/> Other? (State type required) | |

How should the substance be stored? (E.g. locked cupboard, away from other substances, etc.)

Handling: When handling this product use suitable containment methods to avoid generation of dust and local exhaust ventilation to limit personal exposure. Storage: Keep cool and dry in the absence of vibration. Maintain good housekeeping practice.

Please turn over

Have persons using this substance been provided with information or training on its use? Yes

(As a minimum ensure a copy of this assessment is in a known and readily accessible location.) No

OTHER PRECAUTIONS AND EMERGENCY PROCEDURES

Personal Protection: [Water suitable respiration protection e.g. dust mask/respirator to reduce personal exposure. Overalls, gloves and eye protection recommended for regular handling and the normal hygiene measures adopted when using chemicals.](#)

First aid: What actions should be taken if the substance is:

a) Swallowed? [Rinse mouth with water and give plenty of water to drink. If other symptoms persist seek medical advice and treat symptomatically.](#)

b) In contact with eyes [Irrigate with water for at least 10 minutes holding eyelids apart.](#)

c) In contact with skin? [Wash off with plenty of water.](#)

d) Inhaled? [Move to fresh air.](#)

e) Other? (Please specify.)

Fire precautions: What actions should be taken in the event of fires involving this substance?

[No special measures required, as this product is a fire extinguishing medium.](#)

Chemical reactions: Is there any other substance that this substance must not come into contact with?

[If powder becomes damp or hard it is not suitable for fire fighting purposes.](#)

Disposal: How should the substance be disposed of (or not disposed of)?

[Dispose of surplus product or contaminated packaging according to local and national legislation.](#)

Health surveillance: Do staff using the substance require any health surveillance?

[No](#)

ASSESSMENT OF RISK

Are all the controls detailed above currently in place?

Yes No

If these controls are not in place, or additional controls are required, state action to be taken.

Please note - COSHH substances must **NOT** be used if adequate control measures are not in place.

Remedial actions required	Date for completion

Are hazards to health adequately controlled with all control measures in place?

Yes No

Assessor(s) name: Chris Ogden	Assessor(s) signature: Chris Ogden	Date: 01/01/17
The Line Manager should sign below to show that the assessment is a correct and reasonable reflection of the hazards and of the control measures and actions required.		
Line Managers name:	Line Managers signature:	Date:
Remedial actions complete: (Date)	Line Managers signature:	Reviewed on:

A copy of the product safety data sheet must be attached to this assessment.