



COSHH Risk Assessment

MD100

SUBSTANCE INFORMATION

Substance/material: [Foam](#)

Trade name: [Fluorofoam 906UL](#)

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)

[Hydrolysed Protein CAS No. 100085-61-8](#)

[Hexylene Glycol CAS No. 107-41-5](#)

[Sodium chloride 7647-14-5](#)

[Metal Salts CAS No. 782-63-0, 1314-13-2](#)

[Fluorosurfactants](#)

[Bactericide](#)

Do any of the chemicals have a:

Workplace Exposure Limit? (State opposite)

[Hexylene Glycol CAS No. 107-41-5 WEL Long Term exposure limit \(8 hour TWA\): 25ppm, Short Term exposure limit \(10 minute TWA\) : 25ppm](#)

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 type="checkbox"/> Other? (Specify below.) |
| <input type="checkbox"/> Flammable? | <input type="checkbox"/> Toxic? | <input checked="" type="checkbox"/> Irritant? | |

Is the substance hazardous to health when:

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> In contact with skin? | <input checked="" type="checkbox"/> Breathed in? | <input type="checkbox"/> Other (Specify below) |
| <input checked="" type="checkbox"/> In contact with eyes? | <input checked="" type="checkbox"/> Swallowed? | |

USE OF SUBSTANCE

How should the substance be used? [Foam 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? [Not known at this time](#)

(State quantity in litres or kilos as appropriate.)

Who is exposed to the substance? [Those using it](#)

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

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?



Eye protection? (State type required)



Gloves? (State type required)



Overalls/clothing? (State type required)



Mask/respirator? (State type required)



Other? (State type required)

How should the substance be stored? Product should be diluted with water before use. (Fluorofoam 903UL at 3%, Fluorofoam 906UL at 6%). Avoid repeated inhalation or contact with eyes and skin of the foam concentrate. Product should be stored in sealed original containers above the freezing point and below 40oC.

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

Spillages: How should an accidental release/spillage of this substance be dealt with?

Washing of any spillages into drains should be avoided. Absorb spillage with absorbent granules and transfer to containers for safe disposal.

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

- | | |
|--|---|
| a) Swallowed? Rinse mouth with water and give plenty of water to drink. Do not induce vomiting. If symptoms persist seek medical advice and treat symptomatically. | b) In contact with eyes? Irrigate with fresh water for at least ten 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 specific measures required as this product is a fire extinguishing medium. If product containers are involved in fire then suitable extinguishing media should be applied.

Chemical reactions: Is there any other substance that this substance must not come into contact with? If stored at ambient temperature away from direct sunlight, shelf life is normally over five (5) years.

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. Do not dispose with water reactive materials.

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: 01/01/19
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.