



COSHH Risk Assessment

JANGRO ALCOHOL GEL HAND RUB (5 Ltr)

Product Code: BK140-5





Danger

PROCESS STAGE	POTENTIAL RISK	CONTROL MEASURES	ACTION REQUIRED
DELIVERY			
Packaged in 5 litre polythene containers in a cardboard carton.	Risk of spillage if the container is dropped. Risk of injury to user if dropped.	Take care not to drop the containers. Ensure that the cap is secure at all times.	Transfer container to store immediately following delivery. Do not leave containers where users of the building will come in to contact with them.
STORAGE			
Containers must be stored upright in a cool, dry storage area. Product must be kept stored in its original container.	Highly flammable. Minimal risk of spillage if lids are firmly in place. Lids are not child proof.	Keep containers in secure storage areas. Restrict access to storage areas to authorised personnel. Store in a way to avoid heat, flames and other sources of ignition.	Use oldest stock first. Make regular checks to ensure that storage are is clean and tidy. Make regular checks to ensure containers are not split or blown.
USAGE			
Product is dispensed in small quantities directly into the palm of the hands. Product is spread thoroughly over hands and lower forearms and rubbed well until skin is dry.	Risk of eye contact. Risk of inhalation. Risk of spillage on to floor.	Handle the containers with care. Do not use on hands with cuts and grazes. Keep the product away from the face. Always read manufacturer's instructions prior to use.	Ensure that operatives are aware of location of First Aid facilities and personnel.
DISPOSAL			
Empty containers must be rinsed thoroughly and disposed of as normal waste. Small amounts of residual product may be flushed with water to sewer. Recycle all containers wherever facilities are available.	Small risk of eye contact. Small risk of inhalation.	Wash out the container using plenty of water. Do not store any other material in the empty container. Ensure that the container is exhausted before disposal.	Ensure that operatives wear Personal Protective Equipment at all times during disposal.
Name of Assessor:		Signed:	Print:
Position:		Date of Assessment:	Review Date: