

|                                             |              |
|---------------------------------------------|--------------|
| <b>Assessment Completed by:</b>             | <b>Date:</b> |
| <b>Location where work will occur: Bldg</b> | <b>Room</b>  |
| <b>Contact No.</b>                          |              |

**Description of Task and Referenced Documentation**

Research/Teaching/Maintenance    ☐ Routine Task    Services : ☐ Water ☐ Power ☐ Gas: N<sub>2</sub>/..... ☐ Temp .....°C ☐ Pressure.....

[Working With Hazardous Substances Guidelines](#)

**Current Controls for Risk Minimisation**    *Laboratory coat and enclosed footwear are mandatory*

| Volume:                                                                | Toxicity/Corrosive                                                       | Body Exposure                            | Reactivity                                | Chronic Health                                                  |
|------------------------------------------------------------------------|--------------------------------------------------------------------------|------------------------------------------|-------------------------------------------|-----------------------------------------------------------------|
| Small / Medium / Large                                                 |                                                                          |                                          |                                           |                                                                 |
| <b>Flammable</b>                                                       | <input type="checkbox"/> Use in fume cupboard                            | <input type="checkbox"/> Safety Glasses  | <input type="checkbox"/> Dry atmosphere   | <input type="checkbox"/> Operator awareness                     |
| <input type="checkbox"/> Remove ignition sources                       | <input type="checkbox"/> Toxics in locked storage                        | <input type="checkbox"/> Face Shield     | <input type="checkbox"/> Inert atmosphere | <input type="checkbox"/> Monitoring Required                    |
| <input type="checkbox"/> Use in fume hood                              | <input type="checkbox"/> Placard to indicate risk score (High → extreme) | <input type="checkbox"/> Gloves Required | <input type="checkbox"/> Blast Shield     | <input type="checkbox"/> Avoid if pregnancy known or suspected. |
| <input type="checkbox"/> Temperature of reaction controlled at _____°C | <input type="checkbox"/> Respirator Required<br>Type _____               | ✓ Laboratory Coat                        | Reactivity destroyed / neutralised by:    | <input type="checkbox"/> Stop if allergic reaction develops     |
| <input type="checkbox"/> Inert atmosphere using _____                  | <input type="checkbox"/> Antidote Available/Req'd<br>Location _____      | ✓ Enclosed footwear                      | Other: _____                              | Other: _____                                                    |
| <input type="checkbox"/> Static discharge protection                   |                                                                          | <input type="checkbox"/> Eye Wash        |                                           |                                                                 |
|                                                                        |                                                                          | <input type="checkbox"/> Safety Shower   |                                           |                                                                 |

**Hazard Identification - Chemicals**    *List reactants & products, select applicable Hazards; rate risk with controls in place*

| Hazardous Chemical Reactant/ Products | Quantity | Flammable | Toxic | Corrosive | Harmful | Irritant | Oxidising | Carcinogen | Additional Controls | Risk: Low<br>Medium<br>High |
|---------------------------------------|----------|-----------|-------|-----------|---------|----------|-----------|------------|---------------------|-----------------------------|
| 1                                     |          |           |       |           |         |          |           |            |                     |                             |
| 2                                     |          |           |       |           |         |          |           |            |                     |                             |
| 3                                     |          |           |       |           |         |          |           |            |                     |                             |
| 4                                     |          |           |       |           |         |          |           |            |                     |                             |
| 5                                     |          |           |       |           |         |          |           |            |                     |                             |
| 6                                     |          |           |       |           |         |          |           |            |                     |                             |

**Hazard Identification - Equipment & Experiment Design**

| Hazard | Additional Controls<br>(rate risk with these controls in place) | Risk:<br>L M H |
|--------|-----------------------------------------------------------------|----------------|
| 7      |                                                                 |                |
| 8      |                                                                 |                |

**Further Risk Control Measures**    *For each control, specify hazard number if risk score medium, high or extreme*

☐ Disposal of hazardous waste using Hazardous Waste Store (Bldg 15) – segregated by DG class and compatibility

Please Refer to the [Working with Hazardous Chemicals guideline](#) (including Hierarchy of controls in Section 5.7 of [Risk Management guideline](#))

**Risk Score and Approval**

☐ Significant Risk but adequate controls in place (ie. low/medium)

NB: If you cannot tick this box and the risk is UNCONTROLLED or UNKNOWN, further ASSESSMENT is required and the experiment should NOT proceed.

Experiment Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
Supervisor Signature

**Complete for Laboratory Hard Copy ONLY**

To be completed after uploading document to a risk assessment on SafetyNet

**Risk Assessment SafetyNet Reference:**    **UOW** \_\_\_\_\_

Date approved on SafetyNet:    \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**High Risk (H)** – Approvers: supervisor and Head of School (SafetyNet RA)

*What are the consequences if an incident occurred?*  
*What is the likelihood the consequence will happen with controls in place?*

| <b>RISK MATRIX</b> |                   | <b>CONSEQUENCES</b>                    |                                    |                               |                                          |
|--------------------|-------------------|----------------------------------------|------------------------------------|-------------------------------|------------------------------------------|
|                    |                   | Minor<br>Injury Report<br>No treatment | Moderate<br>First aid<br>treatment | Major<br>Medical<br>treatment | Severe<br>Death or<br>extensive injuries |
| LIKELIHOOD         | Almost<br>Certain | M                                      | M                                  | H                             | H                                        |
|                    | Likely            | L                                      | M                                  | H                             | H                                        |
|                    | Possible          | L                                      | L                                  | M                             | H                                        |
|                    | Unlikely          | L                                      | L                                  | M                             | M                                        |