



# Formaldehyde Monitoring Procedure

Procedure Number

WCDHB-HS-010

Version Nos:

1

## 1. Purpose

This Procedure is performed as a means of ensure safe work practises, to protect all West Coast District Health Board (WCDHB) staff handling Formaldehyde, and to ensure requirements of the (HSNO) Hazardous Substances and New Organisms Act 1996 are met.

## 2. Application

This Procedure is to be followed by all WCDHB staff.

## 3. Definitions

For the purposes of this Procedure:

**Formaldehyde (Formalin)** is an identified toxic hazard, and is a known Carcinogenic agent. Formaldehyde is flammable and explosive, but only in higher concentrations, explosive concentrations may build up in improperly ventilates storage areas and fume hoods.

## 4. Responsibilities

For the purposes of this Procedure:

the **Nurse Manager – Perioperative Services** is required to:

- oversee all aspects of this Procedure

**Staff Members** are required to:

- ensure they abide by the requirements of this Procedure;

## 5. Resources Required

This Procedure requires:

- WCDHB Hazardous Substance Manual
- APC formaldehyde monitoring badge and form (as supplied by APC)
- Courier Bag and Bubble wrap (to protect the badge in transit.)

## 6. Process

- 1.00 All WCDHB staff have a responsibility to be familiar with an identified hazard and known Carcinogenic agent before handling this product, which is to include:
  - Familisation with the resource information available in each unit.
  - Knowledge of the policies and procedures relating to the use of Formalin.
  - Knowledge and skills in the safe handling, care, and spill procedures.
  - Knowledge and skill in the safe use of respirators and PPE to be used with Formalin.
- 1.01 Each staff member who is exposed to the vapour as part of their work are to be monitored.
- 1.02 Initial monitoring is done on two occasions, if the results are low on both times, it is concluded that work practices and ventilation may be necessary.



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- 1.03 When a level is found to be above the recommended level (for that vapour) changes to work practices and ventilation may be necessary.
- 1.04 Additional testing is carried out, until it is clear that the level is below the recommended for that vapour.
- 1.05 Monitoring is done for 15 minutes – the period chosen should include the procedures that generated the highest exposure.
- 1.06 Once the monitoring has stabilised, below the recommended levels, the monitoring can be longer i.e. six months.
- 1.07 If there are any changes to ventilation, equipment, work practices, or personnel, additional testing is required.
- 1.08 The badge is worn near the person's face/breathing zone for a period of 15 minutes.
- 1.09 The information on the outer of the plastic pouch is completed in full. This includes – Wearer's name, date, start time and stop time.
- 1.10 The badge is placed into the plastic pouch and sealed.
- 1.11 The accompanying form (provided by APC) is completed with the details of where and to whose attention that the analysis report is to be sent to, this will include OSH Advisor, Nurse Managers, Department Heads (which ever is applicable).
- 1.12 The badges are protected in bubble wrap, then placed into a courier bag to APC. APC then send by FedEx to Advanced Chemical Sensors in the USA for analysis.
- 1.13 If after analysis the badge shows it has been exposed to levels that are higher than those recommended by OSH then your results will be faxed to us within 48 hours of receipt of the badge, otherwise the report will be airmailed back to the WCDHB.

### 7. Precautions And Considerations

- ➔ Each staff member who is exposed to the vapour as part of their work are to be monitored.
- ➔ When a level is found to be above the recommended level (for that vapour) changes to work practices and ventilation may be necessary.
- ➔ Additional testing is carried out, until it is clear that the level is below the recommended for that vapour

### 8. References

Formalin Safety Data Sheet



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Hazard Register

Formalin Safety Data Sheet

<b>Revision History</b>	<b>Version:</b>	1
	<b>Developed By:</b>	Nurse Manager – Perioperative Services
	<b>Authorised By:</b>	General Manager – Secondary Services
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