**EVALUATION SHEET**

**OF ACTIVITIES USING CARCINOGENIC AND MUTAGENIC SUBSTANCES**

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| --- | --- | --- | --- |
| Form n. | Start date of employment | | Date of termination of employment |
| Surname and name | | | Place of use |
| Substance used  CAS | | Pure use? Yes 🞎 No 🞎 in solution at **%** | |
| Carcinogenic or suspected carcinogenic substance (R45 R49 R 40 H350 H351) 🞎  Mutagenic substance or suspected mutagenic substance (R46 H340 H341) 🞎 | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Activity: | | | |
| Phase 1 description: | | | |
| Phase 2 description: | | | |
| Phase 3 description: | | | |
|  | Phase 1 | Phase 2 | Phase 3 |
| Phisical state | * gas * dust * liquid * gel | * gas * dust * liquid * gel | * gas * dust * liquid * gel |
| Manipulated quantity (Q) | * Q > 250ml/100g * 50ml/1g<Q<250ml/100g * Q ≤ 50ml/1g | * Q > 250ml/100g * 50ml/1g<Q<250ml/100g * Q ≤ 50ml/1g | * Q > 250ml/100g * 50ml/1g<Q<250ml/100g * Q ≤ 50ml/1g |
| Number of manipulations per year (F) | * F>12 * 5<F<12 * F≤ 5 | * F>12 * 5<F<12 * F≤ 5 | * F>12 * 5<F<12 * F≤ 5 |
| Exposure time in continuous minutes | * T>30 * 15<T<30 * T≤ 15 | * T>30 * 15<T<30 * T≤ 15 | * T>30 * 15<T<30 * T≤ 15 |
| Use of chemical hood | * NO * A * B * C | * NO * A * B * C | * NO * A * B * C |

|  |  |  |
| --- | --- | --- |
| Personal protective equipment used | | |
| Gloves 🞎 | Goggles 🞎 | Mask with filter 🞎 |
| Screen 🞎 | Other? 🞎 Describe | |
| Possibility of substitution? Yes 🞎 No 🞎, Why | | |

|  |  |
| --- | --- |
| Person concerned | The person responsible for the activity |
|  |  |
| The local security officer | The department Director |
|  |  |
| Place and date: | |

|  |  |  |  |
| --- | --- | --- | --- |
| Level of exposure | | | Place |
| B 🞎 | M 🞎 | A 🞎 | The responsible / The Service Officer |

Attention!

* The document must be signed by the employee, the Responsible and the Department Director.
* The documentation, completed in its entirety and complete with the necessary attachments, must be forwarded to the secretariat of the Department to which it belongs.
* For any doubts about filling in the form, please contact the following numbers: 031 2389346 or 0332 219051 - 9050 - 9317