



#### WHAT YOU NEED TO KNOW

- It is possible for symptoms (especially respiratory symptoms following a delayed pulmonary oedema) to appear away from the exposure area and for systemic (or general) intoxication to occur. Medical advice is always recommended.
- You can request advice from the nearest poison control centre (CapTv) (phone numbers are available on this website: http://www.centres-antipoison.net). In that case, use the safety data sheet (SDS) of the substance(s) involved. The SDS must be given to emergency services.

This fact sheet addresses the following exposure accidents:

- Skin contact
- Eye contact
- Inhalation
- Accidental ingestion
- Sting with a needle containing a chemical product

In the event of accidental exposure to hydrofluoric acid (HF), phenol and substances that react to water or dry ice, please read "Specific measures to be taken in the event of accidental exposure to certain chemical substances", which completes the present protocol.

### WHAT TO DO

#### **IN ALL CASES**

 Check or have someone (ideally a first-aider) check whether the victim is conscious until the emergency services arrive.

# WHAT TO NOT DO IN ALL CASES

 Never neutralise an acid with a base. The strongly exothermic reaction would exacerbate local injury.



#### **MEASURES TO BE TAKEN**



#### IN CASE OF SKIN EXPOSURE

- Immediately and carefully remove rings, watches, bracelets and any soaked clothing, while taking care not to expose the areas of the body that are not contaminated (cut clothing up if necessary) and without peeling away the clothes that are sticking to the skin.
- Rinse immediately with plenty of running water at 10-15 cm from lesions with room temperature (under the tap or shower) for at least 10 to 15 minutes, without rubbing.

**Warning**: During the washing process, the person assisting the victim must protect themself (wear gloves, etc.) to avoid any contact with the contaminating substance(s).

**Note**: If necessary, use a screening device to preserve the victim's privacy.

- After prolonged and meticulous washing, the chemical burn can be covered with a dressing.
- If necessary, cover the victim with a survival blanket to avoid hypothermia.

**CAUTION:** Injuries generated by alkaline substances are generally severe because of faster and deeper penetration in the tissues. Initially, they could give a false impression of moderate injury to the skin.

The most serious chemical burns are not necessarily the most painful. Which is why medical advice is required for any burn, whatever chemical substance is involved. The

chemical substance is involved. The injury can evolve and require re-assessment within 48 to 72 hours.

#### IN CASE OF EYE SPLASH

 With eyes open, immediately rinse the eye from the inner to the outer corner with running water or saline solution, taking care not to contaminate the other eye, for at least 10 to 15 minutes. Ask for help from a third party for more effective rinsing.

**Note**: corneal contact lenses are generally washed away by the rinsing liquid, if that is not the case, do not attempt to remove them.

**CAUTION:** Injuries generated by alkaline substances are generally severe because of faster and deeper penetration in the tissues. Initially, they could give a false impression of moderate injury to the eye.

Consult an ophthalmologist without fail to assess the extent of the injury incurred and the need for treatment.



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#### IN CASE OF INHALATION

 Remove the victim from the contaminated zone while, if required, using respiratory protection appropriate for the contaminated atmosphere, then start the decontamination process and /or resuscitation where necessary.

**Note**: take emergency action in a contaminated atmosphere with appropriate respiratory protection.

Medical advice is essential, especially for acid vapours, as there is a risk of secondary injury away from the incident zone (pulmonary oedema for instance).





#### **MEASURES TO BE TAKEN**



#### IN CASE OF ACCIDENTAL INGESTION

- If the victim is conscious, make them wash their mouth out.
- Assist the victim into a sitting or half-sitting position.
- Do not make them drink or vomit as this could exacerbate the injury. Do not attempt to administer antacids or activated carbon which could hamper possible additional examinations and also lead to vomiting.

Ingestion of a chemical substance, especially if it is corrosive, constitutes an emergency for which medical advice is essential.



## IN CASE OF A STING WITH A NEEDLE CONTAINING OR HAVING CONTAINED A CHEMICAL PRODUCT

- Immediately wash with running water by pressing to induce bleeding.
- Disinfect with chlorhexidine.

The appearance of a pink-violet color at the sting site and the adjacent area may indicate onset of necrosis, and

specialised surgical advice (Emergency Hand Surgery) is required promptly. The same applies to the occurrence of acute pain and difficulty in mobility.

**Note**: Any injection under pressure requires urgent surgical consultation (Emergency Hand Surgery).

#### REMEMBER .....

A workplace accident must be declared to the Human Resources Department as soon as possible (preferably within 24 hours), by submitting a medical certificate and a workplace accident declaration form:



https://intranet.cnrs.fr/Cnrs\_pratique/ recruter/Pages/D%C3%A9clarationd%E2%80%99accident-du-travail-et-demaladie-professionnelle.aspx «Déclaration d'accident du travail et de maladie professionnelle»