

# 9.2. Exposure scenario 2: Use at industrial sites - Use as an intermediate

Environment	Environment contributing scenario(s):				
CS 1	Use as an intermediate ES 1.1	ERC 6a			
CS 2	Use as an intermediate ES 1.2	ERC 6a			
Worker contr	ributing scenario(s):				
CS 3	Handling of medium/high dusty materials	PROC 26			
CS 4	Handling of low dusty materials	PROC 26			
CS 5	Handling of solutions and reaction	PROC 3, PROC 15; PROC 4; PROC 5; PROC 8b; PROC 9			
CS 6	Fully contained process	PROC 1			
CS 7	Reaction process (furnace operation)	PROC 22			
CS 8	Hot powder production	PROC 27a			
CS 9	Wet powder production	PROC 27b			
CS 10	Wet cleaning	PROC 8a			
CS 11	Vacuum cleaning	PROC 26			

## 9.2.1. Env CS 1: Use as an intermediate ES 1.1 (ERC 6a)

Assessment entity group used for the assessment of this contributing scenario: Pt dissolved for ENV RA

#### 9.2.1.1. Conditions of use

A , 1	C	1 1	C	/ C	1.0 \
Amount used,	treamency	i and duration	Of like I	or from	service life)
minount asca,	, iicquciic ,	and duranon	or use	(01 110111	SCI VICC IIIC)

- Annual use amount at site: <= 30 tonnes/year
- 74.7 tonnes dipotassium hexachloroplatinate (30 tonnes Pt metal equivalent); 90P from sector data
- Daily use amount at site: <= 0.091 tonnes/day

Based on 330 days per year (50P from sector data)

Conditions and measures related to biological sewage treatment plant

- Biological STP: Site specific [Effectiveness Water: 57.1%]
- Discharge rate of STP: >= 3E3 m3/day
- Application of the STP sludge on agricultural soil: No

Conditions and measures related to external treatment of waste (including article waste)

• Particular considerations on the waste treatment operations: No (low amount)

Hazardous wastes from onsite risk management measures and solid or liquid wastes from production, use and cleaning processes should be disposed of separately to hazardous waste incineration plants or hazardous waste landfills as hazardous waste. Releases to the floor, water and soil are to be prevented. If the platinum content of the waste is elevated enough, internal or external recovery/recycling should be considered. Fraction of daily/annual use expected in waste: 0%

Appropriate waste codes: 06 04 05\*, 06 05 02\*, 10 07 01, 10 07 02, 10 07 03, 10 07 05, 10 08 16, 15 02 02\*, 16 01 18, 16 08 01, 16 08 06\*, 16 08 07\*, 19 08 06\*, 20 01 40

Suitable disposal: Hazardous waste produced during the manufacture and downstream use is sent to a recycler only marginal amounts are sent to a landfill or an incinerator. Waste containing platinum is recycled for almost a 100%

A detailed assessment has been performed and is reported in the Waste report (ARCHE, 2016)

Other conditions affecting environmental exposure

• Receiving surface water flow rate: >= 9.3E4 m3/day



· Discharge to: Freshwater only

#### Fate (release percentage) in the biological sewage treatment plant

The biological STP is site specific and the releases to the various compartments have been set by the assessor for some assessment entities. They are distributed in the following way:

Assessment entities	Pt(IV) dissolved
Release to water	42.9%
Release to air	0%
Release to sludge	57.1%
Release degraded	0%

Explanation for Pt(IV) dissolved:

Based on European STP monitoring programme. Stutt E, Wilson I, Merrington G & Rothenbacher K (2016) Determining the Removal of Platinum Group Metals in Industrial Effluent during Sewage Treatment. In: Abstracts Book of the SETAC Europe 26th Annual Meeting – 22-26 May 2016, Nantes, France, Society of Environmental Toxicology and Chemistry

### **9.2.1.2.** Releases

The local releases to the environment are reported in the following table. Note that the releases reported do not account for the removal in the modelled biological STP.

Table 9.33. Local releases to the environment

Release	Assessment entity	Release estimation method	Explanations
Water	Pt(IV) dissolved	Estimated release factor	Release factor before on site RMM: 1.19E-3% Release factor after on site RMM: 1.19E-3% Local release rate: 1.08E-3 kg/day Explanation: On-site wastewater treatment by chemical precipitation, sedimentation and/or filtration. Efficiency 99 % (sector data) Release factor after on-site treatment: 11.9 g/T (50P from sector data)
Air	Pt(IV) dissolved	Estimated release factor	Release factor before on site RMM: 3E-3% Release factor after on site RMM: 3E-3% Local release rate: 2.73E-3 kg/day Explanation: Treatment of air emissions by wet scrubbers and filters (e.g. fabric, bag, HEPA). Release factor after on-site treatment: 30 g/T (10% of SpERC RF for 'Manufacture of metal compounds')
Non agricultural soil	Pt(IV) dissolved	Estimated release factor	Release factor after on site RMM: 0%

## 9.2.1.3. Exposure and risks for the environment and man via the environment

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table. The exposure estimates have been obtained with EUSES 2.1.2 unless stated otherwise.

Table 9.34. Exposure concentrations and risks for the environment and man via the environment

Protection target	Assessment entity	Exposure concentration	Risk quantification
Fresh water	Pt(IV) dissolved	8	Final RCR = 0.034
		RCR = 0.034	



Protection target	Assessment entity	Exposure concentration	Risk quantification
Sediment (freshwater)	Pt(IV) dissolved	<b>Local PEC:</b> 8.84E-3 mg/kg dw RCR = 0.034	Final RCR = 0.034
Sewage Treatment Plant	Pt(IV) dissolved	<b>Local PEC:</b> 1.55E-4 mg/L RCR = 6.59E-4	Final RCR < 0.01
Agricultural soil	Pt(IV) dissolved	<b>Local PEC:</b> 1.22E-3 mg/kg dw RCR = 0.234	Final RCR = 0.234

## 9.2.2. Env CS 2: Use as an intermediate ES 1.2 (ERC 6a)

Assessment entity group used for the assessment of this contributing scenario: Pt dissolved for ENV RA

#### 9.2.2.1. Conditions of use

#### Amount used, frequency and duration of use (or from service life)

- Annual use amount at site: <= 30 tonnes/year
- 74.7 tonnes dipotassium hexachloroplatinate (30 tonnes Pt metal equivalent); 90P from sector data
- Daily use amount at site: <= 0.091 tonnes/day

  Based on 330 days per year (50P from sector data)

Conditions and measures related to biological sewage treatment plant

• Biological STP: None [Effectiveness Water: 0%]

Conditions and measures related to external treatment of waste (including article waste)

• Particular considerations on the waste treatment operations: No (low amount)

Hazardous wastes from onsite risk management measures and solid or liquid wastes from production, use and cleaning processes should be disposed of separately to hazardous waste incineration plants or hazardous waste landfills as hazardous waste. Releases to the floor, water and soil are to be prevented. If the platinum content of the waste is elevated enough, internal or external recovery/recycling should be considered. Fraction of daily/annual use expected in waste: 0%

Appropriate waste codes: 06 04 05\*, 06 05 02\*, 10 07 01, 10 07 02, 10 07 03, 10 07 05, 10 08 16, 15 02 02\*, 16 01 18, 16 08 01, 16 08 06\*, 16 08 07\*, 19 08 06\*, 20 01 40

Suitable disposal: Hazardous waste produced during the manufacture and downstream use is sent to a recycler only marginal amounts are sent to a landfill or an incinerator. Waste containing platinum is recycled for almost a 100%

A detailed assessment has been performed and is reported in the Waste report (ARCHE, 2016)

Other conditions affecting environmental exposure

- Receiving surface water flow rate: >= 3E6 m3/day
- Discharge to: Freshwater only
- Discharge rate of effluent: >= 3E3 m3/day

## **9.2.2.2. Releases**

The local releases to the environment are reported in the following table. Note that the releases reported do not account for the removal in the modelled biological STP.

Table 9.35. Local releases to the environment

Release	Assessment entity	Release estimation method	Explanations
Water	Pt(IV) dissolved	Estimated release factor	Release factor before on site RMM: 1.19E-3% Release factor after on site RMM: 1.19E-3% Local release rate: 1.08E-3 kg/day Explanation: On-site wastewater treatment by chemical precipitation, sedimentation and/or filtration. Efficiency 99 % (sector data)



Release	Assessment entity	Release estimation method	Explanations
			Release factor after on-site treatment: 11.9 g/T (50P from sector data)
Air	Pt(IV) dissolved	Estimated release factor	Release factor before on site RMM: 3E-3% Release factor after on site RMM: 3E-3% Local release rate: 2.73E-3 kg/day Explanation: Treatment of air emissions by wet scrubbers and filters (e.g. fabric, bag, HEPA). Release factor after on-site treatment: 30 g/T (10% of SpERC RF for 'Manufacture of metal compounds')
Non agricultural soil	Pt(IV) dissolved	Estimated release factor	Release factor after on site RMM: 0%

# 9.2.2.3. Exposure and risks for the environment and man via the environment

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table. The exposure estimates have been obtained with EUSES 2.1.2 unless stated otherwise.

Table 9.36. Exposure concentrations and risks for the environment and man via the environment

Protection target	Assessment entity	Exposure concentration	Risk quantification
Fresh water	, ,	<b>Local PEC:</b> 3.83E-7 mg/L RCR = 2.73E-3	Final RCR < 0.01
Sediment (freshwater)	` '	<b>Local PEC:</b> 7.14E-4 mg/kg dw RCR = 2.73E-3	Final RCR < 0.01
Agricultural soil	Pt(IV) dissolved	<b>Local PEC:</b> 1.22E-3 mg/kg dw RCR = 0.234	Final RCR = 0.234

# 9.2.3. Worker CS 3: Handling of medium/high dusty materials (PROC 26)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

## 9.2.3.1. Conditions of use

	Method
Product (article) characteristics	
Physical form of substance: Solid	
• Maximum emission potential of the substance: High Only the highest emission potential (EP) is reported. Lower EPs (e.g. if materials of lower dustiness are being handled in parallel) are thus automatically covered in this assessment.	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	
• The following type of exhaust ventilation are appropriate for handling of platinum substances:  - Generic local exhaust ventilation  - Exterior exhaust ventilation  - Integrated exhaust ventilation  A minimum efficiency of 80 % has to be assured.	



	Method
• Level of containment: Partly contained systems  Platinum substances have to be handled in at least partly-contained systems with only limited manual interventions. The level of containment should be as high as possible, easy maintenance should be allowed by system design.	
• Level of automation: As high as possible to reduce potential for exposure. This is inherently covered in the dermal exposure assessment by the reflection of an "incidental or intermittent" contact level (see the dermal exposure pattern below).	
• Removal of residuals: Dusty residuals Removal of dusty residuals is considered to be part of regular work. Dust may not be blown off with compressed air. Please refer to the introduction for more detailed information on how clean work environments are ensured and on how to contamination is avoided in the platinum industry.	
Dermal pattern of use: Non-dispersive use	
Dermal pattern of exposure control: Direct handling	
Dermal contact level: Intermittent	
Conditions and measures related to personal protection, hygiene and health evaluation	•
• Gloves: Protective gloves according to EN 374 have to be worn. Gloves have to be changed according to manufacturer's information or when damaged, whatever is the earlier. [Effectiveness Dermal: 90%]	
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE  (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.3.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

Table 9.37. Exposure concentrations and risks for workers

Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	dipotassium hexachloroplatinate	$0.09 \ \mu g/m^3$ (Measured data: Analogous data including RPE with APF = 40) <b>Supportive exposure (not used for RC):</b> $3.63 \ \mu g/m^3$ (Measured data: Analogous data)	Risk adequately controlled
Dermal, systemic, long term	dipotassium hexachloroplatinate	0.03 mg/kg bw/day (Measured data: Analogous data (Ni))	Risk adequately controlled

### Remarks on measured exposure:

Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers raw material handling

Inhalation exposure, long term concentration: Number of measured data points: 17; GSD: 3.7

Explanation: The estimated exposure level represents the 90th percentile of the exposure distribution for estimate #01 (GSD=3.7) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.



#### **Analogous data including RPE with APF = 40** for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers raw material handling

Inhalation exposure, long term concentration: Number of measured data points: 17; GSD: 3.7

Explanation: The estimated exposure level represents the 90th percentile of the exposure distribution for estimate #01 (GSD=3.7) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document and including RPE with APF = 40.

## Analogous data (Ni) for dipotassium hexachloroplatinate:

Identity of the substance used: Ni

Dermal exposure, long term systemic dose: Number of measured data points: 26

Explanation: The estimated exposure level represents the 90th percentile of the exposure distribution for NDI in consideration of appropriate use of gloves.

#### **Risk characterisation**

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eve, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.

# 9.2.4. Worker CS 4: Handling of low dusty materials (PROC 26)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

## 9.2.4.1. Conditions of use

	Method
Product (article) characteristics	
Physical form of substance: Solid	
• Maximum emission potential of the substance: Low Only the highest emission potential (EP) is reported. Lower EPs (e.g. if materials of lower dustiness are being handled in parallel) are thus automatically covered in this assessment.	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	
• The following type of exhaust ventilation are appropriate for handling of platinum substances:  - Generic local exhaust ventilation  - Exterior exhaust ventilation  - Integrated exhaust ventilation  A minimum efficiency of 80 % has to be assured.	
• Level of containment: Containment due to physical form  The physical form of the platinum substance may be considered as some containment considerably reducing emissions. Platinum substances have to be handled in at least partly-contained systems with only limited manual interventions. The level of containment should be as high as possible, easy maintenance should be allowed by system design.	
• Level of automation: As high as possible to reduce potential for exposure. This is inherently covered in the dermal exposure assessment by the reflection of an "incidental or intermittent" contact level (see the dermal exposure pattern below).	
Removal of residuals: Dusty residuals	



	Method
Removal of dusty residuals is considered to be part of regular work. Dust may not be blown off with compressed air. Please refer to the introduction for more detailed information on how clean work environments are ensured and on how to contamination is avoided in the platinum industry.	
Dermal pattern of use: Non-dispersive use	
Dermal pattern of exposure control: Direct handling	
Dermal contact level: Intermittent	
Conditions and measures related to personal protection, hygiene and health evaluation	
• Gloves: Protective gloves according to EN 374 have to be worn. Gloves have to be changed according to manufacturer's information or when damaged, whatever is the earlier. [Effectiveness Dermal: 90%]	
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE  (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.4.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

Table 9.38. Exposure concentrations and risks for workers

Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	dipotassium hexachloroplatinate	$0.04 \ \mu g/m^3$ (Measured data: Analogous data including RPE with APF = 10) <b>Supportive exposure (not used for RC):</b> $0.38 \ \mu g/m^3$ (Measured data: Analogous data)	Risk adequately controlled
Dermal, systemic, long term	dipotassium hexachloroplatinate	0.03 mg/kg bw/day (Measured data: Analogous data (Ni))	Risk adequately controlled

#### Remarks on measured exposure:

Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: ClPt manufacturers raw material handling

Inhalation exposure, long term concentration: Number of measured data points: 3; GSD: 1.9

Explanation: The estimated exposure level represents the 95th percentile of the exposure distribution for estimate #02 (GSD=1.9) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.

**Analogous data including RPE with APF = 10** for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers raw material handling

Inhalation exposure, long term concentration: Number of measured data points: 3; GSD: 1.9

Explanation: The estimated exposure level represents the 95th percentile of the exposure distribution for estimate #02 (GSD=1.9) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document and including RPE with APF = 10.

Analogous data (Ni) for dipotassium hexachloroplatinate:



Identity of the substance used: Ni

Dermal exposure, long term systemic dose: Number of measured data points: 26

Explanation: The estimated exposure level represents the 90th percentile of the exposure distribution for NDI in consideration of appropriate use of gloves.

## Risk characterisation

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eye, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.

# 9.2.5. Worker CS 5: Handling of solutions and reaction (PROC 3, PROC 15; PROC 4; PROC 5; PROC 8b; PROC 9)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

### 9.2.5.1. Conditions of use

	Method
Product (article) characteristics	
Physical form of substance: Liquid     Solution, suspension	
• Maximum emission potential of the substance: Very low It is noted that spraying operations are not covered in this assessment.	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	
• The following type of exhaust ventilation are appropriate for handling of platinum substances:  - Generic local exhaust ventilation  - Integrated exhaust ventilation  A minimum efficiency of 80 % has to be assured.	
• Level of containment: Partly contained systems  Platinum substances are always handled in at least partly-contained systems with only limited manual interventions. The level of containment should be as high as possible, easy maintenance should be allowed by system design.	
• Level of automation: As high as possible to reduce potential for exposure. This is inherently covered in the dermal exposure assessment by the reflection of an "incidental or intermittent" contact level (see the dermal exposure pattern below).	
• Removal of residuals: Splashes  Splashes are to be removed immediately, before drying. Please refer to the introduction for more detailed information on how clean work environments are ensured and on how to contamination is avoided in the platinum industry.	
Dermal pattern of use: Non-dispersive use	
Dermal pattern of exposure control: Non-direct handling	
Dermal contact level: Intermittent	
Conditions and measures related to personal protection, hygiene and health evaluation	
• Gloves: Protective gloves according to EN 374 have to be worn. Gloves have to be changed according to manufacturer's information or when damaged, whatever is the	



	Method
earlier. [Effectiveness Dermal: 90%]	
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.5.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

Table 9.39. Exposure concentrations and risks for workers

Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	hexachloroplatinate	$0.07~\mu g/m^3$ (Measured data: Analogous data including RPE with APF = 10) <b>Supportive exposure (not used for RC):</b> $0.68~\mu g/m^3$ (Measured data: Analogous data)	Risk adequately controlled
Dermal, systemic, long term	dipotassium hexachloroplatinate	1 μg/kg bw/day (Measured data: Analogous data (Ni))	Risk adequately controlled

#### Remarks on measured exposure:

## Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers wet processing

Inhalation exposure, long term concentration: Number of measured data points: 21; GSD: 2.5

Explanation: The estimated exposure level represents the 90th percentile of the exposure distribution for estimate #09 (GSD=2.5) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.

## **Analogous data including RPE with APF = 10** for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers wet processing

Inhalation exposure, long term concentration: Number of measured data points: 3; GSD: 1.9

Explanation: The estimated exposure level represents the 90th percentile of the exposure distribution for estimate #09 (GSD=2.5) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document and including RPE with APF = 10.

## Analogous data (Ni) for dipotassium hexachloroplatinate:

Identity of the substance used: Ni

Dermal exposure, long term systemic dose: Number of measured data points: 7

Explanation: The estimated exposure level ( $< 1\mu g/kg \text{ bw/day}$ ) represents the 90th percentile of the exposure distribution for NNI in consideration of appropriate use of gloves.

#### Risk characterisation

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eye, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.



# 9.2.6. Worker CS 6: Fully contained process (PROC 1)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

## 9.2.6.1. Conditions of use

	Method
	Method
Product (article) characteristics	1
Physical form of substance: Unknown     Not relevant (fully contained systems)	
• Maximum emission potential of the substance: Unknown Not relevant (fully contained systems)	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	
• Level of containment: Full containment	
Dermal pattern of use: Closed system without breaches	
Dermal pattern of exposure control: Non-direct handling	
Dermal contact level: None	
• Potential for contamination Although the process as such is fully contained, exposure from adjacent workplaces may lead to contamination. Please consider the need for personal protective equipment in these cases.	
Conditions and measures related to personal protection, hygiene and health evaluation	
• Gloves as precautionary measure: Gloves protecting from local effects to the skin (medium hazard)  Due to the potential adverse effects of the substance to skin, protective gloves according to EN 374 have to be worn at all workplaces. Additionally, face protection is required to be worn as appropriate.	
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE  (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.6.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

## Table 9.40. Exposure concentrations and risks for workers



Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	dipotassium hexachloroplatinate	0.01 µg/m³ (Measured data: Analogous data)	Risk adequately controlled
Dermal, systemic, long term	dipotassium hexachloroplatinate	4E-3 mg/kg bw/day (Measured data: Analogous data (Ni))	Risk adequately controlled

### Remarks on measured exposure:

#### Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: ClPt manufacturers separation/filtration

Inhalation exposure, long term concentration: Number of measured data points: 8; GSD: 2.3

Explanation: The estimated exposure level represents the 95th percentile value of the exposure distribution for the static estimate #14 (GSD=2.3) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.

## Analogous data (Ni) for dipotassium hexachloroplatinate:

Identity of the substance used: Ni

Dermal exposure, long term systemic dose: Number of measured data points: 12

Explanation: The estimated exposure level represents 1/10 of the 90th percentile of the exposure distribution for NNI (without gloves).

#### Risk characterisation

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eye, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.

# 9.2.7. Worker CS 7: Reaction process (furnace operation) (PROC 22)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

## 9.2.7.1. Conditions of use

	Method
Product (article) characteristics	
Physical form of substance: Unknown     Not relevant	
• Maximum emission potential of the substance: Low Only the highest emission potential (EP) is reported. Lower EPs (e.g. if materials of lower dustiness are being handled in parallel) are thus automatically covered in this assessment.	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	·
• Maximum process temperature: °C  Below melting point	
• The following type of exhaust ventilation are appropriate for handling of platinum substances:  - Integrated exhaust ventilation A minimum efficiency of 90 % has to be assured.	
• Level of containment: Partly contained systems	



	Method
Platinum substances have to be handled in at least partly enclosed systems. The level of containment should be as high as possible, easy maintenance should be allowed by system design.	
• Level of automation: As high as possible to reduce potential for exposure. This is inherently covered in the dermal exposure assessment by the reflection of an "incidental or intermittent" contact level (see the dermal exposure pattern below).	
• Removal of residuals: Dusty residuals Removal of dusty residuals is considered to be part of regular work. Dust may not be blown off with compressed air. Please refer to the introduction for more detailed information on how clean work environments are ensured and on how to contamination is avoided in the platinum industry.	
Dermal pattern of use: Non-dispersive use	
Dermal pattern of exposure control: Non-direct handling	
Dermal contact level: Intermittent	
Conditions and measures related to personal protection, hygiene and health evaluation	
• Gloves: Protective gloves according to EN 374 have to be worn. Gloves have to be changed according to manufacturer's information or when damaged, whatever is the earlier. [Effectiveness Dermal: 90%]	
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.7.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

Table 9.41. Exposure concentrations and risks for workers

Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	dipotassium hexachloroplatinate	$0.07~\mu g/m^3$ (Measured data: Analogous data including RPE with APF = 20) <b>Supportive exposure (not used for RC):</b> $1.35~\mu g/m^3$ (Measured data: Analogous data)	Risk adequately controlled
Dermal, systemic, long term	dipotassium hexachloroplatinate	1 μg/kg bw/day (Measured data: Analogous data (Ni))	Risk adequately controlled

### Remarks on measured exposure:

Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers calcination

Inhalation exposure, long term concentration: Number of measured data points: 4; GSD: 2.6

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #17 (GSD=2.6) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.



## Analogous data including RPE with APF = 20 for dipotassium hexachloroplatinate:

Identity of the substance used: ClPt manufacturers calcination

Inhalation exposure, long term concentration: Number of measured data points: 4; GSD: 2.6

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #17 (GSD=2.6) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document and including RPE with APF = 20.

## Analogous data (Ni) for dipotassium hexachloroplatinate:

Identity of the substance used: Ni

Dermal exposure, long term systemic dose: Number of measured data points: 7

Explanation: The estimated exposure level ( $<1\mu g/kg$  bw/day) represents the 90th percentile of the exposure distribution for NNI in consideration of appropriate use of gloves.

#### Risk characterisation

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eye, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.

# 9.2.8. Worker CS 8: Hot powder production (PROC 27a)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

### 9.2.8.1. Conditions of use

	Method
Product (article) characteristics	
Physical form of substance: Molten     Molten / powder (already other substance)	
• Maximum emission potential of the substance: Medium  Only the highest emission potential (EP) is reported. Lower EPs (e.g. if materials of lower dustiness are being handled in parallel) are thus automatically covered in this assessment.	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	
• Maximum process temperature: °C Slightly above melting point	
• The following type of exhaust ventilation are appropriate for handling of platinum substances:  - Integrated exhaust ventilation  A minimum efficiency of 90 % has to be assured.	
• Level of containment: Partly contained systems  Platinum substances have to be handled in at least partly-contained systems with only limited manual interventions. The level of containment should be as high as possible, easy maintenance should be allowed by system design.	
• Level of automation: As high as possible to reduce potential for exposure. This is inherently covered in the dermal exposure assessment by the reflection of an "incidental or intermittent" contact level (see the dermal exposure pattern below).	
• Removal of residuals: Dusty residuals Removal of dusty residuals is considered to be part of regular work. Dust may not be	



	Method
blown off with compressed air. Please refer to the introduction for more detailed information on how clean work environments are ensured and on how to contamination is avoided in the platinum industry.	
• Dermal pattern of use: Non-dispersive use	
Dermal pattern of exposure control: Non-direct handling	
Dermal contact level: Intermittent	
Conditions and measures related to personal protection, hygiene and health evaluation	
• Gloves: Protective gloves according to EN 374 have to be worn. Gloves have to be changed according to manufacturer's information or when damaged, whatever is the earlier. [Effectiveness Dermal: 90%]	
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.8.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

Table 9.42. Exposure concentrations and risks for workers

Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	dipotassium hexachloroplatinate	0.07 $\mu g/m^3$ (Measured data: Analogous data including RPE with APF = 20) <b>Supportive exposure (not used for RC):</b> 1.35 $\mu g/m^3$ (Measured data: Analogous data)	Risk adequately controlled
Dermal, systemic, long term	dipotassium hexachloroplatinate	1 μg/kg bw/day (Measured data: Analogous data (Ni))	Risk adequately controlled

## Remarks on measured exposure:

Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers calcination

Inhalation exposure, long term concentration: Number of measured data points: 4; GSD: 2.6

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #17 (GSD=2.6) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.

## Analogous data including RPE with APF = 20 for dipotassium hexachloroplatinate:

Identity of the substance used: ClPt manufacturers calcination

<u>Inhalation exposure</u>, <u>long term concentration</u>: Number of measured data points: 4; GSD: 2.6

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #17 (GSD=2.6) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document and including RPE with APF = 20.

### Analogous data (Ni) for dipotassium hexachloroplatinate:

Identity of the substance used: Ni



Dermal exposure, long term systemic dose: Number of measured data points: 7

Explanation: The estimated exposure level ( $<1\mu g/kg$  bw/day) represents the 90th percentile of the exposure distribution for NNI in consideration of appropriate use of gloves.

### **Risk characterisation**

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eye, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.

## 9.2.9. Worker CS 9: Wet powder production (PROC 27b)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

### 9.2.9.1. Conditions of use

	Method
Product (article) characteristics	I.
Physical form of substance: Various	
• Maximum emission potential of the substance: Low Only the highest emission potential (EP) is reported. Lower EPs (e.g. if materials of lower dustiness are being handled in parallel) are thus automatically covered in this assessment.	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	
• The following type of exhaust ventilation are appropriate for handling of platinum substances:  - Integrated exhaust ventilation A minimum efficiency of 80 % has to be assured.	
• Level of containment: Partly contained systems  Platinum substances have to be handled in at least partly enclosed systems. The level of containment should be as high as possible, easy maintenance should be allowed by system design.	
• Level of automation: As high as possible to reduce potential for exposure. This is inherently covered in the dermal exposure assessment by the reflection of an "incidental or intermittent" contact level (see the dermal exposure pattern below).	
• Removal of residuals: Dusty residuals Removal of dusty residuals is considered to be part of regular work. Dust may not be blown off with compressed air. Please refer to the introduction for more detailed information on how clean work environments are ensured and on how to contamination is avoided in the platinum industry.	
Dermal pattern of use: Non-dispersive use	
Dermal pattern of exposure control: Non-direct handling	
Dermal contact level: Intermittent	
Conditions and measures related to personal protection, hygiene and health evaluation	
• Gloves: Protective gloves according to EN 374 have to be worn. Gloves have to be changed according to manufacturer's information or when damaged, whatever is the earlier. [Effectiveness Dermal: 90%]	



	Method
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE  (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.9.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

Table 9.43. Exposure concentrations and risks for workers

Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	dipotassium hexachloroplatinate	$0.05~\mu g/m^3$ (Measured data: Analogous data including RPE with APF = 20) <b>Supportive exposure (not used for RC):</b> $1.04~\mu g/m^3$ (Measured data: Analogous data)	Risk adequately controlled
Dermal, systemic, long term	dipotassium hexachloroplatinate	1 μg/kg bw/day (Measured data: Analogous data (Ni))	Risk adequately controlled

## Remarks on measured exposure:

Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers separation/filtration

Inhalation exposure, long term concentration: Number of measured data points: 3; GSD: 3.4

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #12 (GSD=3.4) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.

#### Analogous data including RPE with APF = 20 for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers separation/filtration

Inhalation exposure, long term concentration: Number of measured data points: 3; GSD: 3.4

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #12 (GSD=3.4) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document and including RPE with APF = 20.

### Analogous data (Ni) for dipotassium hexachloroplatinate:

Identity of the substance used: Ni

Dermal exposure, long term systemic dose: Number of measured data points: 7

Explanation: The estimated exposure level ( $<1\mu g/kg$  bw/day) represents the 90th percentile of the exposure distribution for NNI in consideration of appropriate use of gloves.

### **Risk characterisation**

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eye, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.



# 9.2.10. Worker CS 10: Wet cleaning (PROC 8a)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

## 9.2.10.1. Conditions of use

	Method
Product (article) characteristics	
Physical form of substance: Liquid     Solution, suspension	
Maximum emission potential of the substance: Very low	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	
• Removal of residuals: Splashes Removal of residuals is considered to be part of regular work. Splashes are to be removed immediately, before drying. Please refer to the introduction for more detailed information on how clean work environments are ensured and on how to contamination is avoided in the platinum industry. Workplaces are to be cleaned before any maintenance work starts.	
Dermal pattern of use: Non-dispersive use	
Dermal pattern of exposure control: Direct handling	
Dermal contact level: Extensive	
Conditions and measures related to personal protection, hygiene and health evaluation	
• Gloves: Protective gloves according to EN 374 have to be worn. Gloves have to be changed according to manufacturer's information or when damaged, whatever is the earlier. [Effectiveness Dermal: 90%]	
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE  (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.10.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

Table 9.44. Exposure concentrations and risks for workers

Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	hexachloroplatinate	'0 \	Risk adequately controlled



Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
		data)	
Dermal, systemic, long term			Risk adequately controlled

## Remarks on measured exposure:

### Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers cleaning and maintenance

Inhalation exposure, long term concentration: Number of measured data points: 17; GSD: 5.1

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #27 (GSD=5.1) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.

### Analogous data including RPE with APF = 40 for dipotassium hexachloroplatinate:

Identity of the substance used: ClPt manufacturers cleaning and maintenance

Inhalation exposure, long term concentration: Number of measured data points: 17; GSD: 5.1

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #27 (GSD=5.1) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document and including RPE with APF = 40.

#### Analogous data (Ni) for dipotassium hexachloroplatinate:

Identity of the substance used: Ni

Dermal exposure, long term systemic dose: Number of measured data points: 17

Explanation: The estimated exposure level represents the 90th percentile of the exposure distribution for NDE in consideration of appropriate use of gloves.

## Risk characterisation

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eye, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.

# 9.2.11. Worker CS 11: Vacuum cleaning (PROC 26)

Assessment entity group used for the assessment of this contributing scenario: Dipotassium hexachloroplatinate for OCC RA

## 9.2.11.1. Conditions of use

	Method
Product (article) characteristics	
Physical form of substance: Solid     Dusty residuals	
• Maximum emission potential of the substance: High Only the highest emission potential (EP) is reported. Lower EPs (e.g. if materials of lower dustiness are being handled in parallel) are thus automatically covered in this assessment.	
• Content in preparation: Not restricted [Effectiveness Inhalation: 0%, Dermal: 0%]	
Amount used (or contained in articles), frequency and duration of use/exposure	
• Maximum duration of exposure: > 240 min (not restricted) [Effectiveness Inhalation: 0%, Dermal: 0%]	
Technical and organisational conditions and measures	
• Removal of residuals: Dusty residuals  A highly efficient vacuum cleaner is to be used. No direct manual removal of dust.	



	Method
Removal of dusty residuals is considered to be part of regular work. Dust may not be blown off with compressed air. Please refer to the introduction for more detailed information on how clean work environments are ensured and on how to contamination is avoided in the platinum industry.  Workplaces are to be cleaned before any maintenance work starts.	
Dermal pattern of use: Non-dispersive use	
Dermal pattern of exposure control: Non-direct handling	
Dermal contact level: Extensive	
Conditions and measures related to personal protection, hygiene and health evaluation	
• Gloves: Protective gloves according to EN 374 have to be worn. Gloves have to be changed according to manufacturer's information or when damaged, whatever is the earlier. [Effectiveness Dermal: 90%]	
• Eye protection: Eye protection to be worn to protect from adverse effects to the eyes Due to the adverse effects of the substance to the eyes, direct contact of the eyes with the substance is to be avoided including hand to eye transfer after touching contaminated surfaces. Suitable eye protection equipment (e.g. goggles or visors) must be worn.	
• Respiratory protective equipment (RPE) as precautionary measure: RPE protecting from local effects via inhalation  Due to potential adverse effects of the substance to the respiratory tract, RPE  (minimum assigned protection factor of 10) is prescribed on a precautionary basis for all workplaces unless inhalation exposure to the substance can be excluded. Please note that higher APFs may be required as reported in exposure and risk section for this subcontributing exposure scenario.	

## 9.2.11.2. Exposure and risks for workers

The exposure concentrations and risk characterisation ratios (RCR) are reported in the following table.

Table 9.45. Exposure concentrations and risks for workers

Route of exposure and type of effects	Assessment entity	Exposure concentration	Risk quantification
Inhalation, systemic, long term	dipotassium hexachloroplatinate	0.07 $\mu g/m^3$ (Measured data: Analogous data including RPE with APF = 40) <b>Supportive exposure (not used for RC):</b> 2.96 $\mu g/m^3$ (Measured data: Analogous data)	Risk adequately controlled
Dermal, systemic, long term	dipotassium hexachloroplatinate	0.01 mg/kg bw/day (Measured data: Analogous data (Ni))	Risk adequately controlled

## Remarks on measured exposure:

#### Analogous data for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers cleaning and maintenance

Inhalation exposure, long term concentration: Number of measured data points: 17; GSD: 5.1

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #27 (GSD=5.1) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document.

### Analogous data including RPE with APF = 40 for dipotassium hexachloroplatinate:

Identity of the substance used: CIPt manufacturers cleaning and maintenance

Inhalation exposure, long term concentration: Number of measured data points: 17; GSD: 5.1

Explanation: The estimated exposure level represents the maximum value of the exposure distribution for estimate #27 (GSD=5.1) taken from the Pt monitoring database from the "Methodology applied in the Occupational Exposure Scenarios for Platinum Substances" document and including RPE with APF = 40.



Analogous data (Ni) for dipotassium hexachloroplatinate:

Identity of the substance used: Ni

Dermal exposure, long term systemic dose: Number of measured data points: 7

Explanation: The estimated exposure level represents the 90th percentile of the exposure distribution for NNE in consideration of the use of appropriate gloves.

### **Risk characterisation**

Qualitative risk characterisation (Inhalation, systemic, long term, Inhalation, systemic, acute, Inhalation, local, long term, Inhalation, local, acute, Dermal, systemic, long term, Dermal, systemic, acute, Dermal, local, long term, Dermal, local, acute, Eye, local):

Further information on the risk characterisation for all qualitative hazard conclusions is given in Section 9.0.4.2. Under the prescribed conditions of use, exposure is maintained at a very low level and the risk for any adverse health effects is minimised to the technically feasible level. Therefore, risks are adequately controlled.