

Prevention of risks related to surface contamination by metals

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Surface contamination, what are we talking about?



Substances with low volatility, therefore persistent without effective cleaning.

Associated risks:

- Resuspension of dust
- Skin contamination
- Hand-to-mouth transfer
- Spreading in the surrounding space



Increased risk of chronic exposure, with a possible time lag.

Metals and their derivatives, dangerous?

... some examples!

Lead

C2, R1_{AD}, R2_F, SS_B
VME: 100 µg/m³

Arsenic

C1_A, M2, R
VME: 10 µg/m³

Cobalt

C1_B, R1_{BF}, M2, R, S
VME: 100 µg/m³

Nickel

C1_A, S
VME: 50 µg/m³

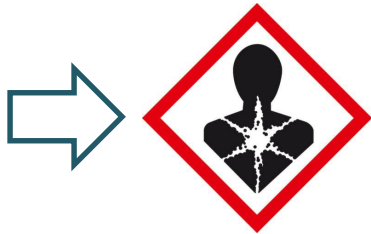
Beryllium

C1[#]_A, S
VME: 0.6 µg/m³

Chromium(VI)

C1_A, R, S
VME: 5 µg/m³

...



Carcinogenic, mutagenic, reprotoxic; more or less certain

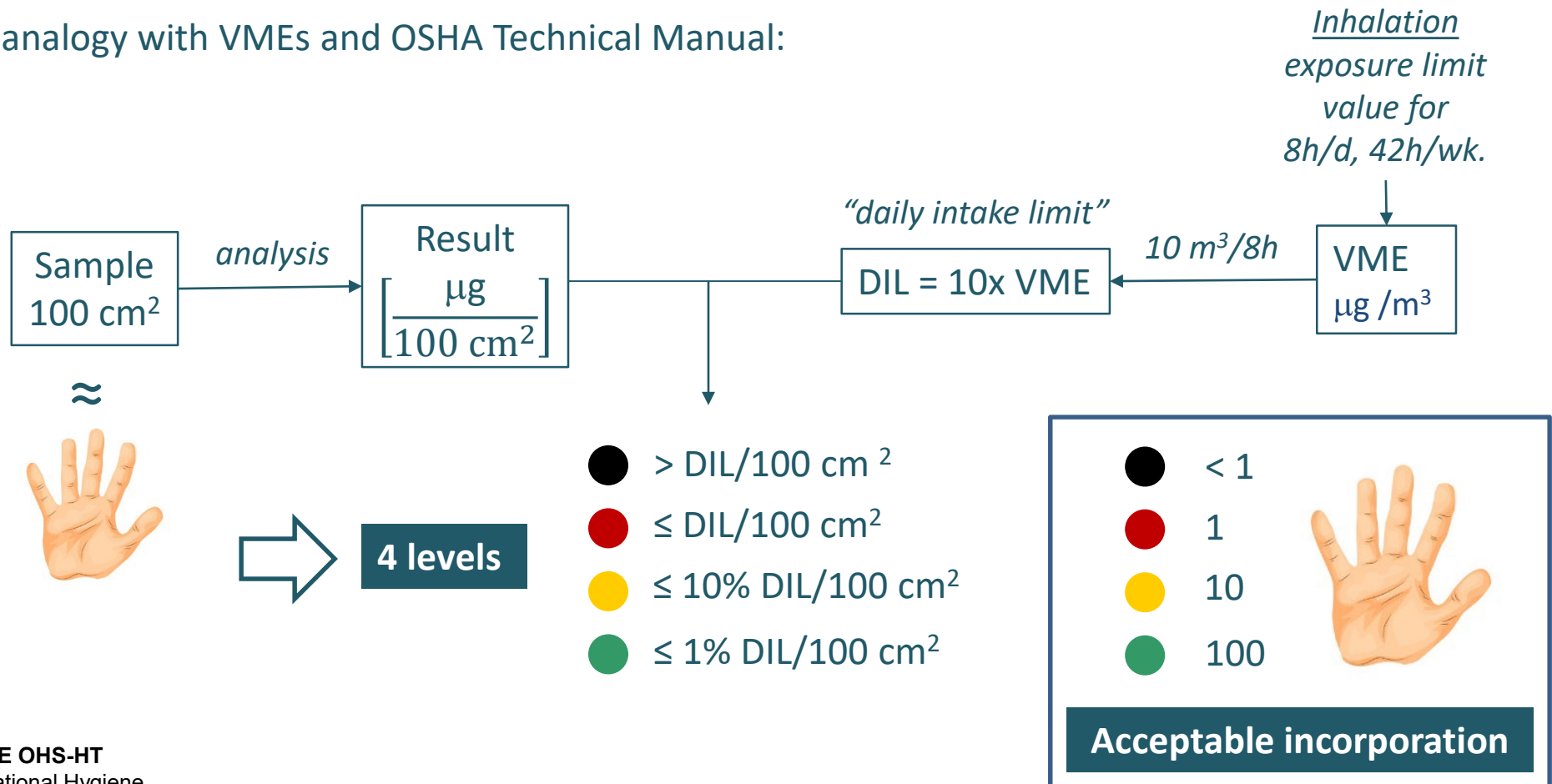
VME: exposure limit value for exposure 8h/day, 42h/week over a long period (inhalation).

C1_A: known carcinogen; C1[#]_A: known carcinogen with threshold; C1_B: probable carcinogen; C2 potential carcinogen; M2: potential mutagen; R1_{AD}: known reprotoxic for the fetus in utero; R1_{BF}: probable reprotoxic affecting fertility; R2_F: potential reprotoxic affecting fertility; S: sensitizer; SS_B: damage to the foetus can not be excluded even if VME has been respected; R: transcutaneous resorption.

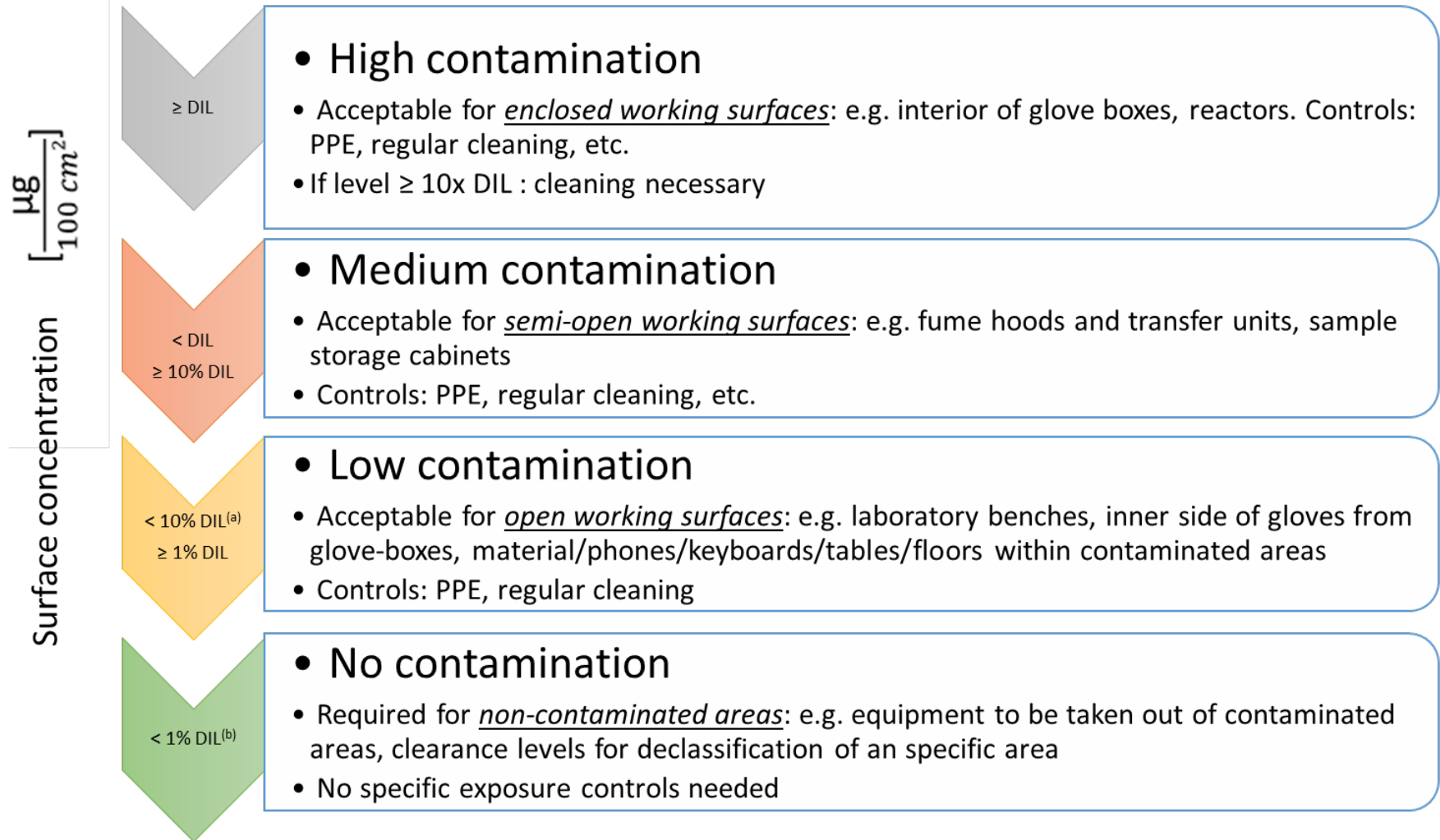
Surface Contamination Assessment Criteria

No standard limits, because it is difficult to make a direct link between the contamination of a surface and the risk of exposure of the person.

By analogy with VMEs and OSHA Technical Manual:



Surface sampling: Criteria for the evaluation of surface contamination



(a) 10% of the total daily intake limit (DIL = 10x VME) based on the Swiss VMEs and the OSHA Technical Manual; Section II: Chapter 2 – paragraph III.A

(b) 1% of DIL = "clearance level"

Metal sampling methods

Quantitative



Analysis:

- Digestion/mineralization by HNO_3 aq.
- Quantification by ICP/MS
- Approx. costs 100.- CHF/sample (paid by the Unit)

Qualitative

(only for certain metals)



Example: lead – ball mixer

Request from a Unit to control the possible dispersion of lead perovskite linked to the use of a ball mixer.



Samples		Pb Concentration [$\mu\text{g}/100\text{ cm}^2$]
Wet Lab	Blank	● 0.01
	fume hood - front	● 2.00
	fume hood - back	● 163.64
	bench in front ball milling	● 8.37
	bench in front furnace	● 3.57
	top of furnace	● 2.45
	ball milling supports	● 40.92
Office 1	desk+keyboard	● 0.63
Office 2	desk+keyboard	● 0.06
Control room	desk	● 0.05
Analytical lab	table for sample prep	● 0.81

Lead: ● <4.3 ● <22 ● <50 ● ≥ 50 $\mu\text{g}/100\text{ cm}^2$
 (Brookhaven National Laboratory and US EPA)



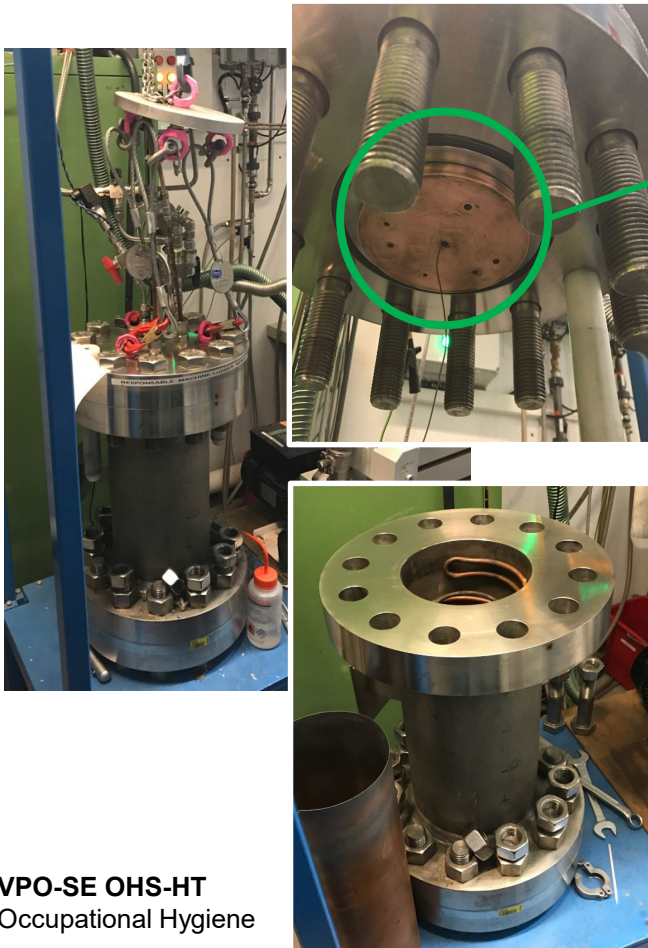
Limited lead dispersion in the lab



Cleaning "peripheral" areas

Example: arsenic – impregnation reactor

Request from the Unit to assess the residual contamination after the inappropriate use of a material containing arsenic sulphide inside a high temperature impregnation reactor (600°C, 100 bar).



All internal insulation has been eliminated.

The lid is the area with a highest risk of contamination:

- Insulation was degraded
- Cooler zone (more condensation)
- Most accessible area during future manipulations

Arsenic: VME= 10 $\mu\text{g}/\text{m}^3 \rightarrow$ DIL 100 μg

● <1 ● <10 ● <100 ● >100 $\mu\text{g}/100 \text{ cm}^2$

1st cleaning (iPrOH): 570 $\mu\text{g}/100 \text{ cm}^2$



2nd cleaning (abrasive): 1.5 $\mu\text{g}/100 \text{ cm}^2$



Conclusions

- ▶ Metals are persistent contaminants that can accumulate and generate significant chronic exposure.



Effective and regular cleaning procedure.

- ▶ The effectiveness of the cleaning procedure must be checked by regular surface sampling to prevent a possible drift of the contamination.
- ▶ In case of this type of activities with a risk of regular exposure (>200 hrs/ year), an announcement to Occupational Medicine is necessary via the medical form on the *Health at Work* website from OHS.
<https://www.epfl.ch/campus/security-safety/en/health/health-at-work/>

Thank you for your attention.
Any questions ?

