# **CARBON DIOXIDE**

# manufacturing Safety Alliance of BC

# **AWARENESS**

# WHAT IS CARBON DIOXIDE?

Carbon dioxide gas is colourless and odourless gas or extremely cold liquid under pressure or refrigeration. It will not burn. Carbon dioxide is a compressed gas. It can displace oxygen in air and may accumulate in low areas which can be a confined space hazard. Carbon dioxide is a very mild central nervous system tranquillizer. Very high concentrations may cause headache, nausea, dizziness, sweating, restlessness and disorientation. Liquefied gas may cause frostbite.

# FORMS OF CO<sub>2</sub>

At higher concentrations it has a sharp, acidic odor. Another form of solid carbon dioxide observed at high pressure is an amorphous glass-like solid.

Carbon dioxide has no liquid state at pressures below 5.1 standard atmospheres.

# **AIR QUALITY**

Carbon dioxide (CO2) is a by-product for indoor pollutants emitted by humans and relates with human metabolic activity. Carbon dioxide at levels that are unusually high indoors may cause occupants to grow drowsy, get headaches, or function at lower activity levels. Humans are the main indoor source of carbon dioxide. Indoor levels are an indicator of the adequacy of outdoor air ventilation relative to indoor occupant density and metabolic activity.

# INDUSTRIAL APPLICATIONS OF CARBON DIOXIDE

- Foods
- Gas Stunning
- Flash Freezing
- Green Houses
- Mushroom Growing
- Beverages
- Wine Making
- Fire Extinguisher
- Refrigerant

# CO<sub>2</sub> EXPOSURE

Workers briefly exposed to very high concentrations showed damage to the retina, sensitivity to light (photophobia), abnormal eye movements, constriction of visual fields, and enlargement of blind spots. Exposure to up to 3.0% for over 15 hours, for six days, resulted in decreased night vision and colour sensitivity.

# **TYPICAL CONCENTRATIONS**

Carbon dioxide CO2 levels outdoors near ground level are typically 300 ppm to 400 ppm or 0.03% to 0.040% in concentration. Carbon dioxide (CO2) levels indoors in occupied buildings are typically around 600 ppm to 800 ppm or 0.06% to 0.08% in concentration.

# **EXPOSURE ROUTES**

- Inhalation
- Ingestion
- Dermal

# **ASSIGNED RESPONSIBILITIES**

According to the Occupational Health and Safety Regulations (OHSR), employers must develop and implement an effective health and safety program, which includes training workers and supervisors in relevant sections of the program.

#### **HAZARD ASSESSMENT**

The potential hazard to workers from Carbon Dioxide must be assessed. This should be done by a qualified person familiar with the use(s) of carbon dioxide.

Section 9.11(1) of the OHS Regulation ("Regulation") requires a hazard assessment and written confined space entry procedures be prepared by a "qualified person who has adequate training and experience in the recognition, evaluation and control of confined space hazards"

# **MOST SERIOUS HAZARD WITH CARBON DIOXIDE**

CO<sub>2</sub> has been recognised as a workplace hazard for over a century. It is significantly heavier than air and many fatalities from suffocation have resulted from entry into pits, tanks, sumps or cellars where CO<sub>2</sub> has accumulated and displaced oxygen.

# **CONTROLLING EXPOSURE**

Engineering and administrative controls are the first line of defence against exposure to  $CO_2$ . Proper building design and ventilation are important engineering considerations. Monitoring alarm systems is also essential in preventing  $CO_2$  exposure.

# **HANDLING CYLINDERS**

- Store cylinders at or above ground level in a cool, dry, wellventilated area, out of direct sunlight and away from heat and ignition sources.
- Ground all cylinders and secure them upright
- Leave valve caps on cylinders
- Close all valves when not in use
- Label empty containers
- Store separately from incompatible materials
- Consider a leak detection and alarm system for storage and process areas

# **VENTILATION**

Ventilation is one of the most common engineering controls for airborne contamination. It is also one of the most poorly understood. Some ventilation systems are designed to move fresh air in, around and out of rooms. Other systems move air in order to provide a comfortably cooled or heated environment. Still other systems move air to remove airborne contamination from the work environment.

# **EQUIPMENT PREVENTATIVE MAINTENANCE**

Employers are responsible for providing written preventive maintenance procedures and written emergency procedures to any person who works on a  $CO_2$  system. Workers should be familiar with these procedures before carrying out repairs or maintenance on the  $CO_2$  system.

#### WRITTEN PREVENTIVE MAINTENANCE PROCEDURES

Employers, in consultation with equipment manufacturers or suppliers, must ensure that all equipment is inspected regularly and replaced when necessary. Employers must ensure that written preventive maintenance procedures and written emergency procedures are readily available to and understood by all people required to work on the  $\rm CO_2$  system.

#### **MONITORING REQUIREMENTS**

Monitoring  $CO_2$  is required if handled or there is a potential for  $CO_2$  to displace oxygen in a confined or enclosed space.

There are two types of sensors:

- Non Dispersive Infrared (NDIR) CO<sub>2</sub> Sensors
- Chemical CO<sub>2</sub> Sensors

# **TRAINING**

One of the most important parts of a program to control exposure to carbon dioxide involves education and training. This training is required under R.R.O. 860/90, the (WHMIS) Workplace Hazardous Material Information System Regulation, made under the Occupational Health and Safety Act (OHSA).

# Personal Protective Equipment (PPE)

Personal Protective Equipment is the last line of defence. It is vital in controlling exposure when a  $CO_2$  leak has occurred or there is a possibility of such a leak. Personal Protective Equipment includes eye, skin, and respiratory protection.

# **SKIN PROTECTION**

- The employer must provide appropriate skin, hand, and foot or body protection if a worker is exposed to a substance or condition which is likely to puncture, abrade or otherwise adversely affect the skin, or be absorbed through it.
- If there is a danger of injury, contamination or infection to a worker's hands, arms, legs, or torso, the worker must wear properly fitting protective equipment appropriate to the work being done and the hazards involved.

# **FACE/EYE PROTECTION**

It is good practice to protect the eyes from any type of contact with  $CO_2$  (causes frostbite).

# RESPIRATORY PROTECTION

Choosing the right respirator must be based on both the needs of each individual worksite and the requirements of the employer's written safe work procedures.

#### **ESCAPE RESPIRATORS**

Two types of escape respirators are acceptable: bite-block respirators and half face piece cartridge respirators. Bite-block respirators must be worn with a nose plug. Anyone entering a CO<sub>2</sub> enclosure for any reason must carry an escape respirator and keep it within arm's reach at all times.

# Self-Contained Breathing Apparatus (SCBAs)

Workers must use SCBAs when the  $CO_2$  concentration is unknown or is measured at more than 300 ppm. A worker wearing an SCBA must not enter a contaminated atmosphere until a second qualified person is resent, also equipped with an SCBA and ready

# FIRST AID - INHALATION

If symptoms are experienced, remove source of contamination or move to fresh air and obtain medical advice.

# FIRST AID — SKIN CONTACT

Gas: Not applicable.

Liquefied Gas: Quickly remove victim from source of contamination and briefly flush with lukewarm, gently flowing water until the chemical is removed. DO NOT attempt to rewarm the affected area on site. DO NOT rub area or apply dry heat.

# FIRST AID — EYE CONTACT

GAS: No effects expected. If irritation occurs, remove source of contamination or move to fresh air.

Liquefied Gas: Quickly remove victim from source of contamination. Immediately and briefly flush with lukewarm, gently flowing water until the chemical is removed. DO NOT attempt to rewarm.

# **DOCUMENTATION & RECORD KEEPING**

Employers are usually required to maintain written records of all injuries and treatment given in a first aid treatment record book or log.

# **PROGRAM EVALUATION & REVIEW**

All documents (Exposure Control Plan, Safe Work Procedures) should be reviewed annually at a minimum. They may need to be reviewed more frequently if there are concerns, problems or changes in the processes, equipment or materials used.