

Date 23/02/2026
Your Ref
Our Ref 10977

Enquiries to Richard Mutch
Extension 35687
Direct Line 0131 465 5687
loth.freedomofinformation@nhs.scot
richard.mutch@nhs.scot

Dear

ENVIRONMENTAL INFORMATION – FORMALDEHYDE EXPOSURE

I write in response to your request for information in relation to formaldehyde exposure.

Question:

- Under the Environmental Information Regulations (2004), please provide the following information with regards to employee formaldehyde exposure in the Trust's gastrointestinal endoscopy suites.

Documents to disclose:

- Please provide the formaldehyde exposure risk assessment that is currently used by the Trust's gastrointestinal endoscopy team to fulfill employer obligations under COSHH regulations (2002) Section 6.
 - Please provide *all* formaldehyde exposure monitoring data (both fixed static monitoring and personal badge monitoring, with personal details redacted as appropriate) relating to the Trust's gastrointestinal endoscopy service encompassing the last 12 months that is used to fulfill employer obligations under COSHH regulations (2002) Section 10. It is noted that such records should be kept available for at least 5 years under COSHH regulations (2002) Section 10(5)(b).
1. How often is regular scheduled formaldehyde exposure monitoring undertaken in the Trust's gastrointestinal endoscopy suite?
 2. What is the total number of occasions formaldehyde regular scheduled exposure monitoring has been undertaken in the Trust's gastrointestinal endoscopy suites over the last 12 months?

Answer:

I am advised that there is no monitoring undertaken by any of the Endoscopy units. As per Regulation 10(4)(a) of the Environmental Information (Scotland) Act 2004 formally I must advise this information is not held.

Headquarters
Mainpoint
102 West Port
Edinburgh EH3 9DN

Chair Professor John Connaghan CBE
Chief Executive Professor Caroline Hiscox
Lothian NHS Board is the common name of Lothian Health Board



We have enclosed the COSHH risk assessments from the endoscopy units in Lothian.

I hope the information provided helps with your request.

If you are unhappy with our response to your request, you do have the right to request us to review it. Your request should be made within 40 working days of receipt of this letter, and we will reply within 20 working days of receipt. If our decision is unchanged following a review and you remain dissatisfied with this, you then have the right to make a formal complaint to the Scottish Information Commissioner within 6 months of receipt of our review response. You can do this by using the Scottish Information Commissioner's Office online appeals service at www.itspublicknowledge.info/Appeal. If you remain dissatisfied with the Commissioner's response you then have the option to appeal to the Court of Session on a point of law.

If you require a review of our decision to be carried out, please write to the FOI Reviewer at the email address at the head of this letter. The review will be undertaken by a Reviewer who was not involved in the original decision-making process.

FOI responses (subject to redaction of personal information) may appear on NHS Lothian's Freedom of Information website at: <https://org.nhslothian.scot/FOI/Pages/default.aspx>

Yours sincerely

ALISON MACDONALD
Executive Director, Nursing
Cc: Chief Executive
Enc.

COSHH Risk Assessment

Name of Assessor(s): Posts Held:	██████████, Senior Charge Nurse	Date of Original Assessment:	July 2012																		
Manager Responsible:	██████████																				
Department:	Day Services ELCH																				
Hazardous Substance:																					
Buffered Formaldehyde 10% v/v (Formaldehyde 4%)																					
Tasks which use the substance and who will be exposed:																					
Nursing staff use the substance for 'fixing' specimens in preparation for transfer to labs for analysis in ready filled jars.																					
Hazard Information (Harmful properties, exposure limits etc) from Material Safety Data Sheet:																					
<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 15%;">Name</th> <th style="width: 10%;">Std</th> <th colspan="2" style="width: 35%;">TWA – 8rs</th> <th colspan="2" style="width: 35%;">STEL – 15 min</th> </tr> </thead> <tbody> <tr> <td>Formaldehyde</td> <td>WEL</td> <td>2 ppm</td> <td>2.5mg/m³</td> <td>2 ppm</td> <td>2.5mg/m³</td> </tr> <tr> <td>Methanol</td> <td>WEL</td> <td>200 ppm (Sk)</td> <td>266 mg/m³ (Sk)</td> <td>250 ppm (Sk)</td> <td>333 mg/m³ (Sk)</td> </tr> </tbody> </table>				Name	Std	TWA – 8rs		STEL – 15 min		Formaldehyde	WEL	2 ppm	2.5mg/m ³	2 ppm	2.5mg/m ³	Methanol	WEL	200 ppm (Sk)	266 mg/m ³ (Sk)	250 ppm (Sk)	333 mg/m ³ (Sk)
Name	Std	TWA – 8rs		STEL – 15 min																	
Formaldehyde	WEL	2 ppm	2.5mg/m ³	2 ppm	2.5mg/m ³																
Methanol	WEL	200 ppm (Sk)	266 mg/m ³ (Sk)	250 ppm (Sk)	333 mg/m ³ (Sk)																
Highly flammable liquid and vapour Toxic if swallowed Harmful if swallowed or if inhaled Toxic in contact with skin Causes severe skin burns and eye damage May cause respiratory irritation Fatal if inhaled																					
Can this substance be Eliminated or Substituted? If not, please explain why:																					
This substance is the generally accepted and proven method for 'fixing' specimens in preparation for transfer to labs for analysis. No alternative is considered appropriate at this time. Risk reduced considerably following the introduction of ready filled jars																					
PRECAUTIONS.																					
Avoid inhalation of vapours/spray and contact with skin and eyes. Store in closed original container at temperatures between 15°C and 25°C. Store away from direct sunlight and moisture Store away from incompatible materials.																					
Is there a requirement for Health Surveillance?																					
Annual hand surveillance in place however it is the responsibility of the staff member to inform Occupational Health Dept if skin sensitivity is suspected.																					
Maintenance of equipment:																					
N/A																					
Is there a need for Personal Protective Equipment?																					
Hands: Wear protective nitrile gloves. Be aware that the liquid may penetrate the gloves. Frequent change is advisable. The most suitable glove must be chosen in consultation with the gloves supplier, who can inform about the breakthrough time of the glove material. Eyes: Use equipment for eye protection tested and approved under appropriate government standards. Other protection: Wear suitable protective clothing.																					

First Aid Measures
<p>Inhalation: After inhalation: fresh air. Immediately call in physician. If breathing stops; immediately apply artificial respiration, if necessary also oxygen</p> <p>Ingestion: After swallowing: immediately make victim drink water (two glasses at most). Consult a physician.</p> <p>Skin: Take off immediately all contaminated clothing. Rinse skin with water/shower. Consult a physician.</p> <p>Eyes: Rinse out with plenty water. Call ophthalmologist. Remove contact lenses.</p>
Emergency Plans, including spills procedures
<p>Fire: Use extinguishing measures that are appropriate to local circumstances and the surrounding environment. No limitations of extinguishing agents are given.</p> <p>Spillage: Absorb with sand or other inert absorbent.</p>
Other Additional Measures

Level of Risk

Current risk level

Green	Yellow	Orange	Red
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Step 4: Action Plan			
What further action is necessary?	Action By Whom	Action by when (dd/mm/yy)	Action completed. (dd/mm/yy)

Step 5: Review Table			
Date (dd/mm/yy)	Reviewer	Reasons for review	Approved/Not Approved by (dd/mm/yy)
01.07.15		Annual review	
09.07.16		Annual review	
05.06.17		Annual leave	
13.06.18		Annual review	
06.06.19		Annual review	
14.07.20		Annual review	
30.09.21		Annual review	
16.02.23		Annual Review	
29.02.24		Annual Review	
23.04.25		Annual Review	

COSHH Assessment Form

Name of Assessor(s): Posts Held:	████████████████████	Date of Original Assessment:	01/11/2008
Manager Responsible:	██████████		
Department:	Endoscopy Unit RIE		
Hazardous Substance – include form e.g. solid, gas, liquid etc, amount used (Ensure that the SDS is updated to the CLP Regulation).			
Fomalin Saline (4%)			
Resources: Genta medical			
Material Data Sheet: see attached – formaldehyde and methanol aqueous blend with pH buffer			
Tasks which use the substance and who will be exposed:			
Prefilled specimen pots for 'fixing', storage and transfer of endoscopically acquired specimens.			
Pots opened for short period of time during placement of specimen. (seconds)			
Hazard Information (Harmful properties, exposure limits etc) from Safety Data Sheet include route of entry, hazard type e.g. sensitiser etc and how long exposure is likely to be for			

Acute toxicity: Category 4 - H332 – harmful if inhaled
Skin sensitizer: Category 1 – H317 – may cause skin irritation
Carcinogen: Category 1B – H360 – may cause cancer
Mutagen: Category 2 – H341 – suspected of causing genetic defects

Hazard pictograms:



Exposure limits:

This product contains Formaldehyde (TWA, 2ppm, STEL, 15min) and methanol (TWA, 200ppm)

Routes of entry:

For the tasks described previously the main routes of entry are by exposure to skin contact and to eyes. Other more unlikely routes are exposure by breathing and by swallowing.

Information:

- When using do not eat or drink
- Avoid contact with eyes
- Wear appropriate PPE, gloves, apron and visor
- Containers are placed on flat surface and lids removed only when required and replaced as soon as possible

Can this substance be Eliminated or Substituted? If not, please explain why:

Elimination is not possible as only product available to 'fix' specimens is currently no safer alternative

Existing Precautions

PPE (gloves/aprons/eye protection) used when handling pots. Minimal time opening of pots for placement of tissue.
Chemical spill kit available and checked weekly.
Staff to detect any reaction, near miss event.
Eye wash stations available

Storage

- To be kept in original container tightly closed.
- Stored in dry storeroom and away from oxidisers, heat and flames.
- Used in rooms with ventilation

Disposal

Not applicable – pots are sent to pathology laboratories and disposed of thereafter examination of specimen

Is there a requirement for Health Surveillance? Yes/no and what type e.g. skin health etc

No – Vapour concentrations in small yellow pots are so low – not required - procedure rooms have appropriate ventilation.

Maintenance of equipment - including LEV test, maintenance and inspections

N/A

Is there a need for Personal Protective Equipment? YES/NO and what type

YES

Respiratory protection - not applicable in normal conditions of use but will be required in the event of a spillage.

Hand protection – when handling this product wear chemically resistant gloves

Eye protection – wear approved eye protection (properly fitted dust or splash proof chemical safety goggles and face protection (face shield)

Skin and body protection – wear suitable protective clothing. Wear solvent resistant apron and boots for spills

Wash hands thoroughly each time after handling, following standard NHSL hand hygiene practices.

First Aid Measures

In the event of major exposure by inhalation (acute respiratory reaction)

- Move the person away from the place of exposure and take them outside or to a place of safety
- Seek immediate medical assistance if symptoms persist

In the event of splash or contact with the eyes

- Wash thoroughly with soft clean water for at least 15minutes, holding eyelids open
- If there is any redness, pain or visual impairment, consult an ophthalmologist, providing the COSHH information to aid diagnosis and treatment

In the event of contact with the skin

- Remove all contaminated or stained clothing immediately. Do not use them again until they have been decontaminated (send hospital scrubs to the laundry in alginate bag).
- Rinse skin immediately and thoroughly with water
- In the event of skin irritation, follow the above and seek medical advice from OHS in the first instance

In the event of swallowing

- Rinse out the mouth, **do not induce vomiting**, keep the person calm and take them for medical assistance. Providing the COSHH information to aid treatment. Do not give anything to drink

Datix any reaction, near miss or event where actual harm has occurred

Reference should be made to NHS Lothian First Aid Policy to ensure your department has the correct first aid requirements in place.

Emergency Plans - including spills procedures

Accidental - small spillage (yellow pots) – wearing appropriate PPE (gloves, apron, visor/eye protection) mop up using absorbent pads from spillage kit.

The spill procedure and kit is located outside the decontamination ante room. All spills will be cleaned up immediately and contents placed in 'chemical spill bags' and placed in Red chemical Biffa bin.

Once cleared – staff should ensure room is ventilated and patient and staff removed from areas if applicable.

All staff must be fully aware of the spill procedure and their role with respect to this and any other emergency scenario including fire evacuation etc.

Only when ventilation of the room is completed following clean up will staff be allowed to resume work within the area.

Pots in endoscopy department contain small amount of fluid – limit staff until spill has been cleared and room ventilated.

Other Additional Measures

Weekly or monthly checks and inspections should be undertaken of PPE dependant on the frequency of use and checks should also apply to the spill kit and any other safety critical element i.e. eye wash station subject to manufacturer's instructions and advice.

Staff working with or exposed to hazardous substances **MUST** be aware of the contents of the relevant COSHH assessments and other associated material such as the safety data sheet or SOPs

Level of Risk

Select the level which indicates the current risk level:

Green	Yellow	Orange	Red
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Action Plan			
What further action is necessary?	Action By Whom	Action by when (dd/mm/yy)	Action completed. (dd/mm/yy)
<i>Detail</i>	<i>Name</i>	ongoing	<i>Date</i>
Monitor safe use of product	[REDACTED]	ongoing	<i>Date</i>
<i>Detail</i>	<i>Name</i>	<i>Date</i>	<i>Date</i>
<i>Detail</i>	<i>Name</i>	<i>Date</i>	<i>Date</i>
<i>Detail</i>	<i>Name</i>	<i>Date</i>	<i>Date</i>
<i>Detail</i>	<i>Name</i>	<i>Date</i>	<i>Date</i>
<i>Detail</i>	<i>Name</i>	<i>Date</i>	<i>Date</i>
<i>Detail</i>	<i>Name</i>	<i>Date</i>	<i>Date</i>

Review Table			
Date (dd/mm/yy)	Reviewer	Reasons for review	Approved/Not Approved by (dd/mm/yy)
12.11.25	[REDACTED]	Not reviewed since taking post	[REDACTED] 12.11.25
<i>Date</i>	<i>Name</i>	<i>Detail</i>	<i>Name & Date</i>
<i>Date</i>	<i>Name</i>	<i>Detail</i>	<i>Name & Date</i>

COSHH Risk Assessment

Name of Assessor(s): Posts Held:	Charge Nurse [REDACTED] /DCN [REDACTED] [REDACTED]	Date of Original Assessment:	09/04/2008
Manager Responsible:	Charge Nurse [REDACTED]		
Department:	Endoscopy Unit, St John's Hospital		
Hazardous Substance – include form e.g. solid, gas, liquid etc, amount used			
Neutral Buffered Formalin (Formaldehyde and Methanol aqueous blend with pH buffer)			
Tasks which use the substance and who will be exposed:			
For fixating biopsy samples taken during endoscopic procedures. Staff and patients may be exposed.			
Hazard Information (Harmful properties, exposure limits etc) from Safety Data Sheet include route of entry, hazard type e.g. sensitiser etc and how long exposure is likely to be for			
Harmful if inhaled. May cause allergic reaction Suspected of causing genetic defects May cause cancer			
Can this substance be Eliminated or Substituted? If not, please explain why:			
Formalin is required for the fixing of specimens and there is no alternative.			
Existing Precautions			
<p>PPE must be worn when taking specimens and placing them into formalin pots. Gloves, apron and eye protection.</p> <p>Appropriate sized pots are used to limit the amount of formalin needed. The pots are prefilled so no filling/decanting of formalin is required.</p> <p>Use in well ventilated area.</p> <p>Lids are checked to be secure before pots are transferred to the laboratories in sealed plastic bags.</p> <p>Hygiene measures – wash hands and forearms and face thoroughly after handling chemical products and before eating/drinking/smoking</p>			
Storage			
<p>Pots are stored upright.</p> <p>Keep away from oxidisers, heat and flames.</p> <p>Keep containers tightly closed.</p>			

Disposal
Dilute with organic solvent and incinerate using effluent gas cleaner. Neutralise with alkaline material, put in sealed container, and dispose in secure landfill.
Is there a requirement for Health Surveillance? Yes/no and what type e.g. skin health etc
No
Maintenance of equipment , including LEV test, maintenance and inspections
Is there a need for Personal Protective Equipment? YES/NO and what type
Nitrile Gloves, Apron and Visor.
First Aid Measures
<p>Eyes – Wash eyes immediately with plenty of water whilst lifting eyelids. Seek medical attention immediately. Continue to rinse.</p> <p>Skin – Remove affected person from source of contamination and immediately flush skin with plenty of water. Remove any contaminated clothing. If irritation persists seek medical attention immediately.</p> <p>Ingestion – Let affected person drink lots of water immediately in order to dilute the swallowed liquid. After liquid has been swallowed, try to induce vomiting.</p> <p>Inhalation – Moved exposed person to fresh air immediately.</p>
Emergency Plans, including spills procedures
Weavers kit bag for cleaning up spills – stored next to decontamination
Other Additional Measures
Training of staff within the procedure room.

Level of Risk – delete the three that are not applicable

Current risk level

Yellow

See accompanying guidance: [Health and Safety](#) (RIGHT CLICK TO OPEN LINK)

Action Plan			
What further action is necessary?	Action By Whom	Action by when (dd/mm/yy)	Action completed. (dd/mm/yy)

Review Table			
Date (dd/mm/yy)	Reviewer	Reasons for review	Approved/Not Approved by (dd/mm/yy)
12/6/18	██████	Updating to new Coshh form and using product from Genta Medical.	██████

COSHH Assessment Form

Name of Assessor(s): Posts Held:		Date of Original Assessment:	26/01/26
Manager Responsible:			
Department:	<i>Endoscopy WGH</i>		
Hazardous Substance – include form e.g., solid, gas, liquid etc, amount used (Ensure that the SDS is updated to the CLP Regulation).			
<i>Formalin (Formaldehyde 40%)</i>			
Tasks which use the substance and who will be exposed:			
<i>Receiving specimens from surgical field into pre filled pots. Endoscopy nursing staff Endoscopists Decontamination staff Porters Domestic/cleaning staff Trainees and agency staff Pregnant staff</i>			
Hazard Information (Harmful properties, exposure limits etc) from Safety Data Sheet include route of entry, hazard type e.g., sensitiser etc and how long exposure is likely to be for			
<i>Toxic by inhalation, in contact with the skin if swallowed . Causes burns Toxic: Danger of very serious irreversible effects of inhalation, in contact with the skin and if swallowed Limited evidence of a carcinogenic effect. May cause sensitisation by skin contact. Keep locked up and out of the reach of children. In case of contact with the eyes, rinse immediately with plenty of water and seek medical advice. Wear suitable protective clothing, gloves and eye / face protection. In case of accident if you feel unwell seek medical advice immediately (show the label where possible) Use only in well ventilated areas</i>			
Can this substance be Eliminated or Substituted? If not, please explain why:			
<i>No formalin pots are the required method to put pathology into and send to the pathology labs. Preservations of Biopsy specimens prior to histopathology</i>			
Existing Precautions			
<i>Use of pre-filled, sealed specimen pots No decanting or dilution of formaldehyde in Endoscopy Adequate general ventilation in procedure rooms</i>			
Storage			
<i>Keep away for oxidisers, heat and flames. Avoid contact with hydrochloric acid as this can generate toxic by Products. Store in a warm area to avoid formation of polymer. Store with good ventilation Keep containers tightly closed. Pre filled pots stored on shelves within their box and labelled pots in the dirty utility and store room.</i>			
Disposal			

Formaldehyde waste disposed of via approved hazardous waste route.
Do not pour down drains
Damaged or unused pots disposed of in line with NHS Lothian waste policy.

Is there a requirement for Health Surveillance? Yes

Skin health
Respiratory testing if requested
Not require due to low-level, intermittent exposure
Not routinely required
Referral to occupational health if symptoms of irritation or sensitisation occur

Maintenance of equipment - including LEV test, maintenance, and inspections

Procedure room ventilation and airflow annual maintenance.

Is there a need for Personal Protective Equipment? YES

Gloves / Apron, eye protection visor, Fitted respirator if required.

First Aid Measures

EYES, Wash eyes immediately with plenty of water while lifting eyelids. Seek medical attention immediately. Continue to rinse.
SKIN, Remove affected person from the source of contamination and immediately flush the contaminated skin with plenty of water. Remove any contaminated clothing and wash before reuse. If irritation persists, seek medical attention.
INGESTION, Rinse out mouth with water to drink. Do not induce vomiting. Transport to hospital. Seek medical attention immediately.
INHALATION, Move the exposed person to fresh air immediately. If breathing has stopped perform artificial Respiration immediately. Keep affected person warm and rest while seeking urgent medical attention.

Emergency Plans - including spills procedures

Spill cleanup methods: Absorb spill with inert, damp non-combustible material. Seal the contaminated material in a plastic bag for future disposal. Extinguish all ignition sources. Provide ventilation and confine spill. Do not Allow run-off water to enter drains.

Clean up team should use respiratory and/or liquid contact protection.

Full PPE including fitted FFP3 respiratory mask

Report incident via Datix

Restrict access to area.

Safety data sheets to be made available

Staff trained in safe handling of formaldehyde

Pots only to be opened when necessary and lids closed tightly immediately

Transport to Labs in rigid leak proof bags.

Ventilation: use local or general exhaust mechanical ventilation to control vapours.

Respirators; in the absence of adequate mechanical ventilation, use a full face mask with organic filters or dedicated formalin filters.

Protective gloves: Butyl rubber nitrile or viton gloves

Eye Protection; Use splash proof eye goggles.

Barrier Cream/Eye Wash.

Fire hazards and fire fighting procedure.

In case of fire where formalin solution is stored it is imrtant that the following guidelines are followed;

Extinguishing Media – Carbon dioxide, dry powder or foam. Do not use water jets.

Fire fighters should use self contained breathing apparatus and protective clothing.

Use water to keep exposed containers cool and disperse vapours.

If a leak or spill has not ignited use water spray to protect persons who are stopping the leak.

Water spray may be used to flush spills away from exposures and dilute spills to reduce flammability.

Other Additional Measures

Annual Skin Surveillance

FFP3 Mask fitting 3 yearly unless change in weight within the face.

Powered hood if staff member has facial hair.

Level of Risk LOW RISK			
Select the level which indicates the current risk level:			
Green	✓ Yellow	Orange	Red

Action Plan			
What further action is necessary?	Action By Whom	Action by when (dd/mm/yy)	Action completed. (dd/mm/yy)
<i>Ensure all staff are aware of the formaldehyde policy/COSHH risk assessment</i>		02/02/26	Date
<i>Maintain spill kits</i>		02/02/26	Date

<i>Monitor incidents reports (Datix) for any trends relating to exposure or spillage</i>		<i>02/02/26</i>	<i>Date</i>
<i>Detail</i>	<i>Name</i>	<i>Date</i>	<i>Date</i>
<i>Detail</i>	<i>Name</i>	<i>Date</i>	<i>Date</i>
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Review Table			
Date (dd/mm/yy)	Reviewer	Reasons for review	Approved/Not Approved by (dd/mm/yy)
<i>Date</i>	<i>Name</i>	<i>Detail</i>	<i>Name & Date</i>
<i>Date</i>	<i>Name</i>	<i>Detail</i>	<i>Name & Date</i>
<i>Date</i>	<i>Name</i>	<i>Detail</i>	<i>Name & Date</i>