



PHARMA DEVILS

ENVIRONMENT HEALTH SAFETY DEPARTMENT

HAZARD IDENTIFICATION AND RISK ASSESSMENT

Department: Engineering

Date:

HIRA Team:

Location:

S.No.	Activity	Sub-Activity	Hazard	N/A/E	Risk	Existing control Measure	Risk Considering existing control measure			Addition control measures to bring risk to (ALARP level)	Residual risk after applying additional control measures			Remarks (if Any)
							Frequency	Severity	RPN (F*S)		Frequency	Severity	RPN (F*S)	
1.	Hot Work	Work start-up & obtaining power tool work.	<ul style="list-style-type: none"> Unauthorized work. Invalid permit Lack of competency Lack or poor communication. Haste or short cut. 	A	<ul style="list-style-type: none"> Entanglement Musculoskeletal disorder. Struck by an object. Slip & trip 	35	2	3	6	345	3	1	3	



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2.	Hot Work	Grinding.	<ul style="list-style-type: none"> Rotating equipment sparks. Damaged grinding disc. Electricity High pressure air. Flying object/ eye injury. 	A	<ul style="list-style-type: none"> Entanglement Musculoskeletal disorder. Cut injuries Electrocution. Back injuries. 	345	3	3	9	2345	1	4	4	-
3.	Hot Work	Gas cutting	<ul style="list-style-type: none"> Burns. Flammable gas Compressed cylinders Damaged or leaking cylinder or hoses. 	A	<ul style="list-style-type: none"> Burn injuries Tripping hazards. Entanglement. Back injuries. Fire Explosion Fire 	45	3	3	9	345	2	3	6	-



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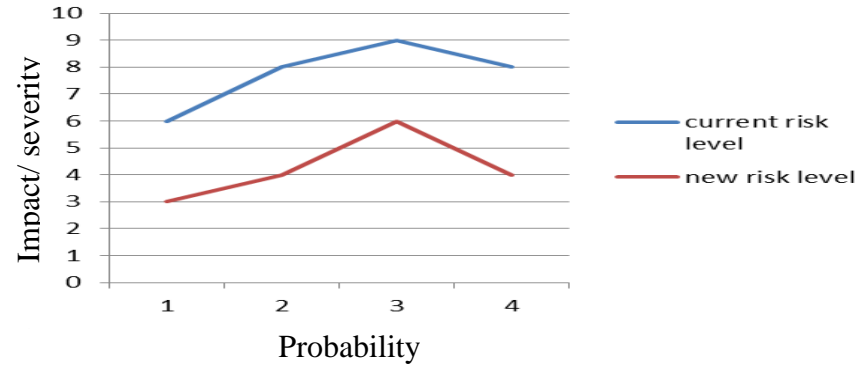
4.	Hot Work	Welding	<ul style="list-style-type: none"> • Electrical • Spatters. • Poor condition of machine. • Damage cable. • Unlearned area. • Sparking. • UV rays. 	A	<ul style="list-style-type: none"> • Fire hazard. • Burns. • Electrocutation/ spatter burns. • Hot tabs end pieces of welding rods. 	345	2	4	8	2345	4	1	4	
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MATRIX

	5	5	10	15	20	25
4	4	8	12	16	20	25
3	3	6	9	12	15	20
2	2	4	6	8	10	15
1	1	2	3	4	5	10
0	1	2	3	4	5	10

Frequency

LOW
MODERATE
HIGH



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REVISION HISTORY - HIRA Register

Revision No.	Date	Reason for change	Originator (Leader)	Approval
00		New Document	Plant/Functional Manager	Plant/Functional Head

Distribution: Leader /plant/functional Head(s) /Functional Head – EHS

	Prepared By Operating Officer/Executive	Reviewed By Operating Manager	Approved By Department Head	Authorized By Head QA
Sign				
Date				
Name				