



Alpha Copper(I) Chloride Solution

ALPHA CHEMICALS PTY LTD

Chemwatch Hazard Alert Code: 3

Chemwatch: 5500-19

Version No: 7.1.1.1

Safety Data Sheet according to WHS and ADG requirements

Issue Date: 01/11/2019

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S.GHS.AUS.EN

SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

Product Identifier

Product name	Alpha Copper(I) Chloride Solution
Synonyms	Product No.: 00664
Proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (contains ammonium hydroxide and copper(I) chloride)
Other means of identification	Not Available

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Use according to manufacturer's directions.
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Details of the supplier of the safety data sheet

Registered company name	ALPHA CHEMICALS PTY LTD
Address	4 ALLEN PLACE WETHERILL PARK NSW 2099 Australia
Telephone	61 (0)2 9982 4622
Fax	Not Available
Website	~
Email	shane@alphachem.com.au

Emergency telephone number

Association / Organisation	ALPHA CHEMICALS PTY LTD
Emergency telephone numbers	61 (0)418 237 771
Other emergency telephone numbers	Not Available

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

HAZARDOUS CHEMICAL. DANGEROUS GOODS. According to the WHS Regulations and the ADG Code.

CHEMWATCH HAZARD RATINGS

	Min	Max
Flammability	0	
Toxicity	2	
Body Contact	3	
Reactivity	0	
Chronic	0	

0 = Minimum
1 = Low
2 = Moderate
3 = High
4 = Extreme

Poisons Schedule	S6
Classification [1]	Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 2, Serious Eye Damage Category 1, Acute Aquatic Hazard Category 1, Chronic Aquatic Hazard Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)	
SIGNAL WORD	DANGER

Hazard statement(s)

Continued...

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H302	Harmful if swallowed.
H315	Causes skin irritation.
H318	Causes serious eye damage.
H410	Very toxic to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P280	Wear protective gloves/protective clothing/eye protection/face protection.
P270	Do not eat, drink or smoke when using this product.
P273	Avoid release to the environment.

Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER or doctor/physician.
P321	Specific treatment (see advice on this label).
P362	Take off contaminated clothing and wash before reuse.
P391	Collect spillage.
P301+P312	IF SWALLOWED: Call a POISON CENTER or doctor/physician if you feel unwell.
P302+P352	IF ON SKIN: Wash with plenty of water.
P330	Rinse mouth.

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation
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SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
12125-02-9	30-60	ammonium chloride
7758-89-6	10-30	copper(I) chloride
1336-21-6	NotSpec	ammonium hydroxide

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ Immediately hold eyelids apart and flush the eye continuously with running water. ▶ Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. ▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. ▶ Transport to hospital or doctor without delay. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately remove all contaminated clothing, including footwear. ▶ Flush skin and hair with running water (and soap if available). ▶ Seek medical attention in event of irritation.
Inhalation	<ul style="list-style-type: none"> ▶ If fumes or combustion products are inhaled remove from contaminated area. ▶ Lay patient down. Keep warm and rested. ▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. ▶ Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. ▶ Transport to hospital, or doctor.
Ingestion	<ul style="list-style-type: none"> ▶ IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. ▶ For advice, contact a Poisons Information Centre or a doctor. ▶ Urgent hospital treatment is likely to be needed. ▶ In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. ▶ If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist. ▶ If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS. <p>Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:</p> <ul style="list-style-type: none"> ▶ INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.

Continued...

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NOTE: Wear a protective glove when inducing vomiting by mechanical means.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

for copper intoxication:

- ▶ Unless extensive vomiting has occurred empty the stomach by lavage with water, milk, sodium bicarbonate solution or a 0.1% solution of potassium ferrocyanide (the resulting copper ferrocyanide is insoluble).
- ▶ Administer egg white and other demulcents.
- ▶ Maintain electrolyte and fluid balances.
- ▶ Morphine or meperidine (Demerol) may be necessary for control of pain.
- ▶ If symptoms persist or intensify (especially circulatory collapse or cerebral disturbances, try BAL intramuscularly or penicillamine in accordance with the supplier's recommendations.
- ▶ Treat shock vigorously with blood transfusions and perhaps vasopressor amines.
- ▶ If intravascular haemolysis becomes evident protect the kidneys by maintaining a diuresis with mannitol and perhaps by alkalinising the urine with sodium bicarbonate.
- ▶ It is unlikely that methylene blue would be effective against the occasional methaemoglobinemia and it might exacerbate the subsequent haemolytic episode.
- ▶ Institute measures for impending renal and hepatic failure.

[GOSSELIN, SMITH & HODGE: Commercial Toxicology of Commercial Products]

- ▶ A role for activated for charcoals or emesis is, as yet, unproven.
- ▶ In severe poisoning CaNa₂EDTA has been proposed.

[ELLENHORN & BARCELOUX: Medical Toxicology]

For acute or short term repeated exposures to strong acids:

- ▶ Airway problems may arise from laryngeal edema and inhalation exposure. Treat with 100% oxygen initially.
- ▶ Respiratory distress may require cricothyroidotomy if endotracheal intubation is contraindicated by excessive swelling
- ▶ Intravenous lines should be established immediately in all cases where there is evidence of circulatory compromise.
- ▶ Strong acids produce a coagulation necrosis characterised by formation of a coagulum (eschar) as a result of the desiccating action of the acid on proteins in specific tissues.

INGESTION:

- ▶ Immediate dilution (milk or water) within 30 minutes post ingestion is recommended.
- ▶ **DO NOT attempt to neutralise the acid since exothermic reaction may extend the corrosive injury.**
- ▶ Be careful to avoid further vomit since re-exposure of the mucosa to the acid is harmful. Limit fluids to one or two glasses in an adult.
- ▶ Charcoal has no place in acid management.
- ▶ Some authors suggest the use of lavage within 1 hour of ingestion.

SKIN:

- ▶ Skin lesions require copious saline irrigation. Treat chemical burns as thermal burns with non-adherent gauze and wrapping.
- ▶ Deep second-degree burns may benefit from topical silver sulfadiazine.

EYE:

- ▶ Eye injuries require retraction of the eyelids to ensure thorough irrigation of the conjunctival cul-de-sacs. Irrigation should last at least 20-30 minutes. **DO NOT use neutralising agents or any other additives.** Several litres of saline are required.
- ▶ Cycloplegic drops, (1% cyclopentolate for short-term use or 5% homatropine for longer term use) antibiotic drops, vasoconstrictive agents or artificial tears may be indicated dependent on the severity of the injury.
- ▶ Steroid eye drops should only be administered with the approval of a consulting ophthalmologist).

[Ellenhorn and Barceloux: Medical Toxicology]

for irritant gas exposures:

- ▶ the presence of the agent when it is inhaled is evanescent (of short duration) and therefore, cannot be washed away or otherwise removed
- ▶ arterial blood gases are of primary importance to aid in determination of the extent of damage. Never discharge a patient significantly exposed to an irritant gas without obtaining an arterial blood sample.
- ▶ supportive measures include suctioning (intubation may be required), volume cycle ventilator support (positive and expiratory pressure (PEEP), steroids and antibiotics, after a culture is taken
- ▶ If the eyes are involved, an ophthalmologic consultation is recommended

Occupational Medicine: Third Edition; Zenz, Dickerson, Horvath 1994 Pub: Mosby

For acute or short term repeated exposures to ammonia and its solutions:

- ▶ Mild to moderate inhalation exposures produce headache, cough, bronchospasm, nausea, vomiting, pharyngeal and retrosternal pain and conjunctivitis. Severe inhalation produces laryngospasm, signs of upper airway obstruction (stridor, hoarseness, difficulty in speaking) and, in excessively, high doses, pulmonary oedema.
- ▶ Warm humidified air may soothe bronchial irritation.
- ▶ Test all patients with conjunctival irritation for corneal abrasion (fluorescein stain, slit lamp exam)
- ▶ Dyspneic patients should receive a chest X-ray and arterial blood gases to detect pulmonary oedema.

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

- ▶ Foam.
- ▶ Dry chemical powder.
- ▶ BCF (where regulations permit).
- ▶ Carbon dioxide.
- ▶ Water spray or fog - Large fires only.

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.
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Advice for firefighters

Fire Fighting	<ul style="list-style-type: none"> ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear breathing apparatus plus protective gloves in the event of a fire. ▶ Prevent, by any means available, spillage from entering drains or water courses. ▶ Use fire fighting procedures suitable for surrounding area. ▶ DO NOT approach containers suspected to be hot. ▶ Cool fire exposed containers with water spray from a protected location. ▶ If safe to do so, remove containers from path of fire. ▶ Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▶ Non combustible. ▶ Not considered a significant fire risk, however containers may burn. <p>Decomposition may produce toxic fumes of: hydrogen chloride</p>

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	nitrogen oxides (NOx)
HAZCHEM	*3Z

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	<p>Environmental hazard - contain spillage.</p> <ul style="list-style-type: none"> ▶ Clean up all spills immediately. ▶ Avoid breathing vapours and contact with skin and eyes. ▶ Control personal contact with the substance, by using protective equipment. ▶ Contain and absorb spill with sand, earth, inert material or vermiculite. ▶ Wipe up. ▶ Place in a suitable, labelled container for waste disposal.
Major Spills	<ul style="list-style-type: none"> ▶ Clear area of personnel and move upwind. ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear breathing apparatus plus protective gloves. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Stop leak if safe to do so. ▶ Contain spill with sand, earth or vermiculite. ▶ Collect recoverable product into labelled containers for recycling. ▶ Neutralise/decontaminate residue (see Section 13 for specific agent). <p>Environmental hazard - contain spillage.</p>

Personal Protective Equipment advice is contained in Section 8 of the SDS.

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> ▶ DO NOT allow clothing wet with material to stay in contact with skin ▶ Avoid all personal contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ Avoid contact with moisture. ▶ Avoid contact with incompatible materials. ▶ When handling, DO NOT eat, drink or smoke. ▶ Keep containers securely sealed when not in use. ▶ Avoid physical damage to containers.
Other information	<ul style="list-style-type: none"> ▶ Store in original containers. ▶ Keep containers securely sealed. ▶ Store in a cool, dry, well-ventilated area. ▶ Store away from incompatible materials and foodstuff containers. ▶ Protect containers against physical damage and check regularly for leaks. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> ▶ Lined metal can, lined metal pail/ can. ▶ Plastic pail. ▶ Polyliner drum. ▶ Packing as recommended by manufacturer. ▶ Check all containers are clearly labelled and free from leaks.
Storage incompatibility	<ul style="list-style-type: none"> ▶ Contact with acids produces toxic fumes ▶ Avoid reaction with oxidising agents

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

Control parameters

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	ammonium chloride	Ammonium chloride (fume)	10 mg/m3	20 mg/m3	Not Available	Not Available

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
ammonium chloride	Ammonium chloride	20 mg/m3	110 mg/m3	330 mg/m3
copper(I) chloride	Copper(I) chloride; (Cuprous chloride)	4.7 mg/m3	53 mg/m3	320 mg/m3
ammonium hydroxide	Ammonium hydroxide	61 ppm	330 ppm	2,300 ppm

Ingredient	Original IDLH	Revised IDLH

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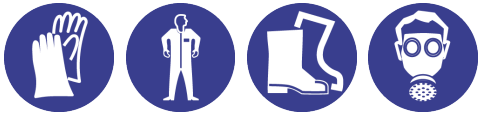
ammonium chloride	Not Available	Not Available
copper(I) chloride	Not Available	Not Available
ammonium hydroxide	Not Available	Not Available

OCCUPATIONAL EXPOSURE BANDING

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
copper(I) chloride	E	≤ 0.01 mg/m ³
ammonium hydroxide	E	≤ 0.1 ppm

Notes: Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.

Exposure controls

Appropriate engineering controls	<p>Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.</p> <p>Employers may need to use multiple types of controls to prevent employee overexposure.</p> <p>Local exhaust ventilation usually required.</p> <p>CARE: Explosive vapour air mixtures may be present on opening vessels which have contained liquid ammonia. Fatalities have occurred</p>
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> ▶ Safety glasses with side shields. ▶ Chemical goggles. ▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly.
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▶ Wear chemical protective gloves, e.g. PVC. ▶ Wear safety footwear or safety gumboots, e.g. Rubber <p>The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.</p> <p>The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.</p> <p>Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.</p> <p>Suitability and durability of glove type is dependent on usage.</p>
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▶ Overalls. ▶ P.V.C. apron. ▶ Barrier cream. ▶ Skin cleansing cream. ▶ Eye wash unit.

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the **computer-generated** selection:

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Material	CPI
BUTYL	A
HYPALON	A
NEOPRENE	A
NEOPRENE/NATURAL	A
NATURAL+NEOPRENE	B
NITRILE	B
NATURAL RUBBER	C
NITRILE+PVC	C
PVC	C

* CPI - Chemwatch Performance Index

Respiratory protection

Type K Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	K-AUS	-	K-PAPR-AUS / Class 1
up to 50 x ES	-	K-AUS / Class 1	-
up to 100 x ES	-	K-2	K-PAPR-2 ^

^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO₂), G = Agricultural chemicals, K = Ammonia(NH₃), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

Continued...

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A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion

NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Clear liquid; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.14 @20C
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Available	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	>100	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	<p>Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.</p> <p>Ammonium chloride fumes can cause irritation of the nose, throat and lungs, including sore throat and coughing, and may be harmful in high concentrations.</p> <p>Corrosive acids can cause irritation of the respiratory tract, with coughing, choking and mucous membrane damage. There may be dizziness, headache, nausea and weakness.</p> <p>The highly irritant properties of ammonia vapour result as the gas dissolves in mucous fluids and forms irritant, even corrosive solutions.</p> <p>Inhalation of the ammonia fumes causes coughing, vomiting, reddening of lips, mouth, nose, throat and conjunctiva while higher concentrations can cause temporary blindness, restlessness, tightness in the chest, pulmonary oedema (lung damage), weak pulse and cyanosis.</p> <p>Inhalation of high concentrations of vapour may cause breathing difficulty, tightness in chest, pulmonary oedema and lung damage. Brief exposure to high concentrations > 5000 ppm may cause death due to asphyxiation (suffocation) or fluid in the lungs.</p> <p>Prolonged or regular minor exposure to the vapour may cause persistent irritation of the eyes, nose and upper respiratory tract. Massive ammonia exposures may produce chronic airway hyperactivity and asthma with associated pulmonary function changes. The average nasal retention of ammonia by human subjects was found to be 83%.</p> <p>Copper poisoning following exposure to copper dusts and fume may result in headache, cold sweat and weak pulse. Capillary, kidney, liver and brain damage are the longer term manifestations of such poisoning. Inhalation of freshly formed metal oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in "metal fume fever". Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure.</p>
Ingestion	<p>Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual.</p> <p>Ammonium chloride, a urine-acidifying agent for kidney stone disease and urinary tract infection has been shown to cause exhaustion, "air</p>

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	<p>hunger* and increased acidity of blood.</p> <p>Ingestion of acidic corrosives may produce burns around and in the mouth, the throat and oesophagus. Immediate pain and difficulties in swallowing and speaking may also be evident.</p> <p>A metallic taste, nausea, vomiting and burning feeling in the upper stomach region occur after ingestion of copper and its derivatives. The vomitus is usually green/blue and discolours contaminated skin.</p> <p>Large doses of ammonia or injected ammonium salts may produce diarrhoea and may be sufficiently absorbed to produce increased production of urine and systemic poisoning. Symptoms include weakening of facial muscle, tremor, anxiety, reduced muscle and limb control.</p>
Skin Contact	<p>The material may cause mild but significant inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue.</p> <p>Exposure to copper, by skin, has come from its use in pigments, ointments, ornaments, jewellery, dental amalgams and IUDs (intra-uterine devices), and in killing fungi and algae. Although copper is used in the treatment of water in swimming pools and reservoirs, there are no reports of toxicity from these applications.</p> <p>Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.</p> <p>Mild skin reaction is seen with contact of the vapour of this material on moist skin. High concentrations or direct contact with solutions produces severe pain, a stinging sensation, burns and blisters and possible brown stains. Death could result from extensive burning. Vapour exposure may rarely, produce an itchy rash.</p>
Eye	<p>If applied to the eyes, this material causes severe eye damage.</p> <p>Irritation of the eyes may produce a heavy secretion of tears (lacrimation).</p> <p>Direct eye contact with acid corrosives may produce pain, tears, sensitivity to light and burns. Mild burns of the epithelia generally recover rapidly and completely.</p> <p>Mild eye irritation may occur after instillation of 500 mg ammonium chloride for 24 hours.</p> <p>Copper salts, in contact with the eye, may produce inflammation of the conjunctiva, or even ulceration and cloudiness of the cornea.</p>
Chronic	<p>Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.</p> <p>Repeated or prolonged exposure to acids may result in the erosion of teeth, swelling and/or ulceration of mouth lining. Irritation of airways to lung, with cough, and inflammation of lung tissue often occurs.</p> <p>For copper and its compounds (typically copper chloride):</p> <p>Acute toxicity: There are no reliable acute oral toxicity results available. Animal testing shows that skin in exposure to copper may lead to hardness of the skin, scar formation, exudation and reddish changes. Inflammation, irritation and injury of the skin were noted.</p> <p>Repeat dose toxicity: Animal testing shows that very high levels of copper monochloride may cause anaemia.</p> <p>Genetic toxicity: Copper monochloride does not appear to cause mutations in vivo, although chromosomal aberrations were seen at very high concentrations in vitro.</p> <p>Cancer-causing potential: There was insufficient information to evaluate the cancer-causing activity of copper monochloride.</p> <p>Prolonged or repeated minor exposure to ammonia gas/vapour may cause long-term irritation to the eyes, nose and upper airway. Repeated exposure or prolonged contact may produce skin inflammation and conjunctivitis. Other effects may include ulcers in the mouth and disturbances to the bronchi and gastrointestinal tract. In animals, repeated exposure to sublethal levels produces adverse effects on the airways, liver, kidneys and spleen, as well as eye irritation and clouding of the cornea.</p>

Alpha Copper(I) Chloride Solution	TOXICITY	IRRITATION
	Not Available	Not Available
ammonium chloride	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit): 100 mg SEVERE
	Oral (rat) LD50: 1650 mg/kg ^[2]	Eye (rabbit): 500 mg/24h SEVERE
copper(I) chloride	TOXICITY	IRRITATION
	dermal (rat) LD50: 1224 mg/kg ^[1]	Not Available
	Oral (rat) LD50: 140 mg/kg ^[2]	
ammonium hydroxide	TOXICITY	IRRITATION
	Inhalation (rat) LC50: 1997.718 mg/l/4h ^[2]	Eye (rabbit): 0.25 mg SEVERE
	Oral (rat) LD50: 350 mg/kg ^[2]	Eye (rabbit): 1 mg/30s SEVERE
Legend:	1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances	

COPPER(I) CHLORIDE	<p>The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>The material may produce respiratory tract irritation, and result in damage to the lung including reduced lung function.</p> <p>The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.</p>
AMMONIUM CHLORIDE & AMMONIUM HYDROXIDE	<p>The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p>
COPPER(I) CHLORIDE & AMMONIUM HYDROXIDE	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.</p>

Acute Toxicity	✓	Carcinogenicity	✗
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Alpha Copper(I) Chloride Solution

Skin Irritation/Corrosion	✓	Reproductivity	✗
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	✗
Respiratory or Skin sensitisation	✗	STOT - Repeated Exposure	✗
Mutagenicity	✗	Aspiration Hazard	✗

Legend: ✗ – Data either not available or does not fill the criteria for classification
 ✓ – Data available to make classification

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

Alpha Copper(I) Chloride Solution	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	Not Available	Not Available	Not Available	Not Available	Not Available
ammonium chloride	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	0.08mg/L	4
	EC50	48	Crustacea	0.261mg/L	4
	EC50	72	Algae or other aquatic plants	166.5mg/L	4
	NOEC	720	Fish	0.006mg/L	4
copper(I) chloride	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	0.001-mg/L	2
	EC50	48	Crustacea	0.001-0.213mg/L	2
	EC50	72	Algae or other aquatic plants	0.0165mg/L	2
	BCF	240	Algae or other aquatic plants	1.197779mg/L	4
	NOEC	168	Crustacea	0.004mg/L	2
ammonium hydroxide	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	15mg/L	4
	NOEC	72	Fish	3.5mg/L	4
Legend:	Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data				

Very toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

For copper:

Atmospheric Fate - Copper is unlikely to accumulate in the atmosphere due to a short residence time for airborne copper aerosols. Airborne coppers, however, may be transported over large distances. Air Quality Standards: no data available.

Aquatic Fate: Toxicity of copper is affected by pH and hardness of water. Total copper is rarely useful as a predictor of toxicity. In natural sea water, more than 98% of copper is organically bound and in river waters a high percentage is often organically bound, but the actual percentage depends on the river water and its pH.

Ecotoxicity: Copper accumulates significantly in the food chain. The toxic effect of copper in the aquatic biota depends on the bio-availability of copper in water which, in turn, depends on its physico-chemical form (i.e. speciation).

Ecotoxicity:

The tolerance of water organisms towards pH margin and variation is diverse. Recommended pH values for test species listed in OECD guidelines are between 6.0 and almost 9.

Acute testing with fish showed 96h-LC50 at about pH 3.5

For copper: Ecotoxicity - Significant effects are expected on various species of microalgae, some species of macroalgae, and a range of invertebrates, including crustaceans, gastropods and sea urchins. Copper is moderately toxic to crab and their larvae and is highly toxic to gastropods (mollusks, including oysters, mussels and clams). In fish, the acute lethal concentrations of copper depends both on test species and exposure conditions. Waters with high concentrations of copper can have significant effects on diatoms and sensitive invertebrates, notably cladocerans (water fleas). Most taxonomic groups of macroalgae and invertebrates will be severely affected.

For Copper: Typical foliar levels of copper are: Uncontaminated soils (0.3-250 mg/kg) ; Contaminated soils (150-450 mg/kg) ; Mining/smeltering soils (6.1-25 mg/kg/80 mg/kg/300 mg/kg).

Terrestrial Fate: Plants - Generally, vegetation reflects soil copper levels in its foliage. This is dependent upon the bioavailability of copper and the physiological requirements of species concerned. Crops are often more sensitive to copper than the native flora. Soil: In soil, copper levels are raised by application of fertilizer, fungicides, from deposition of highway dusts and from urban, mining and industrial sources. Chronic and or acute effects on sensitive species occur as a result of human activities such as copper fertilizer addition and addition of sludge. When soil levels exceed 150 mg Cu/kg, native and agricultural species show chronic effects. Soils in the range 500-1000 mg Cu/kg act in a strongly selective fashion allowing the survival of only copper-tolerant species and strains.

For Chloride: Although inorganic chloride ions are not normally considered toxic they can exist in effluents at acutely toxic levels. Incidental exposure to inorganic chloride may occur in occupational settings where chemicals management policies are improperly applied. The toxicity of chloride salts depends on the counter-ion (cation) present; that of chloride itself is unknown. Chloride toxicity has not been observed in humans except in the special case of impaired sodium chloride metabolism, e.g. in congestive heart failure. Healthy individuals can tolerate the intake of large quantities of chloride provided that there is an intake of fresh water following ingestion. Although excessive intake of drinking-water containing sodium chloride at concentrations above 2.5 g/L has been reported to produce hypertension, this effect is believed to be related to the sodium ion concentration. Chloride concentrations in excess of about 250 mg/L can give rise to detectable taste in water. Consumers can, however, become accustomed to concentrations in excess of 250 mg/L.

For Ammonia:

Atmospheric Fate: Ammonia reacts rapidly with available acids (mainly sulfuric, nitric, and sometimes hydrochloric acid) to form the corresponding salts. Ammonia is persistent in the air.

Aquatic Fate: Biodegrades rapidly to nitrate, producing a high oxygen demand. Non-persistent in water (half-life 2 days).

Ecotoxicity: Moderately toxic to fish under normal temperature and pH conditions and harmful to aquatic life at low concentrations. Does not concentrate in food chain.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
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Continued...

Alpha Copper(I) Chloride Solution

No Data available for all ingredients

No Data available for all ingredients

Bioaccumulative potential

Ingredient	Bioaccumulation
	No Data available for all ingredients

Mobility in soil

Ingredient	Mobility
	No Data available for all ingredients



SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ Containers may still present a chemical hazard/ danger when empty. ▶ Return to supplier for reuse/ recycling if possible. <p>Otherwise:</p> <ul style="list-style-type: none"> ▶ If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill. ▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product. <p>Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.</p> <p>A Hierarchy of Controls seems to be common - the user should investigate:</p> <ul style="list-style-type: none"> ▶ Reduction ▶ Reuse ▶ Recycling ▶ Disposal (if all else fails) <p>This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.</p> <ul style="list-style-type: none"> ▶ DO NOT allow wash water from cleaning or process equipment to enter drains. ▶ It may be necessary to collect all wash water for treatment before disposal. ▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first. ▶ Where in doubt contact the responsible authority. ▶ Recycle wherever possible or consult manufacturer for recycling options. ▶ Consult State Land Waste Management Authority for disposal. ▶ Bury residue in an authorised landfill. ▶ Recycle containers if possible, or dispose of in an authorised landfill.
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SECTION 14 TRANSPORT INFORMATION

Labels Required

	
Marine Pollutant	
HAZCHEM	*3Z

Land transport (ADG)

UN number	3082
UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (contains ammonium hydroxide and copper(I) chloride)
Transport hazard class(es)	Class : 9 Subrisk : Not Applicable
Packing group	III
Environmental hazard	Environmentally hazardous
Special precautions for user	Special provisions : 274 331 335 375 AU01 Limited quantity : 5 L

Environmentally Hazardous Substances meeting the descriptions of UN 3077 or UN 3082 are not subject to this Code when transported by road or rail in;
(a) packagings;
(b) IBCs; or
(c) any other receptacle not exceeding 500 kg(L).
- Australian Special Provisions (SP AU01) - ADG Code 7th Ed.

Alpha Copper(I) Chloride Solution

Air transport (ICAO-IATA / DGR)

UN number	3082	
UN proper shipping name	Environmentally hazardous substance, liquid, n.o.s. * (contains ammonium hydroxide and copper(I) chloride)	
Transport hazard class(es)	ICAO/IATA Class	9
	ICAO / IATA Subrisk	Not Applicable
	ERG Code	9L
Packing group	III	
Environmental hazard	Environmentally hazardous	
Special precautions for user	Special provisions	A97 A158 A197
	Cargo Only Packing Instructions	964
	Cargo Only Maximum Qty / Pack	450 L
	Passenger and Cargo Packing Instructions	964
	Passenger and Cargo Maximum Qty / Pack	450 L
	Passenger and Cargo Limited Quantity Packing Instructions	Y964
	Passenger and Cargo Limited Maximum Qty / Pack	30 kg G

Sea transport (IMDG-Code / GGVSee)

UN number	3082	
UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (contains ammonium hydroxide and copper(I) chloride)	
Transport hazard class(es)	IMDG Class	9
	IMDG Subrisk	Not Applicable
Packing group	III	
Environmental hazard	Marine Pollutant	
Special precautions for user	EMS Number	F-A , S-F
	Special provisions	274 335 969
	Limited Quantities	5 L

Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

SECTION 15 REGULATORY INFORMATION

Safety, health and environmental regulations / legislation specific for the substance or mixture

AMMONIUM CHLORIDE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards	GESAMP/EHS Composite List - GESAMP Hazard Profiles
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	IMO IBC Code Chapter 17: Summary of minimum requirements
Australia Inventory of Chemical Substances (AICS)	IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk

COPPER(I) CHLORIDE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List	Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5
Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes	Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	International Air Transport Association (IATA) Dangerous Goods Regulations
Australia Inventory of Chemical Substances (AICS)	International Maritime Dangerous Goods Requirements (IMDG Code)
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix A	United Nations Recommendations on the Transport of Dangerous Goods Model Regulations
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4	

AMMONIUM HYDROXIDE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List	IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk
Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes	International Air Transport Association (IATA) Dangerous Goods Regulations
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	International Maritime Dangerous Goods Requirements (IMDG Code)
Australia Inventory of Chemical Substances (AICS)	United Nations Recommendations on the Transport of Dangerous Goods Model Regulations
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6	

National Inventory Status

National Inventory	Status
Australia - AICS	Yes
Canada - DSL	Yes
Canada - NDSL	No (ammonium chloride; copper(I) chloride; ammonium hydroxide)
China - IECSC	Yes

Alpha Copper(I) Chloride Solution

Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - ARIPS	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 OTHER INFORMATION

Revision Date	01/11/2019
Initial Date	01/11/2009

SDS Version Summary

Version	Issue Date	Sections Updated
5.1.1.1	01/10/2018	Acute Health (eye), Acute Health (inhaled), Acute Health (skin), Acute Health (swallowed), Advice to Doctor, Appearance, Chronic Health, Classification, Disposal, Engineering Control, Environmental, Exposure Standard, Fire Fighter (extinguishing media), Fire Fighter (fire/explosion hazard), Fire Fighter (fire fighting), First Aid (inhaled), First Aid (skin), First Aid (swallowed), Ingredients, Instability Condition, Personal Protection (other), Personal Protection (eye), Personal Protection (hands/feet), Physical Properties, Spills (major), Spills (minor), Storage (storage incompatibility), Storage (suitable container), Supplier Information, Synonyms, Toxicity and Irritation (Other), Transport, Transport Information, Use, Name
7.1.1.1	01/11/2019	One-off system update. NOTE: This may or may not change the GHS classification

Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

Definitions and abbreviations

PC—TWA: Permissible Concentration-Time Weighted Average
 PC—STEL: Permissible Concentration-Short Term Exposure Limit
 IARC: International Agency for Research on Cancer
 ACGIH: American Conference of Governmental Industrial Hygienists
 STEL: Short Term Exposure Limit
 TEEL: Temporary Emergency Exposure Limit.
 IDLH: Immediately Dangerous to Life or Health Concentrations
 OSF: Odour Safety Factor
 NOAEL :No Observed Adverse Effect Level
 LOAEL: Lowest Observed Adverse Effect Level
 TLV: Threshold Limit Value
 LOD: Limit Of Detection
 OTV: Odour Threshold Value
 BCF: BioConcentration Factors
 BEI: Biological Exposure Index

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