

Metalstrip Aktivator 1660/2

ALPHA CHEMICALS PTY LTD

Chemwatch Hazard Alert Code: 3

Chemwatch: 5360-73

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Safety Data Sheet according to WHS and ADG requirements

S.GHS.AUS.EN

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

Product Identifier

Product name	Metalstrip Aktivator 1660/2
Synonyms	Not Available
Proper shipping name	CORROSIVE LIQUID, N.O.S. (contains sodium methylene)
Other means of identification	Not Available

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

Relevant identified uses	Additive for paint stripping.
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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	1	1
Toxicity	1	1
Body Contact	3	3
Reactivity	2	2
Chronic	3	3

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

Poisons Schedule	S6
Classification [1]	Skin Corrosion/Irritation Category 1B, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Reproductive Toxicity Category 1A, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation), Specific target organ toxicity - repeated exposure Category 2
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)

Metalstrip Aktivator 1660/2

H314	Causes severe skin burns and eye damage.
H317	May cause an allergic skin reaction.
H360D	May damage the unborn child.
H335	May cause respiratory irritation.
H373	May cause damage to organs through prolonged or repeated exposure.
AUH014	Reacts violently with water.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P260	Do not breathe mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P308+P313	IF exposed or concerned: Get medical advice/attention.
P310	Immediately call a POISON CENTER or doctor/physician.
P321	Specific treatment (see advice on this label).
P363	Wash contaminated clothing before reuse.
P302+P352	IF ON SKIN: Wash with plenty of water.

Precautionary statement(s) Storage

P405	Store locked up.
P403+P233	Store in a well-ventilated place. Keep container tightly closed.

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
111-77-3	20-30	<u>diethylene glycol monomethyl ether</u>
872-50-4	20-30	<u>N-methyl-2-pyrrolidone</u>
107-21-1	10-20	<u>ethylene glycol</u>
124-41-4	5-10	<u>sodium methylate</u>
34590-94-8	5-10	<u>dipropylene glycol monomethyl ether</u>
100-51-6	1-5	<u>benzyl alcohol</u>

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 or hair contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately flush body and clothes with large amounts of water, using safety shower if available. ▶ Quickly remove all contaminated clothing, including footwear. ▶ Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. ▶ Transport to hospital, or doctor. <p>For thermal burns:</p> <ul style="list-style-type: none"> ▶ Decontaminate area around burn. ▶ Consider the use of cold packs and topical antibiotics. <p>For first-degree burns (affecting top layer of skin)</p> <ul style="list-style-type: none"> ▶ Hold burned skin under cool (not cold) running water or immerse in cool water until pain subsides. ▶ Use compresses if running water is not available.

	<ul style="list-style-type: none"> ▶ Cover with sterile non-adhesive bandage or clean cloth. ▶ Do NOT apply butter or ointments; this may cause infection. ▶ Give over-the counter pain relievers if pain increases or swelling, redness, fever occur. <p>For second-degree burns (affecting top two layers of skin)</p> <ul style="list-style-type: none"> ▶ Cool the burn by immerse in cold running water for 10-15 minutes. ▶ Use compresses if running water is not available. ▶ Do NOT apply ice as this may lower body temperature and cause further damage. ▶ Do NOT break blisters or apply butter or ointments; this may cause infection. ▶ Protect burn by cover loosely with sterile, nonstick bandage and secure in place with gauze or tape. <p>To prevent shock: (unless the person has a head, neck, or leg injury, or it would cause discomfort):</p> <ul style="list-style-type: none"> ▶ Lay the person flat. ▶ Elevate feet about 12 inches. ▶ Elevate burn area above heart level, if possible. ▶ Cover the person with coat or blanket. ▶ Seek medical assistance. <p>For third-degree burns Seek immediate medical or emergency assistance. In the mean time:</p> <ul style="list-style-type: none"> ▶ Protect burn area cover loosely with sterile, nonstick bandage or, for large areas, a sheet or other material that will not leave lint in wound. ▶ Separate burned toes and fingers with dry, sterile dressings. ▶ Do not soak burn in water or apply ointments or butter; this may cause infection. ▶ To prevent shock see above. ▶ For an airway burn, do not place pillow under the person's head when the person is lying down. This can close the airway. ▶ Have a person with a facial burn sit up. ▶ Check pulse and breathing to monitor for shock until emergency help arrives.
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, without delay. ▶ Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema. ▶ Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs). ▶ As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested. ▶ Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered. <p>This must definitely be left to a doctor or person authorised by him/her. (ICSC13719)</p>
Ingestion	<ul style="list-style-type: none"> ▶ For advice, contact a Poisons Information Centre or a doctor at once. ▶ Urgent hospital treatment is likely to be needed. ▶ If swallowed do NOT induce vomiting. ▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. ▶ Observe the patient carefully. ▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. ▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▶ Transport to hospital or doctor without delay. ▶ Avoid giving milk or oils. ▶ Avoid giving alcohol.

Indication of any immediate medical attention and special treatment needed

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

Treat symptomatically.

For acute or short term repeated exposures to ethylene glycol:

- ▶ Early treatment of ingestion is important. Ensure emesis is satisfactory.
- ▶ Test and correct for metabolic acidosis and hypocalcaemia.
- ▶ Apply sustained diuresis when possible with hypertonic mannitol.
- ▶ Evaluate renal status and begin haemodialysis if indicated. [I.L.O.]
- ▶ Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective.
- ▶ Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution.
- ▶ Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites.
- ▶ Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days.
- ▶ Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis.

[Ellenhorn and Barceloux: Medical Toxicology]

It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated with such exposures.

Laitinen J., et al: *Occupational & Environmental Medicine* 1996; 53, 595-600

For acute or short-term repeated exposures to highly alkaline materials:

- ▶ Respiratory stress is uncommon but present occasionally because of soft tissue edema.
- ▶ Unless endotracheal intubation can be accomplished under direct vision, cricothyroidotomy or tracheotomy may be necessary.
- ▶ Oxygen is given as indicated.
- ▶ The presence of shock suggests perforation and mandates an intravenous line and fluid administration.
- ▶ Damage due to alkaline corrosives occurs by liquefaction necrosis whereby the saponification of fats and solubilisation of proteins allow deep penetration into the tissue.

Alkalis continue to cause damage after exposure.

INGESTION:

- ▶ Milk and water are the preferred diluents

No more than 2 glasses of water should be given to an adult.

- ▶ Neutralising agents should never be given since exothermic heat reaction may compound injury.

* Catharsis and emesis are absolutely contra-indicated.

* Activated charcoal does not absorb alkali.

* Gastric lavage should not be used.

Supportive care involves the following:

- ▶ Withhold oral feedings initially.
- ▶ If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- ▶ Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- ▶ Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

SKIN AND EYE:

- ▶ Injury should be irrigated for 20-30 minutes.

Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

For acute and short term repeated exposures to methanol:

- ▶ Toxicity results from accumulation of formaldehyde/formic acid.
- ▶ Clinical signs are usually limited to CNS, eyes and GI tract. Severe metabolic acidosis may produce dyspnea and profound systemic effects which may become intractable. All symptomatic patients should have arterial pH measured. Evaluate airway, breathing and circulation.
- ▶ Stabilise obtunded patients by giving naloxone, glucose and thiamine.
- ▶ Decontaminate with Ipecac or lavage for patients presenting 2 hours post-ingestion. Charcoal does not absorb well; the usefulness of cathartic is not established.
- ▶ Forced diuresis is not effective; haemodialysis is recommended where peak methanol levels exceed 50 mg/dL (this correlates with serum bicarbonate levels below 18 meq/L).
- ▶ Ethanol, maintained at levels between 100 and 150 mg/dL, inhibits formation of toxic metabolites and may be indicated when peak methanol levels exceed 20 mg/dL. An intravenous solution of ethanol in D5W is optimal.
- ▶ Folate, as leucovorin, may increase the oxidative removal of formic acid. 4-methylpyrazole may be an effective adjunct in the treatment. 8-Phenytoin may be preferable to diazepam for controlling seizure.

[Ellenhorn Barceloux: Medical Toxicology]

BIOLOGICAL EXPOSURE INDEX - BEI

Determinant	Index	Sampling Time	Comment
1. Methanol in urine	15 mg/l	End of shift	B, NS
2. Formic acid in urine	80 mg/gm creatinine	Before the shift at end of workweek	B, NS

B: Background levels occur in specimens collected from subjects **NOT** exposed.

NS: Non-specific determinant - observed following exposure to other materials.

SECTION 5 FIREFIGHTING MEASURES**Extinguishing media**

- ▶ Alcohol stable 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	▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
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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 full body protective clothing with breathing apparatus. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ 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"> ▶ Combustible. ▶ Slight fire hazard when exposed to heat or flame. ▶ Heating may cause expansion or decomposition leading to violent rupture of containers. ▶ On combustion, may emit toxic fumes of carbon monoxide (CO). ▶ May emit acrid smoke. ▶ Mists containing combustible materials may be explosive. <p>Combustion products include: carbon dioxide (CO₂) nitrogen oxides (NO_x) other pyrolysis products typical of burning organic material. May emit corrosive fumes.</p>
HAZCHEM	2X

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"> ▶ Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material. ▶ Check regularly for spills and leaks. ▶ Clean up all spills immediately. ▶ Avoid breathing vapours and contact with skin and eyes.
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	<ul style="list-style-type: none"> ▶ 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	<p>Environmental hazard - contain spillage.</p> <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 full body protective clothing with breathing apparatus. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Consider evacuation (or protect in place). ▶ Stop leak if safe to do so. ▶ Contain spill with sand, earth or vermiculite. ▶ Collect recoverable product into labelled containers for recycling.

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. ▶ WARNING: To avoid violent reaction, ALWAYS add material to water and NEVER water to material. ▶ Avoid smoking, naked lights or ignition sources. ▶ Avoid contact with incompatible materials. ▶ When handling, DO NOT eat, drink or smoke. ▶ Keep containers securely sealed when not in use.
Other information	<p>Consider storage under inert gas.</p> <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. ▶ DO NOT store near acids, or oxidising agents ▶ No smoking, naked lights, heat or ignition sources. ▶ WARNING: Decomposition may occur after prolonged storage.

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> ▶ DO NOT use aluminium or galvanised containers ▶ 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. <p>For low viscosity materials</p> <ul style="list-style-type: none"> ▶ Drums and jerricans must be of the non-removable head type. ▶ Where a can is to be used as an inner package, the can must have a screwed enclosure. <p>For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.):</p> <ul style="list-style-type: none"> ▶ Removable head packaging; ▶ Cans with friction closures and ▶ low pressure tubes and cartridges <p>may be used.</p> <p>-</p> <p>Where combination packages are used, and the inner packages are of glass, porcelain or stoneware, there must be sufficient inert cushioning material in contact with inner and outer packages unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.</p>
Storage incompatibility	<ul style="list-style-type: none"> ▶ Contact with water liberates highly flammable gases ▶ Reacts vigorously with acids ▶ Avoid strong acids, bases. ▶ Avoid contact with copper, aluminium and their alloys.

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	N-methyl-2-pyrrolidone	1-Methyl-2-pyrrolidone	25 ppm / 103 mg/m3	309 mg/m3 / 75 ppm	Not Available	Not Available
Australia Exposure Standards	ethylene glycol	Ethylene glycol (particulate)	10 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	ethylene glycol	Ethylene glycol (vapour)	20 ppm / 52 mg/m3	104 mg/m3 / 40 ppm	Not Available	Not Available
Australia Exposure Standards	dipropylene glycol monomethyl ether	(2-Methoxymethylethoxy) propanol	50 ppm / 308 mg/m3	Not Available	Not Available	Not Available

EMERGENCY LIMITS

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Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
diethylene glycol monomethyl ether	Methoxyethoxy)ethanol, 2-(2-; (Diethylene glycol monomethyl ether)	3.4 ppm	37 ppm	220 ppm
N-methyl-2-pyrrolidone	Methyl 2-pyrrolidinone, 1-; (N-Methylpyrrolidone)	30 ppm	32 ppm	190 ppm
ethylene glycol	Ethylene glycol	30 ppm	150 ppm	900 ppm
sodium methylate	Sodium methylate	6.1 mg/m3	67 mg/m3	400 mg/m3
dipropylene glycol monomethyl ether	Dipropylene glycol methyl ether	150 ppm	1700* ppm	9900** ppm
benzyl alcohol	Benzyl alcohol	30 ppm	52 ppm	740 ppm

Ingredient	Original IDLH	Revised IDLH
diethylene glycol monomethyl ether	Not Available	Not Available
N-methyl-2-pyrrolidone	Not Available	Not Available
ethylene glycol	Not Available	Not Available
sodium methylate	Not Available	Not Available
dipropylene glycol monomethyl ether	600 ppm	Not Available
benzyl alcohol	Not Available	Not Available


OCCUPATIONAL EXPOSURE BANDING

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
diethylene glycol monomethyl ether	E	≤ 0.1 ppm
benzyl alcohol	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. Employers may need to use multiple types of controls to prevent employee overexposure.</p> <p>Local exhaust ventilation usually required.</p>
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> ▶ Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure. ▶ Chemical goggles whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted. ▶ Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection. ▶ Alternatively a gas mask may replace splash goggles and face shields. ▶ 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.
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▶ Elbow length PVC gloves ▶ When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots. <p>NOTE:</p> <ul style="list-style-type: none"> ▶ The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact. ▶ Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed. <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. ▶ PVC Apron. ▶ PVC protective suit may be required if exposure severe. ▶ Eyewash unit.

► Ensure there is ready access to a safety shower.

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	C
NATURAL RUBBER	C
NATURAL+NEOPRENE	C
NEOPRENE	C
NEOPRENE/NATURAL	C
NITRILE	C
NITRILE+PVC	C
PE/EVAL/PE	C
PVA	C
PVC	C
TEFLON	C
VITON	C

* CPI - Chemwatch Performance Index

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.

Respiratory protection

Type KAX-P 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	KAX-AUS P2	-	KAX-PAPR-AUS / Class 1 P2
up to 50 x ES	-	KAX-AUS / Class 1 P2	-
up to 100 x ES	-	KAX-2 P2	KAX-PAPR-2 P2 ^

^ - 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)

- Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Dark amber coloured alkaline liquid with characteristic odour; partially mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	~1.08 @20C
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
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)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	>93 (COC)	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Reacts	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	Inhaling corrosive bases may irritate the respiratory tract. Symptoms include cough, choking, pain and damage to the mucous membrane. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo. Inhalation hazard is increased at higher temperatures.	
Ingestion	The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion. Ingestion of alkaline corrosives may produce burns around the mouth, ulcerations and swellings of the mucous membranes, profuse saliva production, with an inability to speak or swallow. Both the oesophagus and stomach may experience burning pain; vomiting and diarrhoea may follow.	
Skin Contact	The material can produce chemical burns following direct contact with the skin. Skin contact with alkaline corrosives may produce severe pain and burns; brownish stains may develop. The corroded area may be soft, gelatinous and necrotic; tissue destruction may be deep. Open cuts, abraded or irritated skin should not be exposed to this material. 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. Absorption by skin may readily exceed vapour inhalation exposure. Symptoms for skin absorption are the same as for inhalation.	
Eye	The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating. If applied to the eyes, this material causes severe eye damage. Direct eye contact with corrosive bases can cause pain and burns. There may be swelling, epithelium destruction, clouding of the cornea and inflammation of the iris. Mild cases often resolve; severe cases can be prolonged with complications such as persistent swelling, scarring, permanent cloudiness, bulging of the eye, cataracts, eyelids glued to the eyeball and blindness.	
Chronic	Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. Harmful: danger of serious damage to health by prolonged exposure through inhalation. This material can cause serious damage if one is exposed to it for long periods. It can be assumed that it contains a substance which can produce severe defects. Ample evidence exists, from results in experimentation, that developmental disorders are directly caused by human exposure to the material. There is some evidence from animal testing that exposure to this material may result in reduced fertility. Some glycol esters and their ethers cause wasting of the testicles, reproductive changes, infertility and changes to kidney function. Shorter chain compounds are more dangerous. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.	
Metalstrip Aktivator 1660/2	TOXICITY Oral (None) LD50: 11909.3 mg/kg ^[2]	IRRITATION Not Available
diethylene glycol monomethyl ether	TOXICITY Dermal (rabbit) LD50: 2525 mg/kg ^[2] Oral (rat) LD50: 4040 mg/kg ^[2]	IRRITATION Eye (rabbit): 500 mg moderate Eye (rabbit): 500 mg/24h mild Eye: no adverse effect observed (not irritating) ^[1] Skin: no adverse effect observed (not irritating) ^[1]
N-methyl-2-pyrrolidone	TOXICITY dermal (rat) LD50: 2500-5000 mg/kg ^[2] Inhalation (rat) LC50: 8290.5297 mg/l/4h ^[2] Oral (rat) LD50: 3914 mg/kg ^[2]	IRRITATION Eye (rabbit): 100 mg - moderate
ethylene glycol	TOXICITY Dermal (rabbit) LD50: 9530 mg/kg ^[2] Inhalation (rat) LC50: 100.2 mg/l/8hr ^[2] Oral (rat) LD50: =3.58-12.7 mg/kg ^[2]	IRRITATION Eye (rabbit): 100 mg/1h - mild Eye (rabbit): 12 mg/m ³ /3D Eye (rabbit): 1440mg/6h-moderate Eye (rabbit): 500 mg/24h - mild Eye: no adverse effect observed (not irritating) ^[1] Skin (rabbit): 555 mg(open)-mild Skin: no adverse effect observed (not irritating) ^[1]
sodium methylate	TOXICITY Oral (rat) LD50: 1682 mg/kg ^[1]	IRRITATION Not Available
dipropylene glycol monomethyl ether	TOXICITY Dermal (rabbit) LD50: 9500 mg/kg ^[2] Oral (rat) LD50: 5130 mg/kg ^[2]	IRRITATION Eye (human): 8 mg - mild Eye (rabbit): 500 mg/24hr - mild Skin (rabbit): 238 mg - mild Skin (rabbit): 500 mg (open)-mild

Continued...

	TOXICITY	IRRITATION
benzyl alcohol	Dermal (rabbit) LD50: 2000 mg/kg ^[2]	Eye (rabbit): 0.75 mg open SEVERE
	Inhalation (rat) LC50: >4.178 mg/l/4h ^[2]	Eye: adverse effect observed (irritating) ^[1]
	Oral (rat) LD50: 1230 mg/kg ^[2]	Skin (man): 16 mg/48h-mild
		Skin (rabbit):10 mg/24h open-mild
		Skin: no adverse effect observed (not irritating) ^[1]
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	
DIETHYLENE GLYCOL MONOMETHYL ETHER	<p>The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>This category includes diethylene glycol ethyl ether (DGEE), diethylene glycol propyl ether (DGPE) diethylene glycol butyl ether (DGBE) and diethylene glycol hexyl ether (DGHE) and their acetates. Studies show that they can cause kidney and liver damage, skin and eye irritation as well as blood changes but do not cause damage to the reproductive, genetic and developmental abnormalities, sensitisation or respiratory systems. However, DGEE is reported to cause sperm insufficiency.</p>	
N-METHYL-2-PYRROLIDONE	<p>For N-methyl-2-pyrrolidone (NMP):</p> <p>Acute toxicity: Animal testing shows NMP is quickly absorbed after inhalation, swallowing and administration on skin, distributed throughout the body, and eliminated mostly by hydroxylation to polar compounds, which are excreted in the urine. In animal testing NMP has a low potential for skin irritation and a moderate potential for eye irritation. Repeated daily doses of high amounts on the skin have caused severe, painful bleeding and eschar formation. In general, animal testing suggests NMP has low acute toxicity. Exposure to toxic amounts caused functional disturbances and depression of the central nervous system. Local irritation of the airway occurred after inhalation, and irritation of the gastrointestinal tract occurred after swallowing in animals.</p> <p>Repeat dose toxicity: There is no clear toxicity profile for NMP after multiple administration. In animal testing, shrinking of the testes and thymus gland were observed, together with an increase in red blood cells, after exposure to high amounts. There is no data for humans after repeated-dose exposure.</p> <p>Cancer-causing potential: NMP did not show any clear evidence for cancer-causing ability in an animal test for inhalation.</p> <p>Genetic toxicity: The potential for NMP to cause mutations is rare.</p>	
ETHYLENE GLYCOL	<p>[Estimated Lethal Dose (human) 100 ml; RTECS quoted by Orica] Substance is reproductive effector in rats (birth defects). Mutagenic to rat cells. For ethylene glycol:</p> <p>Ethylene glycol is quickly and extensively absorbed throughout the gastrointestinal tract. Limited information suggests that it is also absorbed through the airways; absorption through skin is apparently slow. Following absorption, it is distributed throughout the body. In humans, it is initially metabolized by alcohol dehydrogenase to form glycoaldehyde, which is rapidly converted to glycolic acid and glyoxal. These breakdown products are oxidized to glyoxylate, which may be further metabolized to formic acid, oxalic acid, and glycine. Breakdown of both glycine and formic acid can generate carbon dioxide, which is one of the major elimination products of ethylene glycol. In addition to exhaled carbon dioxide, ethylene glycol is eliminated in the urine as both the parent compound and glycolic acid. Elimination is rapid and occurs within a few hours.</p> <p>Respiratory effects: Respiratory system involvement occurs 12-24 hours after swallowing sufficient amounts of ethylene glycol.</p>	
SODIUM METHYLATE	No significant acute toxicological data identified in literature search.	
DIPROPYLENE GLYCOL MONOMETHYL ETHER	<p>For propylene glycol ethers (PGEs):</p> <p>Typical propylene glycol ethers include propylene glycol n-butyl ether (PnB); dipropylene glycol n-butyl ether (DPnB); dipropylene glycol methyl ether acetate (DPMA) and tripropylene glycol methyl ether (TPM).</p> <p>Testing of a wide variety of propylene glycol ethers has shown that propylene glycol-based ethers are less toxic than some ethers of the ethylene series. The common toxicities associated with the lower molecular weight homologues of the ethylene series, such as adverse effects on the reproductive organs, the developing embryo and foetus, blood or thymus gland, are not seen with the commercial-grade propylene glycol ethers. In the ethylene series, metabolism of the terminal hydroxyl group produces and alkoxyacetic acid. The reproductive and developmental toxicities of the lower molecular weight homologues in the ethylene series are due specifically to the formation of methoxyacetic and ethoxyacetic acids. Longer chain homologues in the ethylene series are not associated with reproductive toxicity, but can cause haemolysis in sensitive species, also through formation of an alkoxyacetic acid. The predominant alpha isomer of all the PGEs (which is thermodynamically favoured during manufacture of PGEs) is a secondary alcohol incapable of forming an alkoxypropionic acid. In contrast, beta-isomers are able to form the alkoxypropionic acids and these are linked to birth defects (and possibly, haemolytic effects). The alpha isomer comprises more than 95% of the isomeric mixture in the commercial product, and therefore PGEs show relatively little toxicity. One of the main metabolites of the propylene glycol ethers is propylene glycol, which is of low toxicity and completely metabolized in the body.</p> <p>As a class, PGEs have low acute toxicity via swallowing, skin exposure and inhalation.</p> <p>The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p>	
BENZYL ALCOHOL	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.</p> <p>Unlike benzylic alcohols, the beta-hydroxyl group of the members of benzyl alkyl alcohols contributes to break down reactions but do not undergo phase II metabolic activation. Though structurally similar to cancer causing ethyl benzene, phenethyl alcohol is only of negligible concern due to limited similarity in their pattern of activity.</p> <p>For benzoates:</p> <p>Benzyl alcohol, benzoic acid and its sodium and potassium salt have a common metabolic and excretion pathway. All but benzyl alcohol are considered to be unharmed and of low acute toxicity. They may cause slight irritation by oral, dermal or inhalation exposure except sodium benzoate which doesn't irritate the skin. Studies showed increased mortality, reduced weight gain, liver and kidney effects at higher doses, also, lesions of the brains, thymus and skeletal muscles may occur with benzyl alcohol. However, they do not cause cancer, genetic or reproductive toxicity. Developmental toxicity may occur but only at maternal toxic level.</p> <p>Adverse reactions to fragrances in perfumes and fragranced cosmetic products include allergic contact dermatitis, irritant contact dermatitis, sensitivity to light, immediate contact reactions, and pigmented contact dermatitis. Airborne and connubial contact dermatitis occurs. Contact allergy is a lifelong condition, so symptoms may occur on re-exposure. Allergic contact dermatitis can be severe and widespread, with significant impairment of quality of life and potential consequences for fitness for work.</p> <p>If the perfume contains a sensitizing component, intolerance to perfumes by inhalation may occur. Symptoms may include general unwellness, coughing, phlegm, wheezing, chest tightness, headache, shortness of breath with exertion, acute respiratory illness, hayfever, asthma and other respiratory diseases. Perfumes can induce excess reactivity of the airway without producing allergy or airway obstruction. Breathing through a carbon filter mask had no protective effect.</p> <p>Occupational asthma caused by perfume substances, such as isoamyl acetate, limonene, cinnamaldehyde and benzaldehyde, tend to give persistent symptoms, even though the exposure is below occupational exposure limits. Prevention of contact sensitization to fragrances is an</p>	

	<p>important objective of public health risk management.</p> <p>Hands: Contact sensitization may be the primary cause of hand eczema or a complication of irritant or atopic hand eczema.</p> <p>Fragrance allergens act as haptens, low molecular weight chemicals that cause an immune response only when attached to a carrier protein. However, not all sensitizing fragrance chemicals are directly reactive, but require previous activation. A prohaptens is a chemical that itself causes little or no sensitization, but is transformed into a hapten in the skin (bioactivation), usually via enzyme catalysis. It is not always possible to know whether a particular allergen that is not directly reactive acts as a prohaptens or a prohaptens, or both.</p> <p>Prohaptens: Compounds that are bioactivated in the skin and thereby form haptens are referred to as prohaptens. The possibility of a prohaptens being activated cannot be avoided by outside measures. Activation processes increase the risk for cross-reactivity between fragrance substances. Various enzymes play roles in both activating and deactivating prohaptens.</p> <p>This is a member or analogue of a group of benzyl derivatives generally regarded as safe (GRAS), based partly on their self-limiting properties as flavouring substances in food. In humans and other animals, they are rapidly absorbed, broken down and excreted, with a wide safety margin. They also lack significant potential to cause genetic toxicity and mutations. The intake of benzyl derivatives as natural components of traditional foods is actually higher than the intake as intentionally added flavouring substances.</p> <p>The aryl alkyl alcohol (AAA) fragrance ingredients have diverse chemical structures, with similar metabolic and toxicity profiles. The AAA fragrances demonstrate low acute and subchronic toxicity by skin contact and swallowing. At concentrations likely to be encountered by consumers, AAA fragrance ingredients are non-irritating to the skin. The potential for eye irritation is minimal. With the exception of benzyl alcohol, phenethyl and 2-phenoxyethyl AAA alcohols, testing in humans indicate that AAA fragrance ingredients generally have no or low sensitization potential. Available data indicate that the potential for photosensitization is low.</p> <p>Testing suggests that at current human exposure levels, this group of chemicals does not cause maternal or developmental toxicity. Animal testing shows no cancer-causing evidence, with little or no genetic toxicity. It has been concluded that these materials would not present a safety concern at current levels of use, as fragrance ingredients.</p>
N-METHYL-2-PYRROLIDONE & SODIUM METHYLATE & DIPROPYLENE GLYCOL MONOMETHYL ETHER	<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>
DIPROPYLENE GLYCOL MONOMETHYL ETHER & BENZYL ALCOHOL	<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>

Acute Toxicity	✗	Carcinogenicity	✗
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

	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
Metalstrip Aktivator 1660/2	Not Available	Not Available	Not Available	Not Available	Not Available
diethylene glycol monomethyl ether	LC50	96	Fish	5-741mg/L	2
	EC50	48	Crustacea	1-192mg/L	2
	EC50	96	Algae or other aquatic plants	>1-mg/L	2
	EC0	96	Algae or other aquatic plants	1-mg/L	2
N-methyl-2-pyrrolidone	LC50	96	Fish	464mg/L	1
	EC50	48	Crustacea	ca.4897mg/L	1
	EC50	72	Algae or other aquatic plants	>500mg/L	2
	EC0	24	Crustacea	>1-mg/L	2
	NOEC	504	Crustacea	12.5mg/L	2
ethylene glycol	LC50	96	Fish	>72-860mg/L	2
	EC50	48	Crustacea	>100mg/L	2
	EC50	96	Algae or other aquatic plants	3-536mg/L	2
	NOEC	552	Crustacea	>=1-mg/L	2
sodium methylate	LC50	96	Fish	11-850mg/L	2
	EC50	48	Crustacea	>10-mg/L	2

Continued...

Metalstrip Aktivator 1660/2

	EC50	96	Algae or other aquatic plants	ca.22-mg/L	2
	EC90	24	Algae or other aquatic plants	3-800mg/L	2
	NOEC	96	Crustacea	7-960mg/L	2
dipropylene glycol monomethyl ether	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	>1-930mg/L	2
	EC50	48	Crustacea	1-930mg/L	2
	EC50	72	Algae or other aquatic plants	6-999mg/L	2
	NOEC	528	Crustacea	>=0.5mg/L	2
benzyl alcohol	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	10mg/L	2
	EC50	48	Crustacea	230mg/L	2
	EC50	96	Algae or other aquatic plants	76.828mg/L	2
	NOEC	336	Fish	5.1mg/L	2
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				

Prevent, by any means available, spillage from entering drains or water courses.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
diethylene glycol monomethyl ether	LOW	LOW
N-methyl-2-pyrrolidone	LOW	LOW
ethylene glycol	LOW (Half-life = 24 days)	LOW (Half-life = 3.46 days)
dipropylene glycol monomethyl ether	HIGH	HIGH
benzyl alcohol	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
diethylene glycol monomethyl ether	LOW (BCF = 0.18)
N-methyl-2-pyrrolidone	LOW (BCF = 0.16)
ethylene glycol	LOW (BCF = 200)
dipropylene glycol monomethyl ether	LOW (BCF = 100)
benzyl alcohol	LOW (LogKOW = 1.1)

Mobility in soil

Ingredient	Mobility
diethylene glycol monomethyl ether	HIGH (KOC = 1)
N-methyl-2-pyrrolidone	LOW (KOC = 20.94)
ethylene glycol	HIGH (KOC = 1)
dipropylene glycol monomethyl ether	LOW (KOC = 10)
benzyl alcohol	LOW (KOC = 15.66)

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. ▶ 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.
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- ▶ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- ▶ Treat and neutralise at an approved treatment plant.
- ▶ Treatment should involve: Neutralisation with suitable dilute acid followed by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material).
- ▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 TRANSPORT INFORMATION

Labels Required

	
Marine Pollutant	NO
HAZCHEM	2X

Land transport (ADG)

UN number	1760
UN proper shipping name	CORROSIVE LIQUID, N.O.S. (contains sodium methylate)
Transport hazard class(es)	Class : 8 Subrisk : Not Applicable
Packing group	II
Environmental hazard	Not Applicable
Special precautions for user	Special provisions : 274 Limited quantity : 1 L

Air transport (ICAO-IATA / DGR)

UN number	1760
UN proper shipping name	Corrosive liquid, n.o.s. * (contains sodium methylate)
Transport hazard class(es)	ICAO/IATA Class : 8 ICAO / IATA Subrisk : Not Applicable ERG Code : 8L
Packing group	II
Environmental hazard	Not Applicable
Special precautions for user	Special provisions : A3 A803 Cargo Only Packing Instructions : 855 Cargo Only Maximum Qty / Pack : 30 L Passenger and Cargo Packing Instructions : 851 Passenger and Cargo Maximum Qty / Pack : 1 L Passenger and Cargo Limited Quantity Packing Instructions : Y840 Passenger and Cargo Limited Maximum Qty / Pack : 0.5 L

Sea transport (IMDG-Code / GGVSee)

UN number	1760
UN proper shipping name	CORROSIVE LIQUID, N.O.S. (contains sodium methylate)
Transport hazard class(es)	IMDG Class : 8 IMDG Subrisk : Not Applicable
Packing group	II
Environmental hazard	Not Applicable
Special precautions for user	EMS Number : F-A , S-B Special provisions : 274 Limited Quantities : 1 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

DIETHYLENE GLYCOL MONOMETHYL ETHER IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
Chemical Footprint Project - Chemicals of High Concern List

N-METHYL-2-PYRROLIDONE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
Chemical Footprint Project - Chemicals of High Concern List

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

ETHYLENE GLYCOL IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6

Chemical Footprint Project - Chemicals of High Concern List

SODIUM METHYLATE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Inventory of Chemical Substances (AICS)

DIPROPYLENE GLYCOL MONOMETHYL ETHER IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

BENZYL ALCOHOL IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Inventory of Chemical Substances (AICS)

National Inventory Status

National Inventory	Status
Australia - AICS	Yes
Canada - DSL	Yes
Canada - NDSL	No (diethylene glycol monomethyl ether; N-methyl-2-pyrrolidone; ethylene glycol; sodium methylate; dipropylene glycol monomethyl ether; benzyl alcohol)
China - IECSC	Yes
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	17/07/2019

SDS Version Summary

Version	Issue Date	Sections Updated
3.1.1.1	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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