

Hydrogen peroxide 6% (20 vol) ALPHA CHEMICALS PTY LTD

Chemwatch: 6074-27

Chemwatch Hazard Alert Code: 4

Issue Date: **10/03/2023** Print Date: **19/01/2024** S.GHS.AUS.EN

Version No: **9.1**Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

SECTION 1 Identification of the substance / mixture and of the company / undertaking

Product Identifier		
Product name	Hydrogen peroxide 6% (20 vol)	
Chemical Name	Not Applicable	
Synonyms	paper pulp textile bleaching hydrometallurgy effluent treatment chemical; synthesis	
Chemical formula	Not Applicable	
Other means of identification	Not Available	

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

Relevant identified uses Used in paper, pulp and textile bleaching; hydrometallurgy; water and effluent treatment; chemical synthesis; numerous other applications.

Details of the manufacturer or supplier of the safety data sheet

Registered company name	ALPHA CHEMICALS PTY LTD
Address	4 ALLEN PLACE WETHERILL PARK NSW 2164 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	CHEMWATCH EMERGENCY RESPONSE (24/7)
Emergency telephone numbers	61 (0)418 237 771	+61 1800 951 288
Other emergency telephone numbers	Not Available	+61 3 9573 3188

Once connected and if the message is not in your preferred language then please dial 01

SECTION 2 Hazards identification

Classification of the substance or mixture

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

Chemwatch Hazard Ratings

	Min	Max	
Flammability	0		
Toxicity	2		0 = Minimum
Body Contact	2	- 1	1 = Low
Reactivity	0		2 = Moderate
Chronic	4		3 = High 4 = Extreme

Poisons Schedule	Not Applicable
Classification ^[1]	Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 1, Acute Toxicity (Inhalation) Category 3, Carcinogenicity Category 1A
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Page 2 of 12

Hydrogen peroxide 6% (20 vol)

Issue Date: 10/03/2023 Print Date: 19/01/2024

Hazard pictogram(s)







Signal word

Hazard statement(s)

H315	Causes skin irritation.
H318	Causes serious eye damage.
H331	Toxic if inhaled.
H350	May cause cancer.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P261	Avoid breathing mist/vapours/spray.
P264	Wash all exposed external body areas thoroughly after handling.

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.
P308+P313	IF exposed or concerned: Get medical advice/ attention.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P302+P352	IF ON SKIN: Wash with plenty of water.
P332+P313	If skin irritation occurs: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.

Precautionary statement(s) Storage

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

Precautionary statement(s) Disposal

Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 Composition / information on ingredients

P501

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
7722-84-1	6	hydrogen peroxide
62-44-2	<1	phenacetin
7664-38-2	<1	Orthophosphoric Acid
7732-18-5	balance	<u>Distilled Water</u>
Legend:	Legend: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L * EU IOELVs available	

SECTION 4 First aid measures

Description of first aid measures		
Eye Contact	If this product comes in contact with the eyes: Wash out immediately with fresh 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. Seek medical attention without delay; if pain persists or recurs seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.	
Skin Contact	If skin contact occurs: 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.	

Chemwatch: 6074-27 Page 3 of 12 Issue Date: 10/03/2023

Version No: 9.1 Print Date: 19/01/2024

Hydrogen peroxide 6% (20 vol)

Inhalation

Inhala

Indication of any immediate medical attention and special treatment needed

Hydrogen peroxide at moderate concentrations (5% or more) is a strong oxidant.

- Direct contact with the eye is likely to cause corneal damage especially if not washed immediately. Careful ophthalmologic evaluation is recommended and the possibility of local corticosteroid therapy should be considered.
- Because of the likelihood of systemic effects attempts at evacuating the stomach via emesis induction or gastric lavage should be avoided.
- There is remote possibility, however, that a nasogastric or orogastric tube may be required for the reduction of severe distension due to gas formation

Fisher Scientific SDS

- for non-steroidal anti-inflammatories (NSAIDs)
- Symptoms following acute NSAIDs overdoses are usually limited to lethargy, drowsiness, nausea, vomiting, and epigastric pain, which are generally reversible with supportive care. Gastrointestinal bleeding can occur. Hypertension, acute renal failure, respiratory depression, and coma may occur, but are rare. Anaphylactoid reactions have been reported with therapeutic ingestion of NSAIDs, and may occur following an overdose.
- Patients should be managed by symptomatic and supportive care following a NSAIDs overdose.
- There are no specific antidotes
- Emesis and/or activated charcoal (60 to 100 grams in adults, 1 to 2 g/kg in children), and/or osmotic cathartic may be indicated in patients seen within 4 hours of ingestion with symptoms or following a large overdose (5 to 10 times the usual dose).
- Forced diuresis, alkalinisation of urine, hemodialysis, or haemoperfusion may not be useful due to high protein binding.
- For gastrointestinal haemorrhage, monitor stool guaiac and administer antacids or sucralfate.
- For mild/moderate allergic reactions, administer antihistamines with or without inhaled beta agonists, corticosteroids, or epinephrine.
- For severe allergic reactions, administer oxygen, antihistamines, epinephrine, or corticosteroids. Nephritis or nephrotic syndrome, thrombocytopenia, or haemolytic anemia may respond to glucocorticoid administration.
- For severe acidosis, administer sodium bicarbonate.
- Administer as required: plasma volume expanders for severe hypotension; diazepam or other benzodiazepine for convulsions; vitamin K1 for hypoprothrombinaemia; and/or dopamine plus dobutamine intravenously to prevent or reverse early indications of renal failure.

Serious gastrointestinal toxicity, such as bleeding, ulceration, and perforation, can occur at any time, with or without warning symptoms, in patients treated chronically with NSAID therapy. Although minor upper gastrointestinal problems, such as dyspepsia, are common, usually developing early in therapy, physicians should remain alert for ulceration and bleeding in patients treated chronically with NSAIDs even in the absence of previous GI tract symptoms. In patients observed in clinical trials of several months to two years duration, symptomatic upper GI ulcers, gross bleeding or perforation appear to occur in approximately 1% of patients treated for 3 to 6 months, and in about 2% to 4% of patients treated for one year. Physicians should inform patients about the signs and/or symptoms of serious GI toxicity and what steps to take if they occur.

Studies to date have not identified any subset of patients not at risk of developing peptic ulceration and bleeding. Except for a prior history of serious GI events and other risk factors known to be associated with peptic ulcer disease, such as alcoholism, smoking, etc., no risk factors (e.g., age, sex) have been associated with increased risk. Elderly or debilitated patients seem to tolerate ulceration or bleeding less well than other individuals, and most spontaneous reports of fatal GI events are in this population. Studies to date are inconclusive concerning the relative risk of various NSAIDs in causing such reactions. High doses of any NSAID probably carry a greater risk of these reactions, although controlled clinical trials showing this do not exist in most cases. In considering the use of relatively large doses (within the recommended dosage range), sufficient benefit should be anticipated to offset the potential increased risk of GI toxicity.

SECTION 5 Firefighting measures

Extinguishing media

For hydrogen peroxide

NOTE: Chemical extinguishing agents may accelerate decomposition. [CCINFO]

- There is no restriction on the type of extinguisher which may be used
- Use extinguishing media suitable for surrounding area.

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.	
Advice for firefighters		
Fire Fighting	 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	 Non combustible. Not considered a significant fire risk, however containers may burn. Decomposition may produce toxic fumes of: phosphorus oxides (POx) May emit poisonous fumes. May emit corrosive fumes. 	
HAZCHEM	Not Applicable	

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

Chemwatch: 6074-27 Page 4 of 12 Issue Date: 10/03/2023 Version No: 9.1 Print Date: 19/01/2024

Hydrogen peroxide 6% (20 vol)

Environmental precautions

See section 12

Methods and material for containment and cleaning up

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Minor Spills	 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	 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 all means available, spillage from entering drains or water courses. Consider evacuation (or protect in place). No smoking, naked lights or ignition sources. Increase ventilation. Stop leak if safe to do so. For hydrogen peroxide: Dilute with large quantities of water (at least ten (10) times the volume of hydrogen peroxide). Sodium bicarbonate may be used to accelerate breakdown.

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

SECTION 7 Handling and storage

Precautions for safe handling Safe handling	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	

Conditions for safe storage, including any incompatibilities				
Suitable container	Glass container is suitable for laboratory quantities Polyethylene or polypropylene container. Packing as recommended by manufacturer. Check all containers are clearly labelled and free from leaks. Hydrogen peroxide containing/ generating materials requiring rigid packaging. Store in: containers with vented lids. properly passivated aluminium containers. properly passivated stainless steel. polyethylene containers. porcelain, vitreous stoneware Teflon lined containers.			
Storage incompatibility	Hydrogen peroxide Is a powerful oxidiser contamination or heat may cause self accelerating exothermic decomposition with oxygen gas and steam release - this may generate dangerous pressures - steam explosion. reacts dangerously with rust, dust, dirt, iron, copper, acids, metals and salts, organic material. is unstable if heated. (e.g.): one volume of 70% hydrogen peroxide solution decomposes to produce 300 volumes of oxygen gas. in presence of a strong initiating source may be explosively reactive concentrated or pure material can generate heat and decompose spontaneously; can ignite or explode when heated, shocked, contaminated; or if placed in a basic (>7) environment, especially in the presence of metal ions mixtures with combustible materials may result in spontaneous combustion or may be impact- or heat- sensitive - evaporation or drying on towels or mop may cause a fire. reacts violently with reducing agents, alcohols, ammonia, carboxylic acids, acetic acid, cobalt oxides, copper(II) chloride, ethers, metal powder, permanganates, acetone, benzenesulfonic anhydride, 1,1-dimethylhydrazine, dimethylphenylphosphine, gadolinium hydroxide, hydrogen selenide, iron oxides, lithium tetrahydroaluminate, magnesium tetrahydroaluminate, manganese(II) oxide, mercury oxide, methyl hydrazine, nickel monoxide, nitrogenous bases, osmium tetraoxide, alpha-phenylselenoketones, phosphorus, phosphorus(V) oxide, quinoline, tetrahydrothiophene, tin(II) chloride, thiodiglycol, thiophane, tin(II) chloride, unsaturated organic compounds, readily oxidisable and combustible materials; avoid contact with combustibles including lubricants and graphite reacts with cobalt, copper and its alloys, chromium, iridium, iron, lead, manganese, Monel, osmium, palladium, platinum, gold, silver, and other catalytic metals, metal oxides and salts - avoid metallic bowls and stirrers. violent catalytic decomposition will occur in contact with certain metals such as iron, copper, chromium, brass, bronze, lead, silver, manganese or their salt			

SECTION 8 Exposure controls / personal protection

None known

Control parameters

Chemwatch: 6074-27 Version No: 9.1

Page 5 of 12 Hydrogen peroxide 6% (20 vol)

Issue Date: **10/03/2023**Print Date: **19/01/2024**

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	hydrogen peroxide	Hydrogen peroxide	1 ppm / 1.4 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	Orthophosphoric Acid	Phosphoric acid	1 mg/m3	3 mg/m3	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
hydrogen peroxide	Not Available	Not Available	Not Available
phenacetin	7.3 mg/m3	80 mg/m3	330 mg/m3
Orthophosphoric Acid	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
hydrogen peroxide	75 ppm	Not Available
phenacetin	Not Available	Not Available
Orthophosphoric Acid	1,000 mg/m3	Not Available
Distilled Water	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
phenacetin	D > 0.01 to ≤ 0.1 mg/m³	
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

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:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

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.

Figure 2 Employees exposed to confirmed human carcinogens should be authorized to do so by the employer, and work in a regulated area.

Individual protection measures, such as personal protective equipment









Eye and face protection

When handling very small quantities of the material eye protection may not be required.

For laboratory, larger scale or bulk handling or where regular exposure in an occupational setting occurs:

- ► Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent]
- Face shield. Full face shield may be required for supplementary but never for primary protection of eyes.
- 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

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.

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.

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.

Suitability and durability of glove type is dependent on usage.

Hands/feet protection

- Rubber gloves (nitrile or low-protein, powder-free latex, latex/ nitrile). Employees allergic to latex gloves should use nitrile gloves in preference.
- Double gloving should be considered.
- PVC gloves.
- Change gloves frequently and when contaminated, punctured or torn.
- ▶ Wash hands immediately after removing gloves.
- Protective shoe covers. [AS/NZS 2210]
- Head covering.
- Where hydrogen peroxide exposure may occur do NOT wear PVA gloves.
- ▶ DO NOT use leather or cotton gloves, leather shoes as spill may cause fire.
- Care: Effects may be delayed.
- Hand cream offers no protection for hydrogen peroxide and should not be used.

Body protection

See Other protection below

Other protection

- Employees working with confirmed human carcinogens should be provided with, and be required to wear, clean, full body protective clothing (smocks, coveralls, or long-sleeved shirt and pants), shoe covers and gloves prior to entering the regulated area. [AS/NZS ISO 6529:2006 or national equivalent]
- Employees engaged in handling operations involving carcinogens should be provided with, and required to wear and use half-face filter-type respirators with filters for dusts, mists and fumes, or air purifying canisters or cartridges. A respirator affording higher levels of protection may

Version No: 9.1

Hydrogen peroxide 6% (20 vol)

Issue Date: 10/03/2023
Print Date: 19/01/2024

be substituted. [AS/NZS 1715 or national equivalent]

- Emergency deluge showers and eyewash fountains, supplied with potable water, should be located near, within sight of, and on the same level with locations where direct exposure is likely.
- Prior to each exit from an area containing confirmed human carcinogens, employees should be required to remove and leave protective clothing and equipment at the point of exit and at the last exit of the day, to place used clothing and equipment in impervious containers at the point of exit for purposes of decontamination or disposal. The contents of such impervious containers must be identified with suitable labels. For maintenance and decontamination activities, authorized employees entering the area should be provided with and required to wear clean, impervious garments, including gloves, boots and continuous-air supplied hood.
- Prior to removing protective garments the employee should undergo decontamination and be required to shower upon removal of the garments and hood.
- For quantities up to 500 grams a laboratory coat may be suitable.
- For quantities up to 1 kilogram a disposable laboratory coat or coverall of low permeability is recommended. Coveralls should be buttoned at collar and cuffs.
- For quantities over 1 kilogram and manufacturing operations, wear disposable coverall of low permeability and disposable shoe covers.
- For manufacturing operations, air-supplied full body suits may be required for the provision of advanced respiratory protection.
- ▶ Eye wash unit.
- Ensure there is ready access to an emergency shower.
- ► For Emergencies: Vinyl suit

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:

Hydrogen peroxide 6% (20 vol)

Material	СРІ
NEOPRENE	A
BUTYL	С
NAT+NEOPR+NITRILE	С
NATURAL RUBBER	С
NATURAL+NEOPRENE	С
NEOPRENE/NATURAL	С
NITRILE	С
NITRILE+PVC	С
PE	С
PVA	С
PVC	С
SARANEX-23	С
VITON	С

^{*} CPI - Chemwatch Performance Index

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 B-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	B-AUS P2	-	B-PAPR-AUS / Class 1 P2
up to 50 x ES	-	B-AUS / Class 1 P2	-
up to 100 x ES	-	B-2 P2	B-PAPR-2 P2 ^

^ - Full-face

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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Clear, colourless liquid; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.02
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 (°C)	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)	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

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

Version No: 9.1

Hydrogen peroxide 6% (20 vol)

Issue Date: **10/03/2023**Print Date: **19/01/2024**

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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 Applicable	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Reactivity	See Section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur. Solutions of hydrogen peroxide slowly decompose, releasing oxygen, and so are often stabilised by the addition of acetanilide, etc.
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

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Inhaled	The material is not thought to produce respiratory irritation (as classified by EC Directives using animal models). Nevertheless inhalation of vapours, fumes or aerosols, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress. 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. Inhaling excessive levels of mist may result in headache, dizziness, vomiting, diarrhoea, irritability, sleeplessness and fluid in the lungs, and cause extreme irritation of the nose and chest, cough, discomfort, shortness of breath and inflammation of the nose and throat. Whole-body effects of hydrogen peroxide poisoning include tremor, numbness of the limbs, convulsions, coma and shock. Hydrogen peroxide has poor warning properties.
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual. Hydrogen peroxide may cause blistering and bleeding from the throat and stomach. When swallowed, it may release large quantities of oxygen which could hyper-distend the stomach and gut and may cause internal bleeding, mouth and throat burns and rupture of the gut. There may also be fever, nausea, foaming at the mouth, vomiting, chest and stomach pain, loss of consciousness, and movement disorders and death. Large amounts can also cause cessation of breath, dizziness, headache, tremors weakness or numbness in the extremities and convulsions. Hydrogen peroxide concentrate is corrosive and must not be taken undiluted.
Skin Contact	This material can cause inflammation of the skin on contact in some persons. The material may accentuate any pre-existing dermatitis condition Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions. 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. Hydrogen peroxide is used topically as dental gel and to clean minor wounds. It may cause dose dependent effect on the skin including bleaching, blistering, reddening and corrosion (at >50% concentration).
Eye	This material can cause eye irritation and damage in some persons. Hydrogen peroxide concentrations above 10% are corrosive to the eye and may cause corneal ulceration even days after exposure.
Chronic	There is sufficient evidence to suggest that this material directly causes cancer in humans. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Hydrogen peroxide as a human food additive is generally regarded as safe, when used with certain limitations. In experimental animals hydrogen peroxide given by mouth causes damage to the teeth, liver, kidney, stomach and bowel. Inhalation exposure to hydrogen peroxide caused skin irritation, sneezing and death in animals. Skin irritation, sneezing, excessive secretion of tears, and whitening of the hair was also seen in animals chronically exposed to hydrogen peroxide.

Hydrogen peroxide 6% (20	TOXICITY	IRRITATION
vol)	Not Available	Not Available
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >2000 mg/kg ^[1]	Not Available
hydrogen peroxide	Inhalation(Mouse) LC50; 2800 mg/L4h ^[2]	
	Oral (Rat) LD50: >225 mg/kg ^[2]	
	TOXICITY	IRRITATION
phenacetin	Oral (Rat) LD50: 3600 mg/kg ^[2]	Not Available
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >1260 mg/kg ^[2]	Eye (rabbit): 119 mg - SEVERE [Monsanto]*
Orthophosphoric Acid	Inhalation(Rat) LC50: 0.026 mg/L4h ^[2]	Eye: adverse effect observed (irritating) ^[1]
	Oral (Rat) LD50: 1530 mg/kg ^[2]	Skin (rabbit):595 mg/24h - SEVERE
		Skin: adverse effect observed (corrosive) ^[1]

Hydrogen peroxide 6% (20 vol)

Issue Date: **10/03/2023**Print Date: **19/01/2024**

Distilled Water

TOXICITY IRRITATION

Oral (Rat) LD50: >90000 mg/kg^[2] Not Available

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

HYDROGEN PEROXIDE

PHENACETIN

Exposure to hydrogen peroxide via the skin or oral route can produce toxic effects. Animal studies have shown evidence of damage to the kidney, gut, thymus and liver. Stomach and intestinal lesions including benign and malignant cancers have been observed in mice. It may produce genetic and developmental defects but no reproductive toxicity was reported in mice.

The substance is classified by IARC as Group 3:

NOT classifiable as to its carcinogenicity to humans.

Evidence of carcinogenicity may be inadequate or limited in animal testing.

The following information refers to contact allergens as a group and may not be specific to this product.

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.

Accumulated studies have proved that non-steroidal anti-inflammatory drugs (NSAIDs) which block inflammation by their actions on arachidonic acid (AA) metabolism have a potential role in cancer chemotherapy and chemoprevention.

There is a general acceptance that NSAIDs induce colon cancer in humans. One suggested reason is that the balance between COX and lipoxygenase (LOX) activity determines tumorigenesis critically. Under low COX activity, arachidonic acid released from cell membranes in response to external stimuli is preferentially metabolized by LOX enzymes. The oxygenated lipids (metabolites) produced by LOXs initiate subsequent biological reactions, activate cellular signaling mechanisms through specific cell surface receptors, or are further metabolized into potent lipid mediators.

There is evidence that a 15-LOX metabolite 13S-HPODE (13S-hydroperoxyoctadecaenoic acid) generated from linoleic acid induces apoptosis in colon cancer.

Ingestion of aspirin or other NSAIDs may elicit respiratory, nasal, and gastrointestinal symptoms, as well as dermal changes in a subset of patients with asthma. The sensitivity to cyclooxygenase (COX) inhibitors has led to the hypothesis that NSAIDs may be causing upregulation of the 5-lipoxygenase pathway and its attendant products, the leukotrienes, in these patients. It has been shown increase in urinary leukotriene E 4 (LTE4) after aspirin ingestion or inhalation of lysine-aspirin in aspirin-sensitive patients with asthma. It has also been demonstrated that pharmacologic blockade at the level of the cysteinyl leukotriene receptor(s) can blunt the bronchospastic response to aspirin. Cysteinyl leukotrienes are potent bronchoconstrictors, induce mucus secretion, and increase vascular permeability. Importantly, inhibition of 5-lipoxygenase blocks not only the respiratory but also the gastrointestinal and dermal reactions to aspirin in aspirin-sensitive patients with asthma. Although these results establish the importance of 5-lipoxygenase products in mediating reactions to aspirin, the cellular source and mechanism of release of these mediators remain unclear.

Mast cells, which are a known source of leukotrienes, are activated in the nasal response to aspirin as demonstrated by the detection of nasal tryptase after aspirin challenge. Tryptase is an enzyme specific to mast cells and is an indicator of mast cell activation.

For 4-acetamidophenol (paracetamol, acetaminophen)

Gastrointestinal adverse effects such as nausea and abdominal pain are common, and their frequency is similar to that of ibuprofen. Increase in risk-taking behavior is possible. According to the US Food and Drug Administration, the drug may cause rare and possibly fatal skin reactions such as Stevens—Johnson syndrome and toxic epidermal necrolysis, although an analysis of the French Pharmacovigilance Database indicated no obvious risk of these reactions.

In clinical trials for osteoarthritis, the number of participants reporting adverse effects were similar for those on paracetamol and on placebo. However, the abnormal liver function tests (meaning there was some inflammation or damage to the liver) were almost four times more likely in those on paracetamol, although the clinical importance of this effect is uncertain. After 13 weeks of paracetamol therapy for knee pain, a drop in hemoglobin level indicating gastrointestinal bleeding was observed in 20% of participants, this rate being similar to ibuprofen group. Due to the absence of controlled studies, most of the information about the long-term safety of paracetamol comes from observational studies. These indicate a consistent pattern of increased mortality as well as cardiovascular (stroke, myocardial infarction), gastrointestinal (ulcers, bleeding) and renal adverse effects with increased dose of paracetamol. Use of paracetamol is associated with 1.9 times higher risk of peptic ulcer. Those who take it regularly at a higher dose (more than 2–3 g daily) are at much higher risk (3.6–3.7 times) of gastrointestinal bleeding and other bleeding events.

Pain medication containing phenacetin *causes cancer in humans*. There have been many reports of cancer of the kidney and urinary tract in patients who used large amounts of these drugs. The risk increases with dose. In animals, phenacetin given combined with caffeine seemed to cause liver cancer. It is unclear whether phenacetin causes genetic damage or mutations in humans.

WARNING: This substance has been classified by the IARC as Group 1: CARCINOGENIC TO HUMANS.

ORTHOPHOSPHORIC ACID

phosphoric acid (85%) For acid mists, aerosols, vapours

Test results suggest that eukaryotic cells are susceptible to genetic damage when the pH falls to about 6.5. Cells from the respiratory tract have not been examined in this respect. Mucous secretion may protect the cells of the airway from direct exposure to inhaled acidic mists (which also protects the stomach lining from the hydrochloric acid secreted there).

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause severe 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. Repeated exposures may produce severe ulceration.

HYDROGEN PEROXIDE & ORTHOPHOSPHORIC ACID & DISTILLED WATER

No significant acute toxicological data identified in literature search.

HYDROGEN PEROXIDE & ORTHOPHOSPHORIC ACID

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.

Acute Toxicity	✓	Carcinogenicity	✓
Skin Irritation/Corrosion	✓	Reproductivity	×

Chemwatch: **6074-27**Version No: **9.1**

Page 9 of 12

Hydrogen peroxide 6% (20 vol)

Issue Date: **10/03/2023**Print Date: **19/01/2024**

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

Legend:

X − Data either not available or does not fill the criteria for classification
 ✓ − Data available to make classification

SECTION 12 Ecological information

Toxicity

Hydrogen peroxide 6% (20 vol)	Endpoint	Test Duration (hr)	Specie	es		Value	Source
	Not Available	Not Available	Not Av	ailable		Not Available	Not Availabl
	Endpoint	Test Duration (hr)	Spec	cies		Value	Sourc
	EC50	72h	Algae	e or other aquatic plants		0.69mg/l	4
1	EC50	48h	Crus	tacea		2mg/l	2
hydrogen peroxide	EC50	96h	Algae	e or other aquatic plants		2.27mg/l	4
	NOEC(ECx)	72h	Algae	e or other aquatic plants		0.1mg/l	1
	LC50	96h	Fish			16.4mg/l	2
	Endpoint	Test Duration (hr)	Speci	ies		Value	Source
phenacetin	BCF	1008h	Fish			<3	7
	EC10(ECx)	48h	Algae	or other aquatic plants		29-58mg/l	4
	Endpoint	Test Duration (hr)	Species		Value	е	Source
	EC50	72h	Algae or o	other aquatic plants	77.9r	mg/l	2
Orthophosphoric Acid	EC50	48h	Crustacea	a	>100	mg/l	2
	LC50	96h	Fish		67.94	1-113.76mg/L	4
	NOEC(ECx)	72h	Algae or o	other aquatic plants	<7.5	mg/l	2
	Endpoint	Test Duration (hr)	Specie	es		Value	Source
Distilled Water	Not Available	Not Available	Not Av	ailable		Not Available	Not Availab

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
hydrogen peroxide	LOW	LOW
phenacetin	LOW (Half-life = 56 days)	LOW (Half-life = 0.35 days)
Orthophosphoric Acid	HIGH	HIGH
Distilled Water	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
hydrogen peroxide	LOW (LogKOW = -1.571)
phenacetin	LOW (BCF = 30)
Orthophosphoric Acid	LOW (LogKOW = -0.7699)

Mobility in soil

Ingredient	Mobility
hydrogen peroxide	LOW (KOC = 14.3)
phenacetin	LOW (KOC = 50.03)
Orthophosphoric Acid	HIGH (KOC = 1)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal

- ► Containers may still present a chemical hazard/ danger when empty.
- ▶ Return to supplier for reuse/ recycling if possible.

Hydrogen peroxide 6% (20 vol)

Issue Date: **10/03/2023**Print Date: **19/01/2024**

Otherwise:

- 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.

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.

A Hierarchy of Controls seems to be common - the user should investigate:

- ▶ Reduction
- ► Reuse
- Recycling
- Disposal (if all else fails)

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.

- ▶ 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.
- 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.
- Dispose of 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	Not Applicable

Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

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

Not Applicable

14.7.2. Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
hydrogen peroxide	Not Available
phenacetin	Not Available
Orthophosphoric Acid	Not Available
Distilled Water	Not Available

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
hydrogen peroxide	Not Available
phenacetin	Not Available
Orthophosphoric Acid	Not Available
Distilled Water	Not Available

SECTION 15 Regulatory information

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

hydrogen peroxide is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

 $\label{thm:constraints} \mbox{Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule \ 5 \ \mbox{Constraints} \ \ \mbox{Constrai$

 $\label{eq:australia} \textbf{Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule \ 6}$

Australian Inventory of Industrial Chemicals (AIIC)

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Not Classified as Carcinogenic

phenacetin is found on the following regulatory lists

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4

Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

FEI Equine Prohibited Substances List - Banned Substances

FEI Equine Prohibited Substances List (EPSL)

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 1: Carcinogenic to humans

Version No: 9.1

Hydrogen peroxide 6% (20 vol)

Issue Date: 10/03/2023 Print Date: 19/01/2024

International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

Orthophosphoric Acid is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

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

Australian Inventory of Industrial Chemicals (AIIC)

Distilled Water is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

Additional Regulatory Information

Not Applicable

National Inventory Status

National inventory Status	
National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (hydrogen peroxide; phenacetin; Orthophosphoric Acid; Distilled Water)
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	No (phenacetin)
Vietnam - NCI	Yes
Russia - FBEPH	No (phenacetin)
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	10/03/2023	
Initial Date	03/05/2006	

SDS Version Summary

Version	Date of Update	Sections Updated
8.1	10/12/2021	Classification change due to full database hazard calculation/update.
9.1	10/03/2023	Classification change due to full database hazard calculation/update.

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
- ES: Exposure Standard
- 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
- DNEL: Derived No-Effect Level
- ▶ PNEC: Predicted no-effect concentration
- ► AIIC: Australian Inventory of Industrial Chemicals
- ▶ DSL: Domestic Substances List
- ▶ NDSL: Non-Domestic Substances List
- ▶ IECSC: Inventory of Existing Chemical Substance in China

Chemwatch: 6074-27 Page 12 of 12 Issue Date: 10/03/2023 Version No: 9.1 Print Date: 19/01/2024

Hydrogen peroxide 6% (20 vol)

- EINECS: European INventory of Existing Commercial chemical Substances
 ELINCS: European List of Notified Chemical Substances
- ► NLP: No-Longer Polymers
- ► ENCS: Existing and New Chemical Substances Inventory
- KECI: Korea Existing Chemicals Inventory
 NZIoC: New Zealand Inventory of Chemicals
- ▶ PICCS: Philippine Inventory of Chemicals and Chemical Substances
- ► TSCA: Toxic Substances Control Act
- ► TCSI: Taiwan Chemical Substance Inventory
- ▶ INSQ: Inventario Nacional de Sustancias Químicas
- ► NCI: National Chemical Inventory
- ▶ FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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