

POTASSIUM BIFLUORIDE ALPHA CHEMICALS PTY LTD

Chemwatch: 1811-1

Chemwatch Hazard Alert Code: 3

Issue Date: 23/12/2022 Print Date: 22/01/2024 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	POTASSIUM BIFLUORIDE
Chemical Name	Not Available
Synonyms	KHF2; potassium fluoride acid; potassium bifluoride; potassium acid fluoride; hydrogen potassium fluoride; potassium hydrogen difluoride; potassium hydrogen fluoride; potassium monohydrogen difluoride
Proper shipping name	POTASSIUM HYDROGEN DIFLUORIDE SOLID
Chemical formula	F2HK
Other means of identification	Not Available
CAS number	7789-29-9

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

Relevant identified uses	Production of pure potassium fluoride; electrolyte in fluorine manufacture; frosting and etching of glass; treating coal to prevent slag formation;
	silver solder flux; catalyst in alkylation of benzene.

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

Chemwatch Hazard Ratings

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

Poisons Schedule	S7
Classification [1]	Acute Toxicity (Oral) Category 3, Skin Corrosion/Irritation Category 1B, Serious Eye Damage/Eye Irritation Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

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Hazard pictogram(s)





Signal word

Hazard statement(s)

H301	Toxic if swallowed.
H314	Causes severe skin burns and eye damage.

Precautionary statement(s) Prevention

P260	Do not breathe dust/fume.	
P264	Wash all exposed external body areas thoroughly after handling.	
P270	Do not eat, drink or smoke when using this product.	
P280	Wear protective gloves, protective clothing, eye protection and face protection.	

Precautionary statement(s) Response

P301+P310	IF SWALLOWED: Immediately call a POISON CENTER/doctor/physician/first aider.
P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting. If more than 15 mins from Doctor, INDUCE VOMITING (if conscious).
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water [or 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.
P363	Wash contaminated clothing before reuse.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.

Precautionary statement(s) Storage

P405 Store locked up.

Precautionary statement(s) Disposal

P501 Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 Composition / information on ingredients

Substances

CAS No	%[weight]	Name
7789-29-9	>98	Potassium Bifluoride

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

Mixtures

See section above for composition of Substances

SECTION 4 First aid measures

Description of first aid measures		
Eye Contact	If this product comes in contact with the eyes: 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	If there is evidence of severe skin irritation or skin burns: Avoid further contact. Immediately remove contaminated clothing, including footwear. Flush skin under running water for 15 minutes. Avoiding contamination of the hands, massage calcium gluconate gel into affected areas, pay particular attention to creases in skin. Contact the Poisons Information Centre. Continue gel application for at least 15 minutes after burning sensation ceases. If pain recurs, repeat application of calcium gluconate gel or apply every 20 minutes. If no gel is available, continue washing for at least 15 minutes, using soap if available. If patient is conscious, give six calcium gluconate or calcium carbonate tablets in water by mouth. Transport to hospital, or doctor, urgently.	
Inhalation	 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.

For massive exposures:

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If dusts, vapours, aerosols, 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. If victim is conscious, give six calcium gluconate or calcium carbonate tablets in water by mouth. ► Transport to hospital, or doctor, urgently. 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. Ingestion 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.

Indication of any immediate medical attention and special treatment needed

BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary oedema .
- Monitor and treat, where necessary, for shock.
- Where eyes have been exposed, flush immediately with water and continue to irrigate with normal saline during transport to hospital.
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool
- Skin burns should be covered with dry, sterile bandages, following decontamination.
- ▶ DO NOT attempt neutralisation as exothermic reaction may occur.

ADVANCED TREATMENT

Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.

- Positive-pressure ventilation using a bag-valve mask might be of use
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- ▶ Proparacaine hydrochloride should be used to assist eye irrigation

EMERGENCY DEPARTMENT

- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Consider endoscopy to evaluate oral injury.
- Consult a toxicologist as necessary

BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For acute or short term repeated exposures to fluorides:

- Fluoride absorption from gastro-intestinal tract may be retarded by calcium salts, milk or antacids.
- Fluoride particulates or fume may be absorbed through the respiratory tract with 20-30% deposited at alveolar level.
- Peak serum levels are reached 30 mins. post-exposure; 50% appears in the urine within 24 hours.
- For acute poisoning (endotracheal intubation if inadequate tidal volume), monitor breathing and evaluate/monitor blood pressure and pulse frequently since shock may supervene with little warning. Monitor ECG immediately; watch for arrhythmias and evidence of Q-T prolongation or T-wave changes. Maintain monitor. Treat shock vigorously with isotonic saline (in 5% glucose) to restore blood volume and enhance renal excretion
- Where evidence of hypocalcaemic or normocalcaemic tetany exists, calcium gluconate (10 ml of a 10% solution) is injected to avoid tachycardia.

BIOLOGICAL EXPOSURE INDEX - BEI

These represent the determinants observed in specimens collected from a healthy worker exposed at the Exposure Standard (ES or TLV):

Sampling Time Comments Determinant Index Fluorides in urine 3 mg/gm creatinine Prior to shift B. NS B, NS 10mg/gm creatinine End of shift

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

NS: Non-specific determinant: also observed after exposure to other exposures.

SECTION 5 Firefighting measures

Extinguishing media

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

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Fire Incompatibility	None known.	
Advice for firefighters		
Fire Fighting	 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	Non combustible. Not considered a significant fire risk, however containers may burn. Decomposition may produce toxic fumes of: hydrogen fluoride metal oxides May emit corrosive fumes.	
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	 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 contact with skin and eyes. Wear protective clothing, gloves, safety glasses and dust respirator. Use dry clean up procedures and avoid generating dust. Sweep up or Vacuum up (consider explosion-proof machines designed to be grounded during storage and use). Place in clean drum then flush area with water.
Major Spills	 Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. May be violently or explosively reactive. 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.

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

SECTION 7 Handling and storage

Precautions for safe handling	
Safe handling	 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	 Store in original containers. Keep containers securely sealed. Store in a cool, dry, well-ventilated area. Store away from incompatible materials and foodstuff containers. Protect containers against physical damage and check regularly for leaks. Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

	Lined metal can, lined metal pail/ can.
	Plastic pail.
	Polyliner drum.
Suitable container	Packing as recommended by manufact

ufacturer.

▶ Check all containers are clearly labelled and free from leaks.

For low viscosity materials

▶ Drums and jerricans must be of the non-removable head type.

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Where a can is to be used as an inner package, the can must have a screwed enclosure.

- For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.): ► Removable head packaging;
- Cans with friction closures and
- ▶ low pressure tubes and cartridges

may be used.

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.

Derivative of very electropositive metal.

Inorganic alkaline metal derivative

Salts of inorganic fluoride:

- react with water forming acidic solutions.
- re violent reactive with boron, bromine pentafluoride,bromine trifluoride, calcium disilicide, calcium hydride, oxygen difluoride, platinum, potassium
- in aqueous solutions are incompatible with sulfuric acid, alkalis, ammonia, aliphatic amines, alkanolamines, alkylene oxides, amides, epichlorohydrin, isocyanates, nitromethane, organic anhydrides, vinyl acetate
- corrode metals in presence of moisture
- may be incompatible with glass and porcelain
- Contact with acids produces toxic fumes
- Metals and their oxides or salts may react violently with chlorine trifluoride and bromine trifluoride.
- These trifluorides are hypergolic oxidisers. They ignite on contact (without external source of heat or ignition) with recognised fuels contact with these materials, following an ambient or slightly elevated temperature, is often violent and may produce ignition.
- ▶ The state of subdivision may affect the results.
- Reacts with metals producing flammable / explosive hydrogen gas
- Dangerous goods of other classes.

SECTION 8 Exposure controls / personal protection

Control parameters

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Occupational Exposure Limits (OEL)

Storage incompatibility

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	Potassium Bifluoride	Fluorides (as F)	2.5 mg/m3	Not Available	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2		TEEL-3
Potassium Bifluoride	15 mg/m3	170 mg/m3		1,000 mg/m3
Ingredient	Original IDLH		Revised IDLH	
Potassium Bifluoride	Not Available		Not Available	

Exposure 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:

Appropriate engineering controls

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.

Local exhaust ventilation usually required

Individual protection measures, such as personal protective equipment









Eve and face protection

- 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. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly

Skin protection

See Hand protection below

- ▶ Wear chemical protective gloves, e.g. PVC.
- ▶ Wear safety footwear or safety gumboots, e.g. Rubber

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.

Hands/feet protection

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

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Body protection	See Other protection below
Other protection	 Overalls. PVC Apron. PVC protective suit may be required if exposure severe. Eyewash unit. Ensure there is ready access to a safety shower.

Respiratory protection

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

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

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)

- · Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- · The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- · Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- · Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- · Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)
- · Use approved positive flow mask if significant quantities of dust becomes airborne.
- · Try to avoid creating dust conditions.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical proper	ties
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Appearance	White powder of crystals. Soluble in cold water, insoluble in alcohol (absolute), soluble in dilute alcohol. Decomposed by heat or acids, evolving HF (hydrofluoric acid fume). In presence of moisture, corrosive to glass, siliceous materials and most metals.			
Physical state	Divided Solid	Relative density (Water = 1)	2.37	
Odour	Not Available	Partition coefficient n-octanol / water	Not Available	
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable	
pH (as supplied)	Not Applicable	Decomposition temperature (°C)	Not Available	
Melting point / freezing point (°C)	Decomposes	Viscosity (cSt)	Not Applicable	
Initial boiling point and boiling range (°C)	Decomposes	Molecular weight (g/mol)	78.10	
Flash point (°C)	Not Applicable	Taste	Not Available	
Evaporation rate	Not Applicable	Explosive properties	Not Available	
Flammability	Not Applicable	Oxidising properties	Not Available	
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable	
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Applicable	
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available	
Solubility in water	Miscible	pH as a solution (1%)	< 7	
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available	

SECTION 10 Stability and reactivity

Reactivity	See section 7	
Chemical stability	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	

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SECTION 11 Toxicological information

Information on toxicological effects Inhalation of the dust may cause chills, laboured breathing, fevers, cough, inflammation and necrosis of mucous membranes, possible lung oedema (which may not be apparent for 12-24 hours), and, rarely, nasal perforation. Acute effects of fluoride inhalation include irritation of nose and throat, coughing and chest discomfort. A single acute over-exposure may even cause nose bleed. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability Inhaled if excessive concentrations of particulate are inhaled. If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may produce serious damage to the health of the individual. The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage Symptoms of poisoning may include, excess salivation, nausea, vomiting, diarrhoea, abdominal pain, lowered blood pressure, coma and death (due to the potassium ion). Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual. Ingestion Fluoride causes severe loss of calcium in the blood, with symptoms appearing several hours later including painful and rigid muscle contractions of the limbs. Cardiovascular collapse can occur and may cause death with increased heart rate and other heart rhythm irregularities Acute potassium poisoning after swallowing is rare, because vomiting usually occurs and renal excretion is fast. Potassium causes a slow, weak pulse, irregularities in heart rhythm, heart block and an eventual fall in blood pressure. In the presence of moisture (eg sweat) potassium bifluoride dissociates into potassium hydroxide and the highly corrosive hydrofluoric acid. Erythema (reddening) and pustular dermatitis have been reported. The material can produce chemical burns following direct contact with the skin. Skin contact is not thought to produce harmful health effects (as classified under EC Directives using animal models). Systemic harm, however, has been identified following exposure of animals by at least one other route and the material may still produce health damage following entry Skin Contact through wounds, lesions or abrasions Fluorides are easily absorbed through the skin and cause death of soft tissue and erode bone. Healing is delayed and death of tissue may continue to spread beneath skin. 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. The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating. Eye If applied to the eyes, this material causes severe eye damage 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. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Extended exposure to inorganic fluorides causes fluorosis, which includes signs of joint pain and stiffness, tooth discolouration, nausea and Chronic vomiting, loss of appetite, diarrhoea or constipation, weight loss, anaemia, weakness and general unwellness. There may also be frequent urination and thirst. Long term exposure to high dust concentrations may cause changes in lung function i.e. pneumoconiosis, caused by particles less than 0.5 micron penetrating and remaining in the lung. TOXICITY IRRITATION Potassium Bifluoride Not Available Not Available 1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. Value obtained from manufacturer's SDS. Unless otherwise Legend: specified data extracted from RTECS - Register of Toxic Effect of chemical Substances No significant acute toxicological data identified in literature search. 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 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. 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 POTASSIUM BIFLUORIDE 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 ×

Legend:

💢 – Data either not available or does not fill the criteria for classification

🧪 – Data available to make classification

×

×

×

×

Reproductivity

Aspiration Hazard

STOT - Single Exposure

STOT - Repeated Exposure

SECTION 12 Ecological information

Skin Irritation/Corrosion

Respiratory or Skin

sensitisation Mutagenicity ×

×

Serious Eye Damage/Irritation

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	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48h	Crustacea	97mg/l	2
Potassium Bifluoride	EC50	96h	Algae or other aquatic plants	43mg/l	2
	NOEC(ECx)	504h	Crustacea	3.7mg/l	2
	LC50	96h	Fish	51mg/l	2
Legend:	Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 4. US EPA,				
Legena:	Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan				

For Fluorides: Small amounts of fluoride have beneficial effects however; excessive intake over long periods may cause dental and/or skeletal fluorosis. Fluorides are absorbed by humans following inhalation of workplace and ambient air that has been contaminated, ingestion of drinking water and foods and dermal contact. Populations living in areas with high fluoride levels in groundwater may be exposed to higher levels of fluorides in their drinking water or in beverages prepared with the water. Among these populations, outdoor labourers, people living in hot climates, and people with excessive thirst will generally have the greatest daily intake of fluorides because they consume greater amounts of water. Atmospheric Fate: Both hydrogen fluoride and particulate fluorides will be transported in the atmosphere and deposited on land or water by wet and dry deposition. Non-volatile inorganic fluoride particulates are removed from the atmosphere via condensation or nucleation processes. Fluorides adsorbed on particulate matter in the atmosphere are generally stable and are not readily hydrolyzed, although they may be degraded by radiation if they persist in the atmosphere. Fluorine and the silicon fluorides (fluosilicates, silicofluorides) are hydrolyzed in the atmosphere to form hydrogen fluoride

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

- Bioconcentration Data 8. Vendor Data

DO NOT discharge into sewer or waterways

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air	
	No Data available for all ingredients	No Data available for all ingredients	

Bioaccumulative potential

Ingredient	Bioaccumulation	
	No Data available for all ingredients	

Mobility in soil

Ingredient	Mobility
	No Data available for all ingredients

SECTION 13 Disposal considerations

Waste treatment methods

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

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. 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. In most instances the supplier of the material should be consulted.

Product / Packaging disposal

- ▶ 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.

For small quantities:

- Cautiously dissolve in water
- ▶ Neutralise with sodium carbonate or if product does not dissolve completely add a small quantity of hydrochloric acid followed by sodium
- Add excess calcium chloride to precipitate the fluoride and/ or carbonate
- ▶ Remove solids to site approved for hazardous waste
- 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.
- Treat and neutralise at an approved treatment plant. Treatment should involve: Mixing or slurrying in water; Neutralisation 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

Version No: 9.1

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Marine Pollutant	NC
HAZCHEM	2X

Land transport (ADG)

14.1. UN number or ID number	1811		
14.2. UN proper shipping name	POTASSIUM HYDROGEN DIFLUORIDE SOLID		
14.3. Transport hazard class(es)	Class 8 Subsidiary Hazard 6.1		
14.4. Packing group	II .		
14.5. Environmental hazard	Not Applicable		
14.6. Special precautions for user	Special provisions Not Applicable Limited quantity 1 kg		

Air transport (ICAO-IATA / DGR)

14.1. UN number	1811			
14.2. UN proper shipping name	Potassium hydrogendifluoride, solid			
	ICAO/IATA Class	8		
4.3. Transport hazard class(es)	ICAO / IATA Subsidiary Hazard	6.1		
ciass(es)	ERG Code	8P		
14.4. Packing group	II			
14.5. Environmental hazard	Not Applicable			
	Special provisions		Not Applicable	
	Cargo Only Packing Instructions		863	
	Cargo Only Maximum Qty / Pack		50 kg	
14.6. Special precautions for user	Passenger and Cargo Packing Instructions		859	
usei	Passenger and Cargo Maximum Qty / Pack		15 kg	
	Passenger and Cargo Limited Quantity Packing Instructions		Y844	
	Passenger and Cargo Limited Maximum Qty / Pack		5 kg	

Sea transport (IMDG-Code / GGVSee)

14.1. UN number	1811	
14.2. UN proper shipping name	POTASSIUM HYDROGEN DIFLUORIDE, SOLID	
14.3. Transport hazard class(es)	IMDG Class IMDG Subsidiary Haz	2ard 6.1
14.4. Packing group	П	
14.5 Environmental hazard	Not Applicable	
14.6. Special precautions for user	EMS Number Special provisions Limited Quantities	F-A , S-B Not Applicable 1 kg

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
Potassium Bifluoride	Not Available

14.7.3. Transport in bulk in accordance with the IGC Code

Product name Ship Type

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Product name	Ship Type
Potassium Bifluoride	Not Available

SECTION 15 Regulatory information

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

Potassium Bifluoride 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

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

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 7

Australian Inventory of Industrial Chemicals (AIIC)

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

Additional Regulatory Information

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (Potassium Bifluoride)
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 - FBEPH	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. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	23/12/2022
Initial Date	04/10/2002

SDS Version Summary

Version Date of Update Sections Updated		Sections Updated
8.1	27/08/2019	Expiration. Review and Update
9.1	23/12/2022	Classification review due to GHS Revision change.

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

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POTASSIUM BIFLUORIDE

- ▶ 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
 ► EINECS: European INventory of Existing Commercial chemical Substances
- ▶ ELINCS: European List of Notified Chemical Substances
- NIP: No-Longer Polymers

 NIP: 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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