

CALCIUM FLUORIDE ALPHA CHEMICALS PTY LTD

Chemwatch Hazard Alert Code: 2

Issue Date: 20/06/2022 Print Date: 07/11/2024 S.GHS.AUS.EN

Chemwatch: 10630 Version No: 8.1

Safety Data Sheet according to Work Health and Safety Regulations (Hazardous Chemicals) 2023 and ADG requirements

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

Product	Identifier	

Product name	CALCIUM FLUORIDE	
Chemical Name	Not Available	
Synonyms	aF2; metspar; fluospar; fluorspar; fluorite; calcium difluoride; natural fluorite; fluorospar; Fluorspar Acid Grade: Metspar: Fluorite; Product ode: 27594; Fluorspar; Product Code: 102641 Calcium Fluoride	
Chemical formula	Ca-F2 CaF2	
Other means of identification	Not Available	
CAS number	7789-75-5	

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

Relevant identified uses	6
--------------------------	---

General laboratory reagent; flux in open hearth steel furnaces, in metal smelting and glass manufacture. Raw material for hydrogen fluoride manufacture. Ingredient in welding fluxes. Component in ceramics; in carbon electrodes, emery wheels, certain cements, optical equipment. Also a catalyst in wood preservatives.

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 number(s)	61 (0)418 237 771	+61 1800 951 288
Other emergency telephone number(s)	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 = Low
Reactivity	0		2 = Moderate
Chronic	2		3 = High 4 = Extreme

Poisons Schedule	S6
Classification [1] Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2A, Acute Toxicity - Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Singl	
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

CALCIUM FLUORIDE

Issue Date: **20/06/2022**Print Date: **07/11/2024**







Signal word

ord Warning

Hazard statement(s)

H302	Harmful if swallowed.	
H315	Causes skin irritation.	
H319	Causes serious eye irritation.	
H332	H332 Harmful if inhaled.	
H335	May cause respiratory irritation.	
H373	May cause damage to organs through prolonged or repeated exposure.	

Precautionary statement(s) Prevention

P260	Do not breathe dust/fume.	
P271	P271 Use only outdoors or in a well-ventilated area.	
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

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P337+P313	If eye irritation persists: Get medical advice/attention.	
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider if you feel unwell.	
P302+P352	ON SKIN: Wash with plenty of water.	
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.	
P330	Rinse mouth.	
P332+P313	If skin irritation occurs: Get medical advice/attention.	
P362+P364	P362+P364 Take off contaminated clothing and wash it before reuse.	

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.

SECTION 3 Composition / information on ingredients

Substances

CAS No	%[weight]	Name
7789-75-5	>85	calcium fluoride
7631-86-9	<1.5	Silica Gel
14808-60-7	<1	silica crystalline - quartz

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

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.

If skin contact occurs:

Skin Contact

Immediately remove all contaminated clothing, including footwear.

- Flush skin and hair with running water (and soap if available).
- ▶ Seek medical attention in event of irritation.

Inhalation

- 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.

Chemwatch: 10630 Page 3 of 11 Issue Date: 20/06/2022
Version No: 8.1 Print Date: 07/11/2024

CALCIUM FLUORIDE

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. ▶ IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. ▶ For advice, contact a Poisons Information Centre or a doctor. Urgent hospital treatment is likely to be needed. In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist. If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS. Ingestion Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise: ▶ INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (headdown position, if possible) to maintain open airway and prevent aspiration. NOTE: Wear a protective glove when inducing vomiting by mechanical means.

Indication of any immediate medical attention and special treatment needed

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):

DeterminantIndexSampling TimeCommentsFluorides in urine3 mg/gm creatininePrior to shiftB, NS10mg/gm creatinineEnd of shiftB, NS

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

- ▶ 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	 When silica dust is dispersed in air, firefighters should wear inhalation protection as hazardous substances from the fire may be adsorbed on the silica particles. When heated to extreme temperatures, (>1700 deg.C) amorphous silica can fuse. 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: hydrogen fluoride metal oxides May emit poisonous fumes. May emit corrosive fumes.
HAZCHEM	Not Applicable

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

- Remove all ignition sources
- Clean up all spills immediately.

Issue Date: 20/06/2022 Chemwatch: 10630 Page 4 of 11 Version No: 8.1 Print Date: 07/11/2024

CALCIUM FLUORIDE

	 Avoid contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Use dry clean up procedures and avoid generating dust. Place in a suitable, labelled container for waste disposal.
Major Spills	Moderate hazard. CAUTION: Advise personnel in area. Alert Emergency Services and tell them location and nature of hazard. Control personal contact by wearing protective clothing. Prevent, by any means available, spillage from entering drains or water courses. Recover product wherever possible. IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal.

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

SECTION 7 Handling and storage

Precautions for safe handling

Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. Prevent concentration in hollows and sumps. Safe handling ▶ **DO NOT** enter confined spaces until atmosphere has been checked. ▶ DO NOT allow material to contact humans, exposed food or food utensils. Avoid contact with incompatible materials. ▶ When handling, **DO NOT** eat, drink or smoke. Material is hygroscopic, i.e. absorbs moisture from the air. Keep containers well sealed in storage. Store in original containers. Keep containers securely sealed. Other information 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.

nditions for safe storage, including any incompatibilities

Conditions for safe storage, in	cluding any incompatibilities
Suitable container	 Polyethylene or polypropylene container. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	Salts of inorganic fluoride: react with water forming acidic solutions. react 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 Silicas: react with hydrofluoric acid to produce silicon tetrafluoride gas react with xenon hexafluoride to produce explosive xenon trioxide reacts exothermically with oxygen difluoride, and explosively with chlorine trifluoride (these halogenated materials are not commonplace industrial materials) and other fluorine-containing compounds may react with fluorine, chlorates are incompatible with strong oxidisers, manganese trioxide, chlorine trioxide, strong alkalis, metal oxides, concentrated orthophosphoric acid, vinyl acetate may react vigorously when heated with alkali carbonates. 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.

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	calcium fluoride	Fluorides (as F)	2.5 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	Silica Gel	Silica - Amorphous: Precipitated silica	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	Silica Gel	Silica - Amorphous: Silica gel	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	Silica Gel	Precipitated silica	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	Silica Gel	Diatomaceous earth (uncalcined)	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	Silica Gel	Fumed silica (respirable dust)	2 mg/m3	Not Available	Not Available	Not Available

Page 5 of 11

Chemwatch: 10630 Version No: 8.1

CALCIUM FLUORIDE

Issue Date: 20/06/2022 Print Date: 07/11/2024

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	Silica Gel	Silica - Amorphous: Fume (thermally generated)(respirable dust)	2 mg/m3	Not Available	Not Available	(e) Containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	Silica Gel	Silica - Amorphous: Fumed silica (respirable dust)	2 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	Silica Gel	Silica gel	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	Silica Gel	Silica - Amorphous: Diatomaceous earth (uncalcined)	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	silica crystalline - quartz	Silica - Crystalline: Quartz (respirable dust)	0.05 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	silica crystalline - quartz	Quartz (respirable dust)	0.05 mg/m3	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
calcium fluoride	250 mg/m3	Not Available
Silica Gel	3,000 mg/m3	Not Available
silica crystalline - quartz	25 mg/m3 / 50 mg/m3	Not Available

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.

Local exhaust ventilation usually required

Individual protection measures, such as personal protective equipment











Eye and face protection

Safety glasses with side shields Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent]

• 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

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.

Gloves should be examined for wear and/ or degradation constantly.

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- polvchloroprene.
- nitrile rubber.
- butyl rubber.
- fluorocaoutchouc.
- polyvinyl chloride.

Body protection

Hands/feet protection

See Other protection below

Other protection

- Overalls.
- P.V.C apron.
- Barrier cream. Skin cleansing cream.
- Eye wash unit.

Respiratory protection

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*	-

Page 6 of 11 CALCIUM FLUORIDE

Issue Date: 20/06/2022 Print Date: 07/11/2024

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)

If inhalation risk above the TLV exists, wear approved dust respirator.

Use respirators with protection factors appropriate for the exposure level.

- ▶ Up to 5 X TLV, use valveless mask type; up to 10 X TLV, use 1/2 mask dust respirator
- ▶ Up to 50 X TLV, use full face dust respirator or demand type C air supplied respirator
- ▶ Up to 500 X TLV, use powered air-purifying dust respirator or a Type C pressure demand supplied-air respirator
- Over 500 X TLV wear full-face self-contained breathing apparatus with positive pressure mode or a combination respirator with a Type C positive pressure supplied-air full-face respirator and an auxiliary self-contained breathing apparatus operated in pressure demand or other positive pressure mode
- 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 properties

Appearance	White to light grey to brown odourless solid (fine powo ammonium salts. Mohs hardness 4. Heat of Vapourisa Material is hygroscopic, absorbs moisture from surrou	ation: 335 kJ/mol Index of Refraction	
Physical state	Divided Solid	Relative density (Water = 1)	3.18 @ 20 C
Odour	Not Available	Partition coefficient n-octanol / water	Not Available

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)	1350-1423	Viscosity (cSt)	Not Applicable
Initial boiling point and boiling range (°C)	2513	Molecular weight (g/mol)	78.08 pure
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 Available
Vapour pressure (kPa)	Negligible	Gas group	Not Available
Solubility in water	Partly miscible	pH as a solution (1%)	8-9
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available
Heat of Combustion (kJ/g)	Not Available	Ignition Distance (cm)	Not Available
Flame Height (cm)	Not Available	Flame Duration (s)	Not Available
Enclosed Space Ignition Time Equivalent (s/m3)	Not Available	Enclosed Space Ignition Deflagration Density (g/m3)	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

SECTION 11 Toxicological information

Information on toxicological effects

Inhaled

Symptoms may include burning sensation, coughing, difficulty in breathing, laryngitis, headache, nausea. May cause heart disturbances, possibly leading to cardiac arrest and death. May cause hyperactive reflexes and muscle spasm. May produce respiratory arrest. Inhalation of dusts, generated by the material, during the course of normal handling, may be harmful.

The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage.

Chemwatch: 10630 Page 7 of 11 Issue Date: 20/06/2022 Version No: 8.1 Print Date: 07/11/2024

CALCIUM FLUORIDE

Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability 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 Acute silicosis occurs under conditions of extremely high silica dust exposure particularly when the particle size of the dust is small. The disease is rapidly progressive and spreads widely through the lungs within months of the initial exposure and causing death within 1 to 2 vears. Acute effects of fluoride inhalation include irritation of nose and throat, coughing and chest discomfort. A single acute over-exposure may Swallowing may cause a burning sensation, with coughing, nausea, vomiting; the low solubility of calcium fluoride means it is of low toxicity. Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. 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 This material can cause inflammation of the skin on contact in some persons. The material may accentuate any pre-existing dermatitis condition Repeated exposure may cause skin cracking, flaking or drying following normal handling and use. Skin Contact Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. 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. Eve This material can cause eye irritation and damage in some persons. The fluorosis hazard of inorganic fluorides is low due due to relative insolubility in body fluids of calcium fluoride. Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. 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. There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Crystalline silicas activate the inflammatory response of white blood cells after they injure the lung epithelium. Chronic exposure to crystalline silicas reduces lung capacity and predisposes to chest infections 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. Chronic Extended exposure to inorganic fluorides causes fluorosis, which includes signs of joint pain and stiffness, tooth discolouration, nausea and vomiting, loss of appetite, diarrhoea or constipation, weight loss, anaemia, weakness and general unwellness. There may also be frequent urination and thirst Overexposure to the breathable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may include decreased vital lung capacity and chest infections. Repeated exposures in the workplace to high levels of fine-divided dusts may produce a condition known as pneumoconiosis, which is the lodgement of any inhaled dusts in the lung, irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50000 inch) are present. Lung shadows are seen in the Xray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion, increased chest expansion, weakness and weight loss. As the disease progresses, the cough produces stringy phlegm, vital capacity decreases further, and shortness of breath becomes more severe. Other signs or symptoms include changed breath sounds, reduced oxygen uptake during exercise, emphysema and rarely, pneumothorax (air in the lung cavity). Chronic lung disease has been observed in fluorspar miners with calcium fluoride thought to accentuate the known effect of silica. For personnel habitually exposed to the dust, annual measurement of urinary fluoride is recommended. TOXICITY IRRITATION dermal (rat) LD50: >905 mg/kg^[1] Eye: no adverse effect observed (not irritating)^[1] CALCIUM FLUORIDE Inhalation (Rat) LC50: 0.29 mg/l4h^[1] Skin: no adverse effect observed (not irritating) $^{[1]}$ Oral (Rat) LD50: 101 mg/kg^[1] 1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. Value obtained from manufacturer's SDS. Unless otherwise Leaend: specified data extracted from RTECS - Register of Toxic Effect of chemical Substances 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 CALCIUM FLUORIDE 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 Reports indicate high/prolonged exposures to amorphous silicas induced lung fibrosis in experimental animals; in some experiments these effects were reversible. [PATTYS] For silica amorphous: Derived No Adverse Effects Level (NOAEL) in the range of 1000 mg/kg/d. In humans, synthetic amorphous silica (SAS) is essentially non-toxic by mouth, skin or eyes, and by inhalation. Epidemiology studies show little evidence of adverse health effects due to SAS. Repeated exposure (without personal protection) may cause mechanical irritation of the eye and drying/cracking of the skin. When experimental animals inhale synthetic amorphous silica (SAS) dust, it dissolves in the lung fluid and is rapidly eliminated. If swallowed, SILICA GEL the vast majority of SAS is excreted in the faeces and there is little accumulation in the body. Following absorption across the gut, SAS is eliminated via urine without modification in animals and humans. SAS is not expected to be broken down (metabolised) in mammals. After ingestion, there is limited accumulation of SAS in body tissues and rapid elimination occurs. Intestinal absorption has not been calculated, but appears to be insignificant in animals and humans. SASs injected subcutaneously are subjected to rapid dissolution and 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. SILICA CRYSTALLINE -WARNING: For inhalation exposure ONLY: This substance has been classified by the IARC as Group 1: CARCINOGENIC TO HUMANS QUART7

Chemwatch: 10630 Page 8 of 11

CALCIUM FLUORIDE

Issue Date: **20/06/2022**Print Date: **07/11/2024**

The International Agency for Research on Cancer (IARC) has classified occupational exposures to **respirable** (<5 um) crystalline silica as being carcinogenic to humans. This classification is based on what IARC considered sufficient evidence from epidemiological studies of humans for the carcinogenicity of inhaled silica in the forms of quartz and cristobalite. Crystalline silica is also known to cause silicosis, a non-cancerous lung disease.

Intermittent exposure produces; focal fibrosis, (pneumoconiosis), cough, dyspnoea, liver tumours.

* Millions of particles per cubic foot (based on impinger samples counted by light field techniques).

NOTE: the physical nature of quartz in the product determines whether it is likely to present a chronic health problem. To be a hazard the material must enter the breathing zone as respirable particles.

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:

X - Data either not available or does not fill the criteria for classification

🐓 – Data available to make classification

SECTION 12 Ecological information

Toxicity

Version No: 8.1

	Endpoint	Test Duration (hr)	Species	Value	Sourc
	EC50	72h	Algae or other aquatic plants	>100mg/l	2
	EC50	48h	Crustacea	97mg/l	2
CALCIUM FLUORIDE	LC50	96h	Fish	>=10.4<=150mg/l	2
	EC50	96h	Algae or other aquatic plants	43mg/l	2
	NOEC(ECx)	504h	Crustacea	3.7mg/l	2

•

Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 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

For Silica:

Environmental Fate: Most documentation on the fate of silica in the environment concerns dissolved silica, in the aquatic environment, regardless of origin, (man-made or natural), or structure, (crystalline or amorphous).

Terrestrial Fate: Silicon makes up 25.7% of the Earth's crust, by weight, and is the second most abundant element, being exceeded only by oxygen. Silicon is not found free in nature, but occurs chiefly as the oxide and as silicates. Once released into the environment, no distinction can be made between the initial forms of silica.

Aquatic Fate: At normal environmental pH, dissolved silica exists exclusively as monosilicic acid. At pH 9.4, amorphous silica is highly soluble in water. Crystalline silica, in the form of quartz, has low solubility in water. Silicic acid plays an important role in the biological/geological/chemical cycle of silicon, especially in the ocean.

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.

DO NOT discharge into sewer or waterways

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
Silica Gel	LOW	LOW

Bioaccumulative potential

p		
Ingredient	Bioaccumulation	
Silica Gel	LOW (LogKOW = 0.5294)	

Mobility in soil

Ingredient	Mobility	
Silica Gel	LOW (Log KOC = 23.74)	

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.

Otherwise:

- b 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

CALCIUM FLUORIDE

Issue Date: 20/06/2022 Print Date: 07/11/2024

- 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.

• 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 carbonate
- Add excess calcium chloride to precipitate the fluoride and/ or carbonate
- ▶ Remove solids to site approved for hazardous waste
- Recycle wherever possible or consult manufacturer for recycling options.
- Consult State Land Waste Management Authority for disposal
- Bury residue in an authorised landfill.
- Recycle containers if possible, or dispose of in an authorised landfill.

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
calcium fluoride	Not Available
Silica Gel	Not Available
silica crystalline - quartz	Not Available

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
calcium fluoride	Not Available
Silica Gel	Not Available
silica crystalline - quartz	Not Available

SECTION 15 Regulatory information

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

calcium fluoride is found on the following regulatory lists

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 3

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

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

Australian Inventory of Industrial Chemicals (AIIC)

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

Silica Gel is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Model Work Health and Safety Regulations - Hazardous chemicals (other than lead) requiring health monitoring

Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

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

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

silica crystalline - quartz is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Model Work Health and Safety Regulations - Hazardous chemicals (other than lead) requiring health monitoring

Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

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

CALCIUM FLUORIDE

Issue Date: 20/06/2022 Print Date: 07/11/2024

Not Applicable

National Inventory Status

National Inventory	Status	
Australia - AIIC / Australia Non- Industrial Use	Yes	
Canada - DSL	Yes	
Canada - NDSL	No (silica crystalline - quartz)	
China - IECSC	Yes	
Europe - EINEC / ELINCS / NLP	Yes	
Japan - ENCS	Yes	
Korea - KECI	Yes	
New Zealand - NZIoC	Yes	
Philippines - PICCS	Yes	
USA - TSCA	All chemical substances in this product have been designated as TSCA Inventory 'Active'	
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	20/06/2022
Initial Date	05/04/2005

SDS Version Summary

Version	Date of Update	Sections Updated
6.1	07/09/2008	Toxicological information - Acute Health (eye), Toxicological information - Acute Health (inhaled), Toxicological information - Acute Health (skin), Toxicological information - Acute Health (swallowed), Physical and chemical properties - Appearance, Toxicological information - Chronic Health, Hazards identification - Classification, Disposal considerations - Disposal, Exposure controls / personal protection - Engineering Control, Ecological Information - Environmental, Exposure controls / personal protection - Exposure Standard, Firefighting measures - Fire Fighter (exinguishing media), Firefighting measures - Fire Fighter (fire incompatibility), First Aid measures - First Aid (swallowed), Handling and storage - Handling Procedure, Stability and reactivity - Instability Condition, Exposure controls / personal protection - Personal Protection (eye), Exposure controls / personal protection - Personal Protection (eye), Exposure controls / personal protection - Personal Protection (eye), Exposure controls / personal protection - Personal Protection (eye), Exposure controls / personal protection - Personal Protection (hands/feet), Accidental release measures - Spills (major), Accidental release measures - Spills (minor), Handling and storage - Storage (storage incompatibility), Handling and storage - Storage (storage requirement), Handling and storage - Storage (suitable container), Transport information - Transport
8.1	20/06/2022	Expiration. Review and Update

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

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

Chemwatch: 10630 Page 11 of 11 Issue Date: 20/06/2022 Version No: 8.1 Print Date: 07/11/2024

CALCIUM FLUORIDE

- ► 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

This document is copyright.

Apart from any fair dealing for the purposes of private study, research, review or criticism, as permitted under the Copyright Act, no part may be reproduced by any process without written permission from CHEMWATCH.
TEL (+61 3) 9572 4700.