Auto Klene Solutions

Chemwatch: **5254-12** Version No: **6.1.1.1**

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 4

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

Product Identifier

Product name	Eraser
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (contains hydrofluoric acid)
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

Water spot remover.

Use according to manufacturer's directions.

Details of the supplier of the safety data sheet

	<u> </u>
Registered company name	Auto Klene Solutions
Address	1/83 Merrindale Drive Croydon VIC 3136 Australia
Telephone	+61 3 8761 1900
Fax	+61 3 8761 1955
Website	http://www.autoklene.com/msds/
Email	Not Available

Emergency telephone number

Association / Organisation	Auto Klene Solutions	
Emergency telephone numbers	131 126 (Poisons Information Centre)	
Other emergency telephone numbers	0800 764 766 (New Zealand Poisons Information Centre)	

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



Classification [1]

Metal Corrosion Category 1, Acute Toxicity (Oral) Category 3, Acute Toxicity (Dermal) Category 2, Acute Toxicity (Inhalation) Category 2, Skin Corrosion/Irritation Category 1A, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Germ cell mutagenicity Category 2, Specific target organ toxicity - repeated exposure Category 2

Legend:

1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)







Signal word

Danger

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Hazard statement(s)

May be corrosive to metals.
Toxic if swallowed.
Fatal in contact with skin.
Fatal if inhaled.
Causes severe skin burns and eye damage.
May cause an allergic skin reaction.
Suspected of causing genetic defects.
May cause damage to organs through prolonged or repeated exposure.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P260	Do not breathe mist/vapours/spray.
P262	Do not get in eyes, on skin, or on clothing.
P270	Do not eat, drink or smoke when using this product.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P281	Use personal protective equipment as required.

Precautionary statement(s) Response

P301+P310	IF SWALLOWED: Immediately call a POISON CENTER or doctor/physician.	
P301+P330+P331	SWALLOWED: Rinse mouth. Do NOT induce vomiting.	
P303+P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.	
P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.	
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.	
P320	Specific treatment is urgent (see advice on this label).	

Precautionary statement(s) Storage

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

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
56-81-5	<5	glycerol
68855-54-9	<5	diatomaceous earth, flux-calcined
7664-39-3	<5	hydrofluoric acid
Not Available	balance	Ingredients determined not to be hazardous

SECTION 4 First aid measures

Description of first aid measures

If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. Figure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper **Eye Contact** 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. If there is evidence of severe skin irritation or skin burns:

 ${\color{red} \blacktriangleright} \ \ \text{Avoid further contact. Immediately remove contaminated clothing, including footwear.}$

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.
- **Skin Contact** ► 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. Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema. Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs). As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested. Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered. This must definitely be left to a doctor or person authorised by him/her. ((CSC13719) For massive exposures: 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.
Ingestion	 For advice, contact a Poisons Information Centre or a doctor at once. Urgent hospital treatment is likely to be needed. If swallowed do NOT induce vomiting. If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. Observe the patient carefully. Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. Transport to hospital or doctor without delay.

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):

 Determinant
 Index
 Sampling Time
 Comments

 Fluorides in urine
 3 mg/gm creatinine
 Prior to shift
 B, NS

 10mg/gm creatinine
 End of shift
 B, NS

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

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

Following acute or short term repeated exposure to hydrofluoric acid:

- Subcutaneous injections of Calcium Gluconate may be necessary around the burnt area. Continued application of Calcium Gluconate Gel or subcutaneous Calcium Gluconate should then continue for 3-4 days at a frequency of 4-6 times per day. If a "burning" sensation recurs, apply more frequently.
- Systemic effects of extensive hydrofluoric acid burns include renal damage, hypocalcaemia and consequent cardiac arrhythmias. Monitor haematological, respiratory, renal, cardiac and electrolyte status at least daily. Tests should include FBE, blood gases, chest X-ray, creatinine and electrolytes, urine output, Ca ions, Mg ions and phosphate ions. Continuous ECG monitoring may be required.
- Where serum calcium is low, or clinical, or ECG signs of hypocalcaemia develop, infusions of calcium gluconate, or if less serious, oral Sandocal, should be given. Hydrocortisone 500 mg in a four to six hourly infusion may help.
- Antibiotics should not be given as a routine, but only when indicated.
- Fee contact pain may be excruciating and 2-3 drops of 0.05% pentocaine hydrochloride may be instilled, followed by further irrigation

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 TimeComments1. Methaemoglobin in blood1.5% of haemoglobinDuring or end of shiftB, NS, SQ

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

NS: Non-specific determinant; Also seen after exposure to other materials

SQ: Semi-quantitative determinant - Interpretation may be ambiguous; should be used as a screening test or confirmatory test.

SECTION 5 Firefighting measures

Extinguishing media

Water spray or fog.

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- ► Foam.
- Dry chemical powder.
- ► BCF (where regulations permit).
- Carbon dioxide.

Special hazards arising from the substrate or mixture

Fire Incompatibility ▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result

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.
Fire/Explosion Hazard	 Non combustible. Not considered to be a significant fire risk. Acids may react with metals to produce hydrogen, a highly flammable and explosive gas. Heating may cause expansion or decomposition leading to violent rupture of containers. May emit corrosive, poisonous fumes. May emit acrid smoke. Decomposition may produce toxic fumes of: carbon dioxide (CO2) hydrogen fluoride other pyrolysis products typical of burning organic material. May emit corrosive fumes. May emit poisonous fumes.

SECTION 6 Accidental release measures

HAZCHEM

Personal precautions, protective equipment and emergency procedures

2X

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

Conditions for safe storage, including any incompatibilities

Suitable container

Lined metal can, lined metal pail/ can.

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- Plastic pail.
- Polyliner drum
- ▶ Packing as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.

For low viscosity materials

- Drums and ierricans must be of the non-removable head type.
- ▶ Where a can is to be used as an inner package, the can must have a screwed enclosure.

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.

- ▶ Material is corrosive to most metals, glass and other siliceous materials.
- ▶ Bottles for storage of HF must have secure caps and lids that can provide a gas-tight seal to prevent escape of hydrogen fluoride gas.
- Hydrofluoric acid etches glass, due to the strong bond formed between fluoride anions and the silicon molecules in glass. Hydrofluoric acid will also react with glazes, enamels, pottery, concrete, rubber, leather, many metals (especially cast iron) and many organic compounds.
- Hydrogen gas, which may pose an explosion hazard, is generated upon reaction with metals.
- Hydrofluoric acid should not be stored in steel cylinders for more than 2 years due to potential over-pressurization from hydrogen gas formation

Salts of inorganic fluoride:

- react with water forming acidic solutions.
- are 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

Hydrogen fluoride:

- reacts violently with strong oxidisers, acetic anhydride, alkalis, 2-aminoethanol, arsenic trioxide (with generation of heat), bismuthic acid, calcium oxide, chlorosulfonic acid, cyanogen fluoride, ethylenediamine, ethyleneimine, fluorine (fluorine gas reacts vigorously with a 50% hydrofluoric acid solution and may burst into flame), nitrogen trifluoride, N-phenylazopiperidine, oleum, oxygen difluoride, phosphorus pentoxide, potassium permanganate, potassium tetrafluorosilicate(2-), beta-propiolactone, propylene oxide, sodium, sodium tetrafluorosilicate, sulfuric acid, vinyl acetate
- reacts (possibly violently) with aliphatic amines, alcohols, alkanolamines, alkylene oxides, aromatic amines, amides, ammonia, ammonium hydroxide, epichlorohydrin, isocyanates, metal acetylides, metal silicides, methanesulfonic acid, nitrogen compounds, organic anhydrides, oxides, silicon compounds, vinylidene fluoride
- attacks glass and siliceous materials, concrete, ceramics, metals (flammable hydrogen gas may be produced), metal alloys, some plastics, rubber coatings, leather, and most other materials with the exception of lead, platinum, polyethylene, wax.
- Avoid strong bases
- Avoid reaction with oxidising agents
- Dangerous goods of other classes.

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

Storage incompatibility

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	glycerol	Glycerin mist	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	hydrofluoric acid	Hydrogen fluoride (as F)	Not Available	Not Available	3 ppm / 2.6 mg/m3	Not Available

Emergency Limits

Linergondy Linito				
Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
glycerol	Glycerine (mist); (Glycerol; Glycerin)	45 mg/m3	180 mg/m3	1,100 mg/m3
hydrofluoric acid	Hydrogen fluoride; (Hydrofluoric acid)	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
glycerol	Not Available	Not Available
diatomaceous earth, flux-calcined	Not Available	Not Available
hydrofluoric acid	30 ppm	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit	
diatomaceous earth, flux-calcined	E	≤ 0.01 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

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can

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controls

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.

Personal protection









Eye and face protection

► Chemical goggles.

- 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.

Skin protection

See Hand protection below

- ▶ Wear chemical protective gloves, e.g. PVC.
- Wear safety footwear or safety gumboots, e.g. Rubber
- ▶ When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.

Hands/feet 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.

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.

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:

Eraser

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

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

Respiratory protection

Type AB-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	AB-AUS P2	-	AB-PAPR-AUS / Class 1 P2
up to 50 x ES	-	AB-AUS / Class 1 P2	-
up to 100 x ES	-	AB-2 P2	AB-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)

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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

information on basic physical and chemical properties			
Appearance	Grey paste; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.07

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Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	1-2	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	 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

	Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may produce toxic effects.
	initial and its report of actions (mine, ramos), generated by the material adming the boards of normal harding, may produce to the creater
	Corrosive acids can cause irritation of the respiratory tract, with coughing, choking and mucous membrane damage. There may be dizziness.

headache, nausea and weakness. 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.

Inhaled

Acute inhalation of hydrogen fluoride (hydrofluoric acid) vapours causes severe irritation of the eye, nose and throat, delayed fever, bluing of the extremities and water in the lungs, and may cause death. The above irritation occurs even with fairly low concentrations of hydrogen fluoride Hydrogen fluoride has a strong irritating odour, that can be detected at concentrations of about 0.04 parts per million. Higher levels cause corrosion of the throat, nose and lungs, leading to severe inflammation and water buildup in the lungs (which may occur with 1 hour of exposure). A vapour concentration of 10 parts per million is regarded as intolerable, but a vapour concentration of 30 parts per million is considered as immediately dangerous to life and health.

It is estimated that the lowest lethal concentration for a 5-minute human exposure to hydrogen fluoride is in the range of 50 to 250 parts per million. Exposure by either skin contact or inhalation may lead to low levels of calcium and magnesium in the blood, which may result in heart rhythm disturbances.

Ingestion

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.

The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.

Ingestion of acidic corrosives may produce burns around and in the mouth, the throat and oesophagus. Immediate pain and difficulties in swallowing and speaking may also be evident.

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.

Skin contact with the material may produce toxic effects; systemic effects may result following absorption.

The material can produce chemical burns following direct contact with the skin.

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

Contact of the skin with liquid hydrofluoric acid (hydrogen fluoride) may cause severe burns, erythema, and swelling, vesiculation, and serious crusting. With more serious burns, ulceration, blue-gray discoloration, and necrosis may occur. Solutions of hydrofluoric acid, as dilute as 2%, may cause severe skin burns.

Skin Contact Dermal burns may not be readily noticed or painful, unlike the warning properties of other acids. Skin contact with HF concentrations in the 20% to 50% range may not produce symptoms for one to eight hours. With concentrations less than 20%, the latency period may be up to twenty-four hours. A solution of only 1-2% HF exposed to greater than 10% of the body is fatal without medical attention; however dermal burns are not

likely immediate. Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue.

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.

If applied to the eyes, this material causes severe eye damage.

Direct eye contact with acid corrosives may produce pain, tears, sensitivity to light and burns. Mild burns of the epithelia generally recover rapidly

Animal testing showed that a 20% solution of hydrofluoric acid (hydrogen fluoride) in water caused immediate damage in the form of total

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clouding of the lens and ischaemia of the conjunctiva. Swelling of the stroma of the cornea occurred within 1 hour, followed by tissue death (necrosis) of structures of the front of the eye.

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.

Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.

Repeated or prolonged exposure to acids may result in the erosion of teeth, swelling and/or ulceration of mouth lining. Irritation of airways to lung,

Chronic with cough, and inflammation of lung tissue often occurs.

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.

Hydrogen fluoride easily penetrates the skin and causes destruction and corrosion of the bone and underlying tissue. Ingestion causes severe pains and burns in the mouth and throat and blood calcium levels are dangerously reduced.

F	TOXICITY	IRRITATION	
Eraser	Not Available	Not Available	
	TOXICITY	IRRITATION	
glycerol	dermal (guinea pig) LD50: 58.5 mg/kg ^[1]	Not Available	
	Oral(Rabbit) LD50; 0.027 mg/kg ^[2]		
diatomaceous earth,	TOXICITY	IRRITATION	
flux-calcined	Oral(Rat) LD50; >2000 mg/kg ^[1]	Not Available	
	тохісіту	IRRITATION	
hydrofluoric acid	Inhalation(Rat) LC50; 0.329 mg/L4hrs ^[1]	Eye (human): 50 mg - SEVERE	
Legend:	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		

GLYCEROL

DIATOMACEOUS FARTH.

FLUX-CALCINED

At very high concentrations, evidence predicts that glycerol may cause tremor, irritation of the skin, eyes, digestive tract and airway. Otherwise it is of low toxicity. There is no significant evidence to suggest that it causes cancer, genetic, reproductive or developmental toxicity.

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, 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.

(liver and kidney damage) [Manufacturer] for hydrogen fluoride (as vapour)

Laboratory (in vitro) and animal studies show, exposure to the material may result in a possible risk of irreversible effects, with the possibility of producing mutation.

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. 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 produce respiratory tract irritation, and result in damage to the lung including reduced lung function.

GLYCEROL & HYDROFLUORIC ACID

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

Legend:

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

Data available to make classification

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Toxicity

	Endpoint	Test Duration (hr)	Species	Value	Source
Eraser	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
glycerol	LC50	96	Fish	>11mg/L	2
	NOEL	48	Not Available	12ug/cm	4
	Endpoint	Test Duration (hr)	Species	Value	Source
diatomaceous earth, flux-calcined	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96	Fish	51mg/L	2
hydrofluoric acid	EC50	48	Crustacea	97mg/L	2
	EC50	96	Algae or other aquatic plants	43mg/L	2
	NOEL	240	Not Available	0.0022-mg/L	4
Legend:	V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US	Registered Substances - Ecotoxicological Informa EPA, Ecotox database - Aquatic Toxicity Data 5. E Japan) - Bioconcentration Data 8. Vendor Data		

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.

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

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
glycerol	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
glycerol	LOW (LogKOW = -1.76)

Mobility in soil

Ingredient	Mobility
glycerol	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.

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.
- 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: Neutralisation with soda-ash or soda-lime 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 with 5% aqueous sodium hydroxide or soda ash, followed by water. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 Transport information

Labels Required



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Marine Pollutant	NO
HAZCHEM	2X

Land transport (ADG)

UN number	3264		
UN proper shipping name	CORROSIVE LIQUID, ACIDIC, INORGANIC, N.O.S. (contains hydrofluoric acid)		
Transport hazard class(es)	Class 8 Subrisk Not Applicable		
Packing group			
Environmental hazard	Not Applicable		
Special precautions for user	Special provisions 223 274 Limited quantity 5 L		

Air transport (ICAO-IATA / DGR)

Air transport (ICAO-IATA / DGF	()			
UN number	3264			
UN proper shipping name	Corrosive liquid, acidic, i	norganic, n.o.s. * (contains hydrofluoric	cid)	
Transport hazard class(es)	ICAO/IATA Class 8 ICAO / IATA Subrisk Not Applicable ERG Code 8L			
Packing group	III			
Environmental hazard	Not Applicable			
	Special provisions		A3 A803	
	Cargo Only Packing Instructions		856	
	Cargo Only Maximum Qty / Pack		60 L	
Special precautions for user	Passenger and Cargo Packing Instructions		852	
	Passenger and Cargo Maximum Qty / Pack		5 L	
	Passenger and Cargo Limited Quantity Packing Instructions		Y841	
	Passenger and Cargo Limited Maximum Qty / Pack		1 L	

Sea transport (IMDG-Code / GGVSee)

UN number	3264		
UN proper shipping name	CORROSIVE LIQUID, AC	CIDIC, INORGANIC, N.O.S. (contains hydrofluoric acid)	
Transport hazard class(es)	IMDG Class 8 IMDG Subrisk Not A	Applicable	
Packing group	III		
Environmental hazard	Not Applicable		
Special precautions for user	Special provisions 2	F-A , S-B 223 274 5 L	

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

Not Applicable

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

•	
Product name	Group
glycerol	Not Available
diatomaceous earth, flux-calcined	Not Available
hydrofluoric acid	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
glycerol	Not Available
diatomaceous earth, flux-calcined	Not Available
hydrofluoric acid	Not Available

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SECTION 15 Regulatory information

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

glycerol is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

diatomaceous earth, flux-calcined is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

hydrofluoric 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 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 ${\bf 5}$ 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

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (glycerol; diatomaceous earth, flux-calcined; hydrofluoric acid)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (diatomaceous earth, flux-calcined)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - ARIPS	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 Other information

Revision Date	26/09/2024
Initial Date	15/05/2017

SDS Version Summary

Version	Issue Date	Sections Updated
5.1.1.1	01/11/2019	One-off system update. NOTE: This may or may not change the GHS classification
6.1.1.1	26/09/2024	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.