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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

Liquid Ammonia Test Solution #1

STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

NFPA



SUPPLIER

Company: Mars Fishcare Inc Address: 50 East Hamilton Street Chalfont PA, 18914 USA Telephone: +1 215 822 8181 Fax: +1 215 822 1906

PRODUCT USE

Ammonia test solution for product LR8600, 34 and 401M.

SYNONYMS

"Solution ID# 3335A"

Section 2 - HAZARDS IDENTIFICATION

CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW RISK Irritating to eyes.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be damaging to the health of the individual.

High oral doses of salicylates, such as aspirin, may cause a mild burning pain in the throat and stomach, causing vomiting. This is followed (within hours) by deep, rapid breathing, tiredness, nausea and further vomiting, thirst and diarrhea. The central nervous system is first stimulated, and then depression from failure occurs. Stimulation produces vomiting, hyperventilation, headache, ringing in the ears, confusion, behavior and mood changes, and generalized convulsions. Respiratory failure and cardiovascular collapse can result in death. There may also be sweating, skin eruptions, internal bleeding, kidney failure and inflamed pancreas. There may be bloody stools, purple skin spots or blood in the vomit. Many of these symptoms are due to disturbances in blood chemistry. A dose of 300 mg/kg can cause serious effects while 500 mg/kg can be lethal.

EYE

This material can cause eye irritation and damage in some persons.

Although the liquid is not thought to be an irritant, direct contact with the eye may produce transient discomfort characterized by tearing or conjunctival redness (as with windburn).

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The material is not thought to produce adverse health effects or skin irritation following contact (as classified using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.

Ēntry 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.

INHALED

The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified using animal models). Nevertheless, adverse effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

Not normally a hazard due to non-volatile nature of product.

Inhalation hazard is increased at higher temperatures.

CHRONIC HEALTH EFFECTS

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

There is some evidence that inhaling this product is more likely to cause a sensitization reaction in some persons compared to the general population.

There is limited evidence that, skin contact with this product is more likely to cause a sensitization reaction in some persons compared to the general population.

There is some evidence that human exposure to the material may result in developmental toxicity. This evidence is based on animal studies where effects have been observed in the absence of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not secondary non-specific consequences of the other toxic effects.

Chronic exposure to salicylates produce problems with metabolism, central system disturbances, or kidney damage. Those with pre-existing damage to the eye, skin or kidney are especially at risk. Hypersensitive reactions can occur, especially in people with asthma. These symptoms include itchy wheals and other skin eruptions, an inflamed nose, shortness of breath and serious narrowing of the airways (which can even cause death). Chronic exposure to parabens by skin contact, ingestion or injection can cause hypersensitive reactions. There may be cross-sensitivity between different species, so people can be develop allergic symptoms if they were sensitized by other chemicals. Symptoms include acute narrowing of the airways, hives (itchy wheal), swelling, running nose and blurred vision. There may be anaphylactic shock and rash.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS





Section 4 - FIRST AID MEASURES

SWALLOWED

- 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.
- Seek medical advice.

EYE

- 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.
- If pain persists or recurs seek medical attention.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

SKIN

- If skin contact occurs:
- Immediately remove all contaminated clothing, including footwear
- Flush skin and hair with running water (and soap if available).
- Seek medical attention in event of irritation.

INHALED

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• If fumes or combustion products are inhaled remove from contaminated area.

Other measures are usually unnecessary.

NOTES TO PHYSICIAN

Treat symptomatically. for salicylate intoxication:

- Pending gastric lavage, use emetics such as syrup of lpecac or delay gastric emptying and absorption by swallowing a slurry of activated charcoal. Do
 not give ipecac after charcoal.
- Gastric lavage with water or perhaps sodium bicarbonate solution (3%-5%). Mild alkali delays salicylate absorption from the stomach and perhaps slightly from the duodenum.
- Saline catharsis with sodium or magnesium sulfate (15-30 gm in water).
- Take an immediate blood sample for an appraisal of the patients acid-base status. A pH determination on an anaerobic sample of arterial blood is best. An analysis of the plasma salicylate concentrations should be made at the same time. Laboratory controls are almost essential for the proper management of severe salicylism.
- In the presence of an established acidosis, alkali therapy is essential, but at least in an adult, alkali should be withheld until its need is demonstrated by
 chemical analysis. The intensity of treatment depends on the intensity of acidosis. In the presence of vomiting, intravenous sodium bicarbonate is the
 most satisfactory of all alkali therapy.
- Correct dehydration and hypoglycemia (if present) by the intravenous administration of glucose in water or in isotonic saline. The administration of glucose may also serve to remedy ketosis which is often seen in poisoned children.
- Even patients without hypoglycemia, infusions of glucose adequate to produce distinct hyperglycemia are recommended to prevent glucose depletion in the brain. This recommendation is based on impressive experimental data in animals.
- Renal function should be supported by correcting dehydration and incipient shock. Overhydration is not justified. An alkaline urine should be maintained by the administration of alkali if necessary with care to prevent a severe systemic alkalosis. As long as urine remains alkaline (pH above 7.5), administration of an osmotic diuretic such as mannitol or perhaps THAM is useful, but one must be careful to avoid hypokalemia. Supplements of potassium chloride should be included in parenteral fluids
- Small doses of barbiturates, diazepam, paraldehyde, or perhaps other sedatives (but probably not morphine) may be required to suppress extreme
 restlessness and convulsions.
- For hyperpyrexia, use sponge baths.

The presence of petechiae or other signs of hemorrhagic tendency calls for large Vitamin K dose and perhaps ascorbic acid. Minor transfusions may be necessary since bleeding in salicylism is not always due to a prothrombin effect.

- Haemodialysis and hemoperfusion have proved useful in salicylate poisoning, as have peritoneal dialysis and exchange transfusions, but alkaline diuretic therapy is probably sufficient except in fulminating cases.
- [GOSSELIN, et al.: Clinical Toxicology of Commercial Products]

The mechanism of the toxic effect involves metabolic acidosis, respiratory alkalosis, hypoglycemia, and potassium depletion. Salicylate poisoning is characterized by extreme acid-base disturbances, electrolyte disturbances and decreased levels of consciousness. There are differences between acute and chronic toxicity and a varying clinical picture which is dependent on the age of the patient and their kidney function. The major feature of poisoning is metabolic acidosis due to "uncoupling of oxidative phosphorylation" which produces an increased metabolic rate, increased oxygen consumption, increased formation of carbon dioxide, increased heat production and increased utilization of glucose. Direct stimulation of the respiratory center leads to hyperventilation and respiratory alkalosis. This leads to compensatory increased glucose demand, increased glucose demand, increased respiratory center leads to impaired rate of glucose synthesis. NOTE: Tissue glucose levels may be lower than plasma levels. Hyperglycemia may occur due to increased glycogenolysis. Potassium depletion occurs as a result of increased renal excretion as well as intracellular movement of potassium. Salicylates competitively inhibit vitamin K dependent synthesis of factors II, VII, IX, X and in addition, may produce a mild dose dependent hepatitis.

Salicylates are bound to albumin. The extent of protein binding is concentration dependent (and falls with higher blood levels). This, and the effects of acidosis, decreasing ionization, means that the volume of distribution increases markedly in overdose as does CNS penetration. The extent of protein binding (50-80%) and the rate of metabolism are concentration dependent. Hepatic clearance has zero order kinetics and thus the therapeutic half-life of 2-4.5 hours but the half-life in overdose is 18-36 hours. Renal excretion is the most important route in overdose. Thus when the salicylate concentrations are in the toxic range there is increased tissue distribution and impaired clearance of the drug.

HyperTox 3.0 http://www.ozemail.com.au/-ouad/SALI0001.HTA.

Section 5 - FIRE FIGHTING MEASURES

Vapour Pressure (mmHG):	Not Available
Upper Explosive Limit (%):	Not Applicable
Specific Gravity (water=1):	1.152
Lower Explosive Limit (%):	Not Applicable

EXTINGUISHING MEDIA

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

FIRE FIGHTING

- Alert Emergency Responders 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 water delivered as a fine spray to control fire and cool adjacent area.
- Avoid spraying water onto liquid pools.

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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.

GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- Combustible.
- Slight fire hazard when exposed to heat or flame.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
- On combustion, may emit toxic fumes of carbon monoxide (CO).
- May emit acrid smoke.
- Mists containing combustible materials may be explosive.
- Combustion products include: carbon dioxide (CO2), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

May emit corrosive fumes. FIRE INCOMPATIBILITY

Avoid contamination with oxidizing agents i.e. nitrates, oxidizing acids, chlorine bleaches, pool chlorine etc. as ignition may result.

PERSONAL PROTECTION

Glasses: Safety Glasses. Chemical goggles. Gloves: PVC chemical resistant type. Respirator:

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid breathing vapors and contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb spill with sand, earth, inert material or vermiculite.
- Wipe up.
- Place in a suitable labeled container for waste disposal.

MAJOR SPILLS

Moderate hazard.

- Clear area of personnel and move upwind.
- Alert Emergency Responders and tell them location and nature of hazard.
- · Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water course.
- No smoking, naked lights or ignition sources. Increase ventilation.
- Stop leak if safe to do so.
- Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labeled containers for recycling.
- Absorb remaining product with sand, earth or vermiculite.
- Collect solid residues and seal in labeled drums for disposal.
- Wash area and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise emergency services.

ACUTE EXPOSURE GUIDELINE LEVELS (AEGL) (in ppm)

AEGL 1: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience notable discomfort, irritation, or certain asymptomatic nonsensory effects. However, the effects are not disabling and are transient and reversible upon cessation of exposure.

AEGL 2: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience irreversible or other serious, long-lasting adverse health effects or an impaired ability to escape.

AEGL 3: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience life-threatening health effects or death.

Section 7 - HANDLING AND STORAGE

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- DO NOT allow clothing wet with material to stay in contact with skin
- DO NOT USE brass or copper containers / stirrers
- 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.
- DO NOT enter confined spaces until atmosphere has been checked.
- Avoid smoking, naked lights or ignition sources.
- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- Work clothes should be laundered separately.
- Use good occupational work practice.
- Observe manufacturer's storing and handling recommendations.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.

RECOMMENDED STORAGE METHODS

- Metal can or drum
- Packing as recommended by manufacturer.
- Check all containers are clearly labeled and free from leaks.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- No smoking, naked lights or ignition sources.
- 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 storing and handling recommendations.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



X: Must not be stored together

O: May be stored together with specific preventions

+: May be stored together

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

Source	Material	TWA ppm	TWA mg/m³	STEL ppm	STEL mg/m³	Peak ppm	Peak mg/m³	TWA F/CC	Notes
US - Oregon Permissible Exposure Limits (Z3)	polyethylene glycol (Inert or Nuisance Dust: (d) Total dust)		10						*
US OSHA Permissible Exposure Levels (PELs) - Table Z3	polyethylene glycol (Inert or Nuisance Dust: (d) Respirable fraction)		5						
US OSHA Permissible Exposure Levels (PELs) - Table Z3	polyethylene glycol (Inert or Nuisance Dust: (d) Total dust)		15						
US - Hawaii Air Contaminant Limits	polyethylene glycol (Particulates not other wise regulated - Total dust)		10						
US - Hawaii Air Contaminant Limits	polyethylene glycol (Particulates not other wise regulated - Respirable fraction)		5						
US - Oregon Permissible Exposure Limits (Z3)	polyethylene glycol (Inert or Nuisance Dust: (d) Respirable fraction)		5						*
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	polyethylene glycol (Particulates not otherwise regulated Respirable fraction)		5						

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Chemwatch Material Safety Data Sheet		Revision No: 5	Chemwa
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US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants	polyethylene glycol (Particulates not otherwise regulated (PNOR)(f)- Respirable fraction)	5	
US - Michigan Exposure Limits for Air Contaminants	polyethylene glycol (Particulates not otherwise regulated, Respirable dust)	5	
The following materials had no OELs on o	our records		
 sodium salicylate: CAS:54-21-7 			
MATERIAL DATA LIQUID AMMONIA TEST SOLUTION #1: Not available POLYETHYLENE GLYCOL:			

For powdered forms: The polyethylene glycols are extremely low in oral toxicity, are not significantly irritating to the eyes or skin, and are not absorbed through the skin in toxic amounts. vapour pressures are extremely low and inhalation exposure is limited to mists. Based on experimental data and human experience, these substances do not present significant hazards to health in the workplace. SODIUM SALICYLATE:

It is the goal of the ACGIH (and other Agencies) to recommend TLVs (or their equivalent) for all substances for which there is evidence of health effects at airborne concentrations encountered in the workplace.

At this time no TLV has been established, even though this material may produce adverse health effects (as evidenced in animal experiments or clinical experience). Airborne concentrations must be maintained as low as is practically possible and occupational exposure must be kept to a minimum. NOTE: The ACGIH occupational exposure standard for Particles Not Otherwise Specified (P.N.O.S) does NOT apply.

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritants and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- cause inflammation
- cause increased susceptibility to other irritants and infectious agents
- · lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and
- acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.
- CEL TWA: 5 mg/m3 [as analogue for asprin]

PERSONAL PROTECTION



Consult your EHS staff for recommendations **EYE**

- Safety glasses with side shields.
- Chemical goggles.
- Contact lenses pose a special hazard; soft lenses may absorb irritants and all lenses concentrate them. DO NOT wear contact lenses.

HANDS/FEET

Wear chemical protective gloves, eg. PVC.

Wear safety footwear or safety gumboots, eg. Rubber.

NOTE: The material may produce skin sensitization in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: such as:

- frequency and duration of contact,
- chemical resistance of glove material,
- glove thickness and
- dexterity
- Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739).
- When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374) is recommended.
- When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374) is

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recommended.

• Contaminated gloves should be replaced.

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.

OTHER

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

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required.

Use appropriate NIOSH-certified respirator based on informed professional judgement. In conditions where no reasonable estimate of exposure can be made, assume the exposure is in a concentration IDLH and use NIOSH-certified full face pressure demand SCBA with a minimum service life of 30 minutes, or a combination full facepiece pressure demand SAR with auxiliary self-contained air supply. Respirators provided only for escape from IDLH atmospheres shall be NIOSH-certified for escape from the atmosphere in which they will be used.

ENGINEERING CONTROLS

General exhaust is adequate under normal operating conditions. If risk of overexposure exists, wear an approved respirator. Correct fit is essential to obtain adequate protection. Provide adequate ventilation in warehouse or closed storage areas. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant.	All Opeed.
solvent, vapors, degreasing etc., evaporating from tank (in still air)	0.25-0.5 m/s (50-100 f/min)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500-2000 f/min.)
Within each range the appropriate value depends on:	
Lower end of the range	Upper end of the range
1: Room air currents minimal or favorable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood - local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min.) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

L iquid

Mixes with water.			
State	Liquid	Molecular Weight	Not Applicable
Melting Range (°F)	Not Available	Viscosity	Not Available
Boiling Range (°F)	Not Available	Solubility in water (g/L)	Miscible
Flash Point (°F)	Not Applicable	pH (1% solution)	Not Available
Decomposition Temp (°F)	Not Available	pH (as supplied)	8.3

Autoignition

Vapour

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Temp Not Pressure Not (°F) Applicable (mmHG) Available Upper Specific Explosive Not Gravity 1.152 Limit Applicable (water=1) (%) Lower Relative Explosive Not Vapor Not Limit Applicable Density Available (%) (air=1) Volatile Not Evaporation Not Component Available Available Rate (%vol)

APPEARANCE

Reddish-orange liquid with a mild odour; mixes with water.

Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerization will not occur.

STORAGE INCOMPATIBILITY

Avoid reaction with oxidizing agents.

For incompatible materials - refer to Section 7 - Handling and Storage.

Section 11 - TOXICOLOGICAL INFORMATION

Liquid Ammonia Test Solution #1

TOXICITY AND IRRITATION

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

POLYETHYLENE GLYCOL:

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

TOXICITY

Oral (rat) LD50: 33750 mg/kg

IRRITATION Skin (rabbit): 500mg/24h - mild.

* AIHA WEEL Guides

Nil Reported

Eye (rabbit): 500mg/24h - mild.

for molecular weights (200-8000) *

Oral (rat) LD50: 31000->50000 mg/kg

Oral (mice) LD50: 38000->50000 mg/kg

Oral (g.pig) LD50: 17000->50000 mg/kg

Oral (rabbit) LD50: 14000->50000 mg/kg

Intraperitoneal (mice) LD50: 3100-12900 mg/kg

SODIUM SALICYLATE:

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

Oral (human) LDLo: 700 mg/kg

Oral (rat) LD50: 1200 mg/kg

Intraperitoneal (rat) LD50: 542 mg/kg

Subcutaneous (rat) LD50: 980 mg/kg

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like

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symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to

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severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. 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. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

Exposure to the material for prolonged periods may cause physical defects in the developing embryo (teratogenesis).

Section 12 - ECOLOGICAL INFORMATION

Refer to data for ingredients, which follows: SODIUM SALICYLATE: LIQUID AMMONIA TEST SOLUTION #1: DO NOT discharge into sewer or waterways. LIQUID AMMONIA TEST SOLUTION #1: POLYETHYLENE GLYCOL: BOD 5 if unstated: 0-0.02,1% COD: 1.62-1.74,98% Toxicity Fish: TLm(96)>10000mg/L SODIUM SALICYLATE:

Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
polyethylene glycol	LOW		LOW	HIGH
sodium salicylate	LOW		LOW	HIGH

Section 13 - DISPOSAL CONSIDERATIONS

Disposal Instructions

All waste must be handled in accordance with local, state and federal regulations.

DO NOT allow wash water from cleaning equipment to enter drains. Collect all wash water for treatment before disposal.

- Recycle wherever possible or consult manufacturer for recycling options.
- Consult Waste Management Authority for disposal.
- Bury or incinerate residue at an approved site.

• Recycle containers if possible, or dispose of in an authorized landfill.

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

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

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

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

Section 14 - TRANSPORTATION INFORMATION

NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS: DOT, IATA, IMDG

Section 15 - REGULATORY INFORMATION



REGULATIONS

Regulations for ingredients **polyethylene glycol (CAS: 25322-68-3) is found on the following regulatory lists;** "GESAMP/EHS Composite List - GESAMP Hazard Profiles","IMO IBC Code Chapter 17: Summary of minimum requirements","IMO MARPOL 73/78 (Annex

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II) - List of Other Liquid Substances", "US - Minnesota Hazardous Substance List", "US Cosmetic Ingredient Review (CIR) Cosmetic ingredients found safe, with qualifications", "US DOE Temporary Emergency Exposure Limits (TEELs)", "US DOT Coast Guard Bulk Hazardous Materials - List of Flammable and Combustible Bulk Liquid Cargoes", "US EPA High Production Volume Program Chemical List", "US FDA Indirect Food Additives: Adhesives and Components of Coatings - Substances for Use Only as Components of Adhesives - Adhesives", "US Food Additive Database", "US Inventory of Effective Food Contact Substance Notifications", "US Toxic Substances Control Act (TSCA) - Inventory"

sodium salicylate (CAS: 54-21-7) is found on the following regulatory lists;

"Canada Toxicological Index Service - Workplace Hazardous Materials Information System - WHMIS (English)", "Canada Toxicological Index Service -Workplace Hazardous Materials Information System - WHMIS (French)", "IMO MARPOL 73/78 (Annex II) - List of Other Liquid Substances", "US Cosmetic Ingredient Review (CIR) Cosmetic ingredients found safe, with qualifications", "US DOE Temporary Emergency Exposure Limits (TEELs)", "US EPA High Production Volume Program Chemical List", "US FDA Indirect Food Additives: Adhesives and Components of Coatings - Substances for Use Only as Components of Adhesives - Adhesives", "US Inventory of Effective Food Contact Substance Notifications", "US Toxic Substances Control Act (TSCA) -Inventory"

No data for Liquid Ammonia Test Solution #1 (CW: 4650-12)

Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

Ingestion may produce health damage*. Cumulative effects may result following exposure*. Possible respiratory and skin sensitizer*. May be harmful to the fetus/ embryo*.

* (limited evidence).

EXPOSURE STANDARD FOR MIXTURES

"Worst Case" computer-aided prediction of spray/ mist or fume/ dust components and concentration: Composite Exposure Standard for Mixture (TWA) :5 mg/m³. Operations which produce a spray/mist or fume/dust, introduce particulates to the breathing zone. If the breathing zone concentration of ANY of the components listed below is exceeded, "Worst Case" considerations deem the individual to be overexposed. Component Breathing Zone ppm Breathing Zone mg/m³ Mixture Conc (%).

Component Mixture Conc (%) 10.0 Breathing zone (ppm) sodium salicylate

Breathing zone (mg/m3) 5.0000

Reasonable care has been taken in the preparation of this information, but the author makes no warranty of merchantability or any other warranty, expressed or implied, with respect to this information. The author makes no representations and assumes no liability for any direct, incidental or consequential damages resulting from its use. For additional technical information please call our toxicology department on +800 CHEMCALL.

Classification of the mixture 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. A list of reference resources used to assist the committee may be found at: www.chemwatch.net/references.

The (M)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.

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

Liquid Ammonia Test Solution #2

STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

NFPA



SUPPLIER

Company: Mars Fishcare Inc Address: 50 East Hamilton Street Chalfont PA, 18914 USA Telephone: +1 215 822 8181 Fax: +1 215 822 1906

PRODUCT USE

Ammonia test solution for product LR8600, 34 and 401M.

SYNONYMS

"Solution ID# 3335B"

Section 2 - HAZARDS IDENTIFICATION

CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW RISK

Causes severe burns. Risk of serious damage to eyes. Harmful to aquatic organisms.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

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

Ingestion of alkaline corrosives may produce burns around the mouth, ulcerations and swellings of the mucous membranes, profuse saliva production, with an inability to speak or swallow. Both the esophagus and stomach may experience burning pain; vomiting and diarrhea may follow. Epiglottal swelling may result in respiratory distress and asphyxia; shock can occur. Narrowing of the esophagus, stomach or stomach valve may occur immediately or after a long delay (weeks to years). Severe exposure can perforate the esophagus or stomach leading to infections of the chest or abdominal cavity, with low chest pain, abdominal stiffness and fever. All of the above can cause death.

EYE

The material can produce severe chemical burns to the eye following direct contact. Vapors or mists may be extremely irritating. If applied to the eves, this material causes severe eye damage.

Direct eye contact with corrosive bases can cause pain and burns. There may be swelling, epithelium destruction, clouding of the cornea and

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%

<1

<10

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inflammation of the iris. Mild cases often resolve; severe cases can be prolonged with complications such as persistent swelling, scarring, permanent cloudiness, bulging of the eye, cataracts, eyelids glued to the eyeball and blindness.

SKIN

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

Skin contact with alkaline corrosives may produce severe pain and burns; brownish stains may develop. The corroded area may be soft, gelatinous and necrotic; tissue destruction may be deep.

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.

INHALED

If inhaled, this material can irritate the throat andlungs of some persons.

Inhaling corrosive bases may irritate the respiratory tract. Symptoms include cough, choking, pain and damage to the mucous membrane. In severe cases, lung swelling may develop, sometimes after a delay of hours to days. There may be low blood pressure, a weak and rapid pulse, and crackling sounds.

CHRONIC HEALTH EFFECTS

Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

HAZARD RATINGS



Section 4 - FIRST AID MEASURES

SWALLOWED

- For advice, contact a Poisons Information Center 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.

EYE

- If this product comes in contact with the eyes:
- Immediately hold eyelids apart and flush the eye continuously with running water.
- Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
- Continue flushing until advised to stop by the Poisons Information Center or a doctor, or for at least 15 minutes.
- Transport to hospital or doctor without delay.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

SKIN

- If skin or hair contact occurs:
- Immediately flush body and clothes with large amounts of water, using safety shower if available.
- Quickly remove all contaminated clothing, including footwear.
- Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Center.
- Transport to hospital, or doctor.

INHALED

- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.

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- 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.

NOTES TO PHYSICIAN

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

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

Alkalis continue to cause damage after exposure.

INGESTION:

• Milk and water are the preferred diluents

- No more than 2 glasses of water should be given to an adult.
- Neutralizing agents should never be given since exothermic heat reaction may compound injury.
- * Catharsis and emesis are absolutely contra-indicated.
- * Activated charcoal does not absorb alkali.
- * Gastric lavage should not be used.

Supportive care involves the following:

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

SKIN AND EYE:

- Injury should be irrigated for 20-30 minutes.
- Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

Section 5 - FIRE FIGHTING MEASURES

Vapour Pressure (mmHG):	Not Available
Upper Explosive Limit (%):	Not Applicable
Specific Gravity (water=1):	1.099
Lower Explosive Limit (%):	Not Applicable

EXTINGUISHING MEDIA

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

FIRE FIGHTING

- Alert Emergency Responders and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.
- Use fire fighting procedures suitable for surrounding area.
- DO NOT approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.
- Equipment should be thoroughly decontaminated after use.

GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

• Non combustible.

• Not considered to be a significant fire risk, however containers may burn.

May emit corrosive fumes.

FIRE INCOMPATIBILITY

None known.

PERSONAL PROTECTION

Glasses: Full face- shield. Gloves: PVC chemical resistant type. Respirator: Type B-P Filter of sufficient capacity

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Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- Clean up all spills immediately.
- Avoid breathing vapors and contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb spill with sand, earth, inert material or vermiculite.
- Wipe up.
- Place in a suitable labeled container for waste disposal.

MAJOR SPILLS

- Clear area of personnel and move upwind. ٠
- Alert Emergency Responders 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.
- Stop leak if safe to do so.
- . Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labeled containers for recycling.
- Neutralize/decontaminate residue.
- Collect solid residues and seal in labeled drums for disposal.
- Wash area and prevent runoff into drains.
- After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- If contamination of drains or waterways occurs, advise emergency services.

PROTECTIVE ACTIONS FOR SPILL



FOOTNOTES

1 PROTECTIVE ACTION ZONE is defined as the area in which people are at risk of harmful exposure. This zone assumes that random changes in wind direction confines the vapour plume to an area within 30 degrees on either side of the predominant wind direction, resulting in a crosswind protective action distance equal to the downwind protective action distance. 2 PROTECTIVE ACTIONS should be initiated to the extent possible, beginning with those closest to the spill and working away from the site in the downwind direction. Within the protective action

zone a level of vapour concentration may exist resulting in nearly all unprotected persons becoming incapacitated and unable to take protective action and/or incurring serious or effects

3 INITIAL ISOLATION ZONE is determined as an area, including upwind of the incident, within which a high probability of localised wind reversal may expose nearly all persons without appropriate protection to life-threatening concentrations of the material

4 SMALL SPILLS involve a leaking package of 200 litres (55 US gallons) or less, such as a drum (jerrican or box with inner containers). Larger packages leaking less than 200 litres and compressed gas leaking from a small cylinder are also considered "small spills". LARGE SPILLS involve many small leaking packages or a leaking package of greater than 200 litres, such as a cargo tank, portable tank or a "one-tonne" compressed gas cylinder.

5 Guide 154 is taken from the US DOT emergency response guide book 6 IERG information is derived from CANUTEC - Transport Canada.

ACUTE EXPOSURE GUIDELINE LEVELS (AEGL) (in ppm)

sodium

te

hypochlori

AEGL Type	10 min	30 min	60 min	4 hr	8 hr
AEGL 1	0.5	0.5	0.5	0.5	GALSYN~
AEGL 2	2.8	2.8	2	1	GALSYN~
AEGL 3	50	28	20	10	GALSYN~

AEGL 1: The airborne concentration of a substance above which it is predicted

that the general population, including susceptible individuals, could

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experience notable discomfort, irritation, or certain asymptomatic nonsensory effects. However, the effects are not disabling and are transient and reversible upon cessation of exposure.

AEGL 2: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience irreversible or other serious, long-lasting adverse health effects or an impaired ability to escape.

AEGL 3: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience life-threatening health effects or death.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- · Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- WARNING: To avoid violent reaction, ALWAYS add material to water and NEVER water to material.
- Avoid smoking, naked lights or ignition sources.
- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- Work clothes should be laundered separately.
- Launder contaminated clothing before re-use.
- Use good occupational work practice.
- Observe manufacturer's storing and handling recommendations.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
- DO NOT allow clothing wet with material to stay in contact with skin

RECOMMENDED STORAGE METHODS

- Lined metal can, Lined metal pail/drum
- Plastic pail
- Polyliner drum
- Packing as recommended by manufacturer.
- Check all containers are clearly labeled and free from leaks.

For low viscosity materials

- Drums and jerricans must be of the non-removable head type.
- Where a can is to be used as an inner package, the can must have a screwed enclosure.
- 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 molded plastic box and the substances are not incompatible with the

plastic. STORAGE REQUIREMENTS

- 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 storing and handling recommendations.

DO NOT store near acids, or oxidizing agents.

Protect containers against physical damage.

Check regularly for spills and leaks.No smoking, naked lights, heat or ignition sources.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



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+	+	+	+	Х	+	
X: Must not be sto O: May be stored	ored together together with spec	cific preventions				

+: May be stored together

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

Source	Material	TWA ppm	TWA mg/m³	STEL ppm	STEL mg/m³	Peak ppm	Peak mg/m³	TWA F/CC	Notes
Canada - British Columbia Occupational Exposure Limits	sodium hydroxide (Sodium hydroxide)						2		
Canada - Ontario Occupational Exposure Limits	sodium hydroxide (Sodium hydroxide)						2		
US - Minnesota Permissible Exposure Limits (PELs)	sodium hydroxide (Sodium hydroxide)						2		
US ACGIH Threshold Limit Values (TLV)	sodium hydroxide (Sodium hydroxide)						2		TLV Basis: upper respiratory tract, eye & skin irritation
US NIOSH Recommended Exposure Limits (RELs)	sodium hydroxide (Sodium hydroxide)						2		
Canada - Alberta Occupational Exposure Limits	sodium hydroxide (Sodium hydroxide)						2		
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	sodium hydroxide (Sodium hydroxide)						2		
US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants	sodium hydroxide (Sodium hydroxide)		2						
US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants	sodium hydroxide (Sodium hydroxide)						2		
US - California Permissible Exposure Limits for Chemical Contaminants	sodium hydroxide (Sodium hydroxide; caustic soda)						2		
US - Idaho - Limits for Air Contaminants	sodium hydroxide (Sodium hydroxide)		2						
US OSHA Permissible Exposure Levels (PELs) - Table Z1	sodium hydroxide (Sodium hydroxide)		2						
US - Hawaii Air Contaminant Limits	sodium hydroxide (Sodium hydroxide)						2		
US - Alaska Limits for Air Contaminants	sodium hydroxide (Sodium hydroxide)						2		
US - Michigan Exposure Limits for Air Contaminants	sodium hydroxide (Sodium hydroxide)						2		
Canada - Yukon Permissible Concentrations for Airborne Contaminant Substances	sodium hydroxide (Sodium hydroxide)	-	2	-	-				
US - Washington Permissible exposure limits of air contaminants	sodium hydroxide (Sodium hydroxide)						2		
Canada - Saskatchewan Occupational Health and Safety Regulations - Contamination Limits	sodium hydroxide (Sodium hydroxide)						2		
Canada - Prince Edward Island Occupational Exposure Limits	sodium hydroxide (Sodium hydroxide)						2		TLV Basis: upper respiratory tract, eye & skin irritation
US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants	sodium hydroxide (Sodium hydroxide)		2						
Canada - Quebec Permissible Exposure Values for Airborne	sodium hydroxide (Sodium hydroxide)						2		

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Contaminants (English)								
US - Oregon Permissible Exposure Limits (Z1)	sodium hydroxide (Sodium hydroxide)		2					
Canada - Northwest Territories Occupational Exposure Limits (English)	sodium hydroxide (Sodium hydroxide)						2	
Canada - Nova Scotia Occupational Exposure Limits	sodium hydroxide (Sodium hydroxide)						2	TLV Basis: upper respiratory tract, eye & skin irritation
US AIHA Workplace Environmental Exposure Levels (WEELs)	sodium hypochlorite (Sodium Hypochlorite)				2			
US ATSDR Minimal Risk Levels for Hazardous Substances (MRLs)	sodium hypochlorite (CHLORINE)	0.07						
US ATSDR Minimal Risk Levels for Hazardous Substances (MRLs)	sodium hypochlorite (CHLORINE)	0.002						
US ATSDR Minimal Risk Levels for Hazardous Substances (MRLs)	sodium hypochlorite (CHLORINE)	0.00005						
US - Minnesota Permissible Exposure Limits (PELs)	sodium hypochlorite (Chlorine)	0.5	1.5	1	3			
Canada - Alberta Occupational Exposure Limits	sodium hypochlorite (Chlorine)	0.5	1.5	1	2.9			
Canada - British Columbia Occupational Exposure Limits	sodium hypochlorite (Chlorine)	0.5		1				
Canada - Ontario Occupational Exposure Limits	sodium hypochlorite (Chlorine)	0.5		1				
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	sodium hypochlorite (Chlorine)	0.5	1.5	1	3			
US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants	sodium hypochlorite (Chlorine)	(C)1	(C)3					
US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants	sodium hypochlorite (Chlorine)	0.5	1.5	1	3			
US - Idaho - Limits for Air Contaminants	sodium hypochlorite (Chlorine)					1	3	
US - California Permissible Exposure Limits for Chemical Contaminants	sodium hypochlorite (Chlorine)	0.5	1.5	1	3			
US NIOSH Recommended Exposure Limits (RELs)	sodium hypochlorite (Chlorine)					0.5	1.45	
US - Alaska Limits for Air Contaminants	sodium hypochlorite (Chlorine)	0.5	1.5	1	3			
US - Michigan Exposure Limits for Air Contaminants	sodium hypochlorite (Chlorine)	0.5	1.5	1	3			
US - Oregon Permissible Exposure Limits (Z1)	sodium hypochlorite (Chlorine)					1	3	
US - Hawaii Air Contaminant Limits	sodium hypochlorite (Chlorine)	0.5	1.5	1	3			
Canada - Yukon Permissible Concentrations for Airborne Contaminant Substances	sodium hypochlorite (Chlorine)	1	3	3	9			
US - Washington Permissible exposure limits of air contaminants	sodium hypochlorite (Chlorine)	0.5				1		
Canada - Saskatchewan Occupational Health and Safety Regulations - Contamination Limits	sodium hypochlorite (Chlorine)	0.5		1				
Canada - Quebec Permissible Exposure Values for Airborne Contaminants (English)	sodium hypochlorite (Chlorine)	0.5	1.5	1	2.9			
US OSHA Permissible Exposure Levels (PELs) - Table Z1	sodium hypochlorite (Chlorine)					1	3	
US ACGIH Threshold Limit Values	sodium hypochlorite	0.5		1				TLV Basis: upper respiratory tract & eye

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(TLV)	(Chlorine)							irritation
US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants	sodium hypochlorite (Chlorine)					1	3	
Canada - Northwest Territories Occupational Exposure Limits (English)	sodium hypochlorite (Chlorine)	1	3	3	8.7	3	8.7	
Canada - Nova Scotia Occupational Exposure Limits	sodium hypochlorite (Chlorine)	0.5		1				TLV Basis: upper respiratory tract & eye irritation
Canada - Prince Edward Island Occupational Exposure Limits	sodium hypochlorite (Chlorine)	0.5		1				TLV Basis: upper respiratory tract & eye irritation
EMERGENCY EXPOSURE LIMITS								
Material	Revised IDLH Value (r	ng/m3)				Revised	IDLH Value (ppm)	
sodium hydroxide	10							
sodium hypochlorite						10		

LIQUID AMMONIA TEST SOLUTION #2:

Not available

SODIUM HYDROXIDE:

for sodium hydroxide:

The TLV-C is recommended based on concentrations that produce noticeable but not excessive, ocular and upper respiratory tract irritation.

SODIUM HYPOCHLORITE:

Odour Threshold Value: 0.08 ppm (detection) - olfactory fatigue may develop

NOTE: Detector tubes for chlorine, measuring in excess of 0.2 ppm, are commercially available. Long-term measurements (8 hrs) may be conducted to detect concentrations exceeding 0.13 ppm.

Smell is not a good indicator of severity of exposure in the range 0.5 to 2 ppm. In this range subjects found exposure unpleasant with itching and burning of the throat reported and occasionally an urge to cough. Significant differences in the responses of males and females were also recorded with females often reporting headache and drowsiness.

Exposure at 1 ppm chlorine for 8 hours produced significant changes in pulmonary function and increased subjective irritation. Similar 8 hour exposures at 0.5 ppm produced no significant pulmonary function changes and less severe subjective irritation. Exposures for 2 hours at 2 ppm chlorine produced no significant changes in pulmonary irritation.

An 8 hour exposure at 1.5 ppm produced increased mucous secretion from the nose and increased mucous in the hypopharynx. Exposure at or below the TLV-TWA and STEL is thought to protect the worker against annoying symptoms in nose, throat and conjunctiva and declines in pulmonary function. Odour Safety Factor(OSF)

OSF=1.6 (CHLORINE).

available chlorine, as chlorine

TLV TWA: 0.5 ppm, 1.5 mg/m3: STEL: 1 ppm, 2.9 mg/m3

ES Peak: 1 ppm, 3 mg/m3

CEL TWA: 2 mg/m3 (compare WEEL TWA)

The odour threshold is likely to be similar to that of chlorine, 0.3 ppm.

Acute, subchronic, and chronic toxicity studies have shown no significant treatment related effects. High concentrations may produce moderate to severe eye irritation, but not permanent injury. High doses also appear to be embryotoxic. Since nearly all sodium hypochlorite is handled as aqueous solution, airborne exposure is likely to be as an aerosol, or mist. Sodium hypochlorite dissociates in water to form free hypochlorous acid in equilibrium. The toxic effects are likely to be similar to those of chlorine or sodium hydroxide.

PERSONAL PROTECTION



Consult your EHS staff for recommendations **EYE**

- Chemical goggles.
- Full face shield.
- Contact lenses pose a special hazard; soft contact lenses may absorb irritants and all lenses concentrate them.

HANDS/FEET

Elbow length PVC gloves.

When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.

OTHER

- Overalls.
- PVC Apron.

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PVC protective suit may be required if exposure severe.

- Eyewash unit.
- Ensure there is ready access to a safety shower.

RESPIRATOR

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important. Breathing Zone Level ppm (volume) Maximum Protection Factor Half-face Respirator Full-Face Respirator

Breathing Zone Level ppm (volume)	Maximum Protection Factor	Half-face Respirator	Full-Face Resp
1000	10	B-P1	-
1000	50	-	B-P1
5000	50	Airline*	-
5000	100	-	B-P2
10000	100	-	B-P3
	100+		Airline* *

* - Continuous Flow ** - Continuous-flow or positive pressure demand.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required.

Use appropriate NIOSH-certified respirator based on informed professional judgement. In conditions where no reasonable estimate of exposure can be made, assume the exposure is in a concentration IDLH and use NIOSH-certified full face pressure demand SCBA with a minimum service life of 30 minutes, or a combination full facepiece pressure demand SAR with auxiliary self-contained air supply. Respirators provided only for escape from IDLH atmospheres shall be NIOSH-certified for escape from the atmosphere in which they will be used.

ENGINEERING CONTROLS

Local exhaust ventilation usually required. If risk of overexposure exists, wear an approved respirator. Correct fit is essential to obtain adequate protection an approved self contained breathing apparatus (SCBA) may be required in some situations. Provide adequate ventilation in warehouse or closed storage area.

Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Air Speed:
solvent, vapors, degreasing etc., evaporating from tank (in still air).	0.25-0.5 m/s (50-100 f/min.)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion). Within each range the appropriate value depends on:	2.5-10 m/s (500-2000 f/min.)
Lower end of the range	Upper end of the range
1: Room air currents minimal or favorable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood-local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES			
Liquid. Mixes with water. Corrosive. Alkaline.			
State	Liquid	Molecular Weight	Not Applicable
Melting Range (°F)	Not Available	Viscosity	Not Available
Boiling Range (°F)	Not Available	Solubility in water (g/L)	Miscible

Hazard Alert Code: EXTREME

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Flash Point (°F)	Not Applicable	pH (1% solution)	Not Available
Decomposition Temp (°F)	Not Available	pH (as supplied)	13.3 - 13.9
Autoignition Temp (°F)	Not Applicable	Vapour Pressure (mmHG)	Not Available
Upper Explosive Limit (%)	Not Applicable	Specific Gravity (water=1)	1.099
Lower Explosive Limit (%)	Not Applicable	Relative Vapor Density (air=1)	Not Available
Volatile Component (%vol)	Not Available	Evaporation Rate	Not Available

APPEARANCE

Clear alkaline liquid with a chlorine odour; mixes with water.

Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerization will not occur.

STORAGE INCOMPATIBILITY

Avoid strong acids.

For incompatible materials - refer to Section 7 - Handling and Storage.

Section 11 - TOXICOLOGICAL INFORMATION

Liquid Ammonia Test Solution #2

TOXICITY AND IRRITATION

Not available. Refer to individual constituents.

SODIUM HYDROXIDE:

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

TOXICITY IRRITATION

Skin (rabbit): 500 mg/24h SEVERE

Eye (rabbit): 0.05 mg/24h SEVERE

Eye (rabbit):1 mg/24h SEVERE

Eye (rabbit):1 mg/30s rinsed-SEVERE

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. 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. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high dyspnea, cough and mucus production.

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

The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.

SODIUM HYPOCHLORITE:

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

TOXICITY

IRRITATION

Hazard Alert Code: EXTREME

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Oral (mouse) LD50: 5800 mg/kg	Eye (rabbit): 10 mg - Moderate
Oral (woman) TDLo: 1000 mg/kg	Skin (rabbit): 500 mg/24h-Moderate
Oral (rat) LD50: 8910 mg/kg	Eye (rabbit): 100 mg - Moderate

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. 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. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

Hypochlorite salts are classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans.

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

The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

Hypochlorite salts are extremely corrosive and can cause severe damage to the eyes and skin.

A number of fibrosarcomas and squamous cell carcinomas were observed in mice treated dermally with repeated subcarcinogenic doses of 4nitroquinoline-1-oxide, followed by dermal treatment with sodium hypochlorite.

as sodium hypochlorite pentahydrate

CARCINOGEN

Hypochlorite salts		International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs	Group	3	
Chlorine		US ACGIH Threshold Limit Values (TLV) - Carcinogens	Carcinogen Category	A4	
BROMINE COMPC INORGANIC)	UNDS (ORGANIC OR	US Environmental Defense Scorecard Suspected Carcinogens	Reference(s)	P65- MC	
SKIN					
sodium hydroxide	US - California OEHHA/A	RB - Acute Reference Exposure Levels and Target Organs (RELs) - Skin	Skin		Х
sodium hydroxide	US - California OEHHA/A	RB - Chronic Reference Exposure Levels and Target Organs (CRELs) - Skin	Skin		Х
sodium hydroxide	US - Vermont Permissible	e Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants - Skin	Skin Design	ation	Х
sodium hydroxide	US - Washington Permiss	sible exposure limits of air contaminants - Skin	Skin		Х
sodium hydroxide	US - Hawaii Air Contamir	ant Limits - Skin Designation	Skin Design	ation	х
sodium hydroxide	US - California Permissib	le Exposure Limits for Chemical Contaminants - Skin	Skin		Х

Section 12 - ECOLOGICAL INFORMATION

Refer to data for ingredients, which follows:

SODIUM HYDROXIDE:

SODIUM HYPOCHLORITE:

LIQUID AMMONIA TEST SOLUTION #2:

DO NOT discharge into sewer or waterways. Prevent, by any means available, spillage from entering drains or watercourses.

LIQUID AMMONIA TEST SOLUTION #2:

Marine Pollutant:

Harmful to aquatic organisms.

SODIUM HYDROXIDE:

Metal-containing inorganic substances generally have negligible vapour pressure and are not expected to partition to air. Once released to surface waters and moist soils their fate depends on solubility and dissociation in water. Environmental processes (such as oxidation and the presence of acids or bases) may transform insoluble metals to more soluble ionic forms. Microbiological processes may also transform insoluble metals to more soluble forms. Such ionic species may bind to dissolved ligands or sorb to solid particles in aquatic or aqueous media. A significant proportion of dissolved sorbed metals will end up in sediments through the settling of suspended particles. The remaining metal ions can then be taken up by aquatic organisms. When released to dry soil most metals will exhibit limited mobility and remain in the upper layer; some will leach locally into ground water and/ or surface

When released to dry soil most metals will exhibit limited mobility and remain in the upper layer; some will leach locally into ground water and/ or surface water ecosystems when soaked by rain or melt ice. Environmental processes may also be important in changing solubilities.

Even though many metals show few toxic effects at physiological pHs, transformation may introduce new or magnified effects.

A metal ion is considered infinitely persistent because it cannot degrade further.

The current state of science does not allow for an unambiguous interpretation of various measures of bioaccumulation.

The counter-ion may also create heath and environmental concerns once isolated from the metal. Under normal physiological conditions the counter-ion may be essentially insoluble and may not be bioavailable.

Environmental processes may enhance bioavailability.

Ecotoxicity:

Fish LC50 (96h): 43mg/l SODIUM HYPOCHLORITE: Not Determined

Hazard Alert Code: EXTREME

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Very toxic to aquatic organisms.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

For chlorine:

Environmental fate:

Atmospheric chlorine produced as a result of such process as disinfection forms hydrochloric (HCI) or hypochlorous (HOCI) acid in the atmosphere, either through reactions with hydroxy radicals or other trace species such as hydrocarbons. These acids are believed to removed from the atmosphere primarily through precipitation washout (i.e. wet deposition as chlorine is scrubbed out by rain in the subcloud layer) or dry deposition as gaseous chlorine contacts and reacts with the earths surface.

Water chlorination, resulting from municipal and industrial wastewater treatment and cooling water disinfection, initially introduces chlorine into the water as chlorine gas, hypochlorite ion (OCI-), or its salt. These forms of chlorine are termed free residual chlorines (FRC). Chlorine in aqueous systems volatilises or quickly decays to residual forms such as hypochlorous acid, chloramine and chlorinated organics. Aquatic chemistry is determined by aquatic factors including pH, ammonium ion (which combines with chlorine to produce chloramine) and certain other reducing agents. Inorganic reducing agents in estuarine waters include sulfur, iron and manganese. Other organic compounds in water also contribute to chlorine decay rate. The reactions of chlorine or hypochlorites in water produce a number of by-products many of which have been implicated as genotoxic or tumourigenic.

Chlorine, added to drinking water as chlorine gas (Cl2) or hypochlorite salts (e.g., NaOCl), effectively inactivates bacteria in 20 minutes at concentrations of 0.03 to 0.06 mg/l at pH range of 7.0 to 8.5 and temperature range of 4 deg.C to 22 deg.C.

Chlorine disinfectants in wastewater react with organic matters, giving rise to organic chlorine compounds such as AOX (halogenated organic compounds absorbable on activated carbon), which are toxic for aquatic organisms and are persistent environmental contaminants.

Chlorine hydrolyses very rapidly in water (rate constants range from 1.5 x 10-4 at deg. C to 4.0 x 10-4 at 25 deg.C; half-life in natural waters, 0.005 seconds. In fresh and wastewaters at pH >6, complete hydrolysis occurs with the formation of hypochlorous acid (HOCI) and chloride ion (CI-). The hypochlorous acid ionizes to hydrogen ion (H+) and hypochlorite ion (OCI-). At pH values >5, OCI- predominates; at pH values <5, HOCI predominates. Free chlorine (CI2, HOCI, and OCI-) reacts rapidly with inorganics such as bromide and more slowly with organic material present in natural waters. These reactions yield chloride, oxidised organics, chloroorganics (including trihalomethanes), oxygen, nitrogen, chlorate, bromate and bromoorganics.

Chlorines ultimate aqueous fate is chloride.

Vapourisation of molecular chlorine (Cl2) from water to the atmosphere may be significant at low pH values and high concentrations (e.g., pH 2 and 3500 mg/l chlorine), but is insignificant at neutral pH and low concentrations.

Vegetation acts as an important sink for chlorine air pollution. Plant exposure to elevated levels of chlorine can cause plant injury; however chlorine tends to be rapidly converted to other less toxic forms.

Atmospheric: When chlorine, hypochlorous acid or hydrogen chloride mixes in the atmosphere with water vapour, dilute solutions of strong mineral acids are formed that fall to earth as acid rain, snow, and fog, or acidified dry particles.

Chlorine may react with soil components to form chlorides; depending on their water solubility, these chlorides are easily washed out from the soil.

Bioaccumulation/bioconcentration: There is no potential for the bioaccumulation or bioconcentration of chlorine.

Ecotoxicity:

Fish LC50 (96 h): 0.015-13.5 mg/l

Chlorine has high acute toxicity to aquatic organisms; many toxicity values are less than or equal to 1 mg/l. Twenty-four-hour LC50 values range from 0.076 to 0.16 mg/l for Daphnia magna (water flea) and from 0.005 to 0.1 m/l for Daphnia pulex (cladocern); 48-hour LC50 values range from 5.3 to 12.8 m/l for Nitocra spinipes (snail); and 96-hour LC50 values range from 0.13 to 0.29 mg/L for Oncorhynchus mykiss (rainbow trout), from 0.1 to 0.18 mg/l for Salvelinus fontinalis (brook trout), and from 0.71-0.82 mg/l for Lepomis cyanellus (green sunfish)

Papillomas of the oral cavity in fish have been associated with exposure to chlorinated water supplies.

Chlorine is phytotoxic but is also essential to plant growth; crops need around 2 kg or more of chlorine per acre. Acute toxicity to plants is characterized by defoliation with no leaf symptoms and, in higher plant forms, by spotting of the leaves (at 1.5 mg/m3) and marginal and interveinal injury (at 150-300 mg/m3) Data from experimental studies indicate that injury to animals occurs only in the presence of high concentrations of chlorine, either in drinking water or the ambient atmosphere.

http://www.epa.gov/chemfact/s_chlori.txt

U.S. ENVIRONMENTAL PROTECTION AGENCY August 1994.

In fresh water, the hypochlorites break down rapidly into non-toxic compounds when exposed to sunlight. In seawater, chlorine levels decline rapidly; however, hypobromite (which is acutely toxic to aquatic organisms) is formed. Sodium and calcium hypochlorite are low in toxicity to avian wildlife, but they are highly toxic to freshwater fish and invertebrates.

Hypochlorite is a highly reactive chemical which, during and after its use in household scenarios, undergoes a variety of reactions. The major one is the oxidation of inorganic and organic species.

A minor reaction, which consumes about 1.5% of the chlorine atoms from hypochlorite, is chlorination, which leads to formation of organohalogen byproducts that are often measured by the group parameter, AOX.

Hypochlorite itself is rapidly broken down during use, in the sewer, and if any does reach sewage treatment it will further degrade (half-life of around 0.6 minutes). Predictions have indicated that its concentration will fall to below 1.E-32 ug/l by the end of the sewer, partially due to its reaction with ammonia in the sewer which leads to a subsequent increase in chloramine.

The level of chloramine reaching surface water is estimated to be below 5.E-10 ug/l. Both these concentrations are orders of magnitude below the lowest acute EC50s determined for sodium hypochlorite (EC50 to invertebrates = 5 ug/l) and monochloramine (EC50 to invertebrates = 16 ug/l). The organohalogen by-products formed from the use of hypochlorite are currently receiving much attention. However, the levels of AOX produced are low

The organohalogen by-products formed from the use of hypochlorite are currently receiving much attention. However, the levels of AOX produced are low (for example, 37 ug/l from bleach use compared to a sewage background level of 106 ug/l), and the organohalogens produced from domestic use of hypochlorite are not believed to have an adverse effect on the environment. Available data indicate that no dioxins are produced, and that the identified AOXs are typically small molecules with a low degree of chlorination and for which ecotoxicological properties are known or can be predicted. Where drinking water is disinfected by chlorination, the levels of organohalogens in sewage effluent arising from bleach use will be comparable with, and sometimes only a fraction of, those arising from the tap-water. After secondary sewage treatment, the levels entering receiving waters will be of the same order of magnitude as background levels typically present in rivers, though the total flux in rivers from natural sources will be much greater.

The majority of the measured AOX is unidentified, but thought to consist of high molecular weight components formed from fats, proteins and humic acids which are too large to bioaccumulate.

In addition, studies on the whole AOX mixture in laundry waste-water indicated that the level of AOX present did not effect growth or reproduction of Ceriodaphnia, and that around 70% is removed in activated sludge.

The material is classified as an ecotoxin* because the Fish LC50 (96 hours) is less than or equal to 0.1 mg/l

* Classification of Substances as Ecotoxic (Dangerous to the Environment)

Appendix 8, Table 1

Compiler's Guide for the Preparation of International Chemical Safety Cards: 1993 Commission of the European Communities.

Ecotoxicity

Ingredient

Persistence:

Persistence:

Bioaccumulation

Hazard Alert Code: EXTREME

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sodium hydroxide sodium hypochlorite	Water/Soil LOW	Air	LOW LOW	HIGH

Section 13 - DISPOSAL CONSIDERATIONS

US EPA Waste Number & Descriptions

A. General Product Information

Corrosivity characteristic: use EPA hazardous waste number D002 (waste code C)

Disposal Instructions

All waste must be handled in accordance with local, state and federal regulations.

- 1
- Recycle wherever possible.
- Consult manufacturer for recycling options or consult Waste Management Authority for disposal if no suitable treatment or disposal facility can be identified.
- Treat and neutralize at an approved treatment plant.
- Treatment should involve: Neutralization with suitable dilute acid followed by: Burial in a licensed land-fill or Incineration in a licensed apparatus (after admixture with suitable combustible material).

• Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

Puncture containers to prevent re-use and bury at an authorized landfill.

Section 14 - TRANSPORTATION INFORMATION



DOT.			
Symbols:	None	Hazard class or Division:	8
Identification Numbers:	UN3266	PG:	II
Label Codes:	8	Special provisions:	B2, IB2, T11, TP2, TP27
Packaging: Exceptions:	154	Packaging: Non-bulk:	202
Packaging: Exceptions:	154	Quantity limitations: Passenger aircraft/rail:	1 L
Quantity Limitations: Cargo aircraft only:	30 L	Vessel stowage: Location:	В
Vessel stowage: Other:	40, 52		
Hazardous materials descriptions an Corrosive liquid, basic, inorganic, n.c. Air Transport IATA:	d proper shipping names: b.s.		
ICAO/IATA Class:	8	ICAO/IATA Subrisk:	None
UN/ID Number:	3266	Packing Group:	II
Special provisions: Shipping Name: CORROSIVE LIQUI *(CONTAINS SODIUM HYDROXIDE Maritime Transport IMDG:	A3 ID, BASIC, INORGANIC, N.O.S. 5, SODIUM HYPOCHLORITE)		
IMDG Class:	8	IMDG Subrisk:	None
UN Number:	3266	Packing Group:	II
EMS Number:	F-A,S-B	Special provisions:	274 944
Limited Quantities:	1 L	Marine Pollutant:	Not Determined
Shipping Name: CORROSIVE LIQU N.O.S.(Contains sodium hydroxide, s	ID, BASIC, INORGANIC, sodium hypochlorite)		

Section 15 - REGULATORY INFORMATION

Hazard Alert Code: **EXTREME**

#2

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REGULATIONS US EPCRA Section 313 Chemical List

Ingredient	CAS	% de minimus concentration
sodium hypochlorite	7681-52-9	1.0
US CERCLA List of Hazardous Substar	nces and Reportab	ole Quantities
Ingredient	CAS	RQ

Ingredient	CAS	RQ
sodium hydroxide	1310-73-2	1000 lb (454 kg)
sodium hypochlorite	7681-52-9	100 lb (45.4 kg)

Regulations for ingredients

sodium hydroxide (CAS: 1310-73-2) is found on the following regulatory lists;

"Canada - Alberta Occupational Exposure Limits", "Canada - British Columbia Occupational Exposure Limits", "Canada - Northwest Territories Occupational Exposure Limits", "Canada - Ontario Occupational Exposure Limits", "Canada - Ontario Occupational Exposure Limits", "Canada - Prince Edward Island Occupational Exposure Limits", "Canada - Quebec Permissible Exposure Values for Airborne Contaminants (English)", "Canada - Saskatchewan Industrial Hazardous Substances", "Canada - Saskatchewan Occupational Health and Safety Regulations - Contamination Limits", "Canada - Yukon Permissible Concentrations for Airborne Contaminant Substances", "Canada Ingredient Disclosure List (SOR/88-64)", "Canada Toxicological Index Service - Workplace Hazardous Materials Information System - WHMIS (English)", "Canada Toxicological Index Service - Workplace Hazardous Materials Information System - WHMIS (French)", "CODEX General Standard for Food Additives (GSFA) - Additives Permitted for Use in Food in General, Unless Otherwise Specified, in Accordance with GMP", "GESAMP/EHS Composite List - GESAMP Hazard Profiles", "IMO IBC Code Chapter 17: Summary of minimum requirements", "International Council of Chemical Associations (ICCA) - High Production Volume List", "OECD Representative List of High Production Volume (HPV) Chemicals", "US - Alaska Limits for Air Contaminants", "US - California Air Toxics ""Hot Spots" List (Assembly Bill 2588) Substances for which emissions must be quantified","US - California Occupational Safety and Health Regulations (CAL/OSHA) - Hazardous Substances List"."US - California OEHHA/ARB - Acute Reference Exposure Levels and Target Organs (RELs)"."US - California Permissible Exposure Limits for Chemical Contaminants", "US - California Toxic Air Contaminant List Category II", "US - Connecticut Hazardous Air Pollutants", "US - Hawaii Air Contaminants Limits", "US - Idaho - Limits for Air Contaminants", "US - Massachusetts Oil & Hazardous Material List", "US - Michigan Exposure Limits for Air Contaminants", "US - Minnesota Hazardous Substance List", "US - Minnesota Permissible Exposure Limits (PELs)", "US - New Jersey Right to Know Hazardous Substances", "US - Oregon Permissible Exposure Limits (Z1)", "US - Pennsylvania - Hazardous Substance List", "US - Rhode Island Hazardous Substance List", "US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants", "US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants", "US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants", "US - Washington Permissible exposure limits of air contaminants","US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants","US ACGIH Threshold Limit Values (TLV)", "US CWA (Clean Water Act) - List of Hazardous Substances", "US CWA (Clean Water Act) - Reportable Quantities of Designated Hazardous Substances", "US Department of Transportation (DOT) List of Hazardous Substances and Reportable Quantities - Hazardous Substances Other Than Radionuclides", "US DOE Temporary Emergency Exposure Limits (TEELs)", "US EPA High Production Volume Chemicals Additional List", "US Food Additive Database", "US List of Lists - Consolidated List of Chemicals Subject to the Emergency Planning and Community Right-to-Know Act (EPCRA) and Section 112(r) of the Clean Air Act", "US NIOSH Recommended Exposure Limits (RELs)", "US OSHA Permissible Exposure Levels (PELs) -Table Z1", "US Postal Service (USPS) Hazardous Materials Table: Postal Service Mailability Guide", "US Toxic Substances Control Act (TSCA) - Inventory"

sodium hypochlorite (CAS: 7681-52-9,10022-70-5) is found on the following regulatory lists; "Canada - Saskatchewan Industrial Hazardous Substances", "Canada Ingredient Disclosure List (SOR/88-64)", "Canada Toxicological Index Service -Workplace Hazardous Materials Information System - WHMIS (English)", "Canada Toxicological Index Service - Workplace Hazardous Materials Information System - WHMIS (French)", "GESAMP/EHS Composite List - GESAMP Hazard Profiles", "IMO IBC Code Chapter 17: Summary of minimum requirements", "International Council of Chemical Associations (ICCA) - High Production Volume List", "OECD Representative List of High Production Volume (HPV) Chemicals", "US - California Occupational Safety and Health Regulations (CAL/OSHA) - Hazardous Substances List", "US - Massachusetts Oil & Hazardous Material List", "US - Minnesota Hazardous Substance List", "US - New Jersey Right to Know Hazardous Substances", "US - Pennsylvania -Hazardous Substance List", "US AIHA Workplace Environmental Exposure Levels (WEELS)", "US CWA (Clean Water Act) - List of Hazardous "US CWA (Clean Water Act) - Reportable Quantities of Designated Hazardous Substances", "US Department of Transportation (DOT) List of Substances" Hazardous Substances and Reportable Quantities - Hazardous Substances Other Than Radionuclides", "US DOE Temporary Emergency Exposure Limits (TEELs)", "US EPA Master Testing List - Index I Chemicals Listed", "US FDA Indirect Food Additives: Adhesives and Components of Coatings - Substances for Use Only as Components of Adhesives - Adhesives", "US Food Additive Database", "US List of Lists - Consolidated List of Chemicals Subject to the Emergency Planning and Community Right-to-Know Act (EPCRA) and Section 112(r) of the Clean Air Act", "US Postal Service (USPS) Hazardous Materials Table: Postal Service Mailability Guide", "US Toxic Substances Control Act (TSCA) - Inventory"

No data for Liquid Ammonia Test Solution #2 (CW: 4650-9)

Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

Ingestion may produce health damage* Cumulative effects may result following exposure*.

(limited evidence)

Ingredients with multiple CAS Nos Ingredient Name sodium hypochlorite

CAS 7681-52-9, 10022-70-5

Hazard Alert Code: EXTREME

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EXPOSURE STANDARD FOR MIXTURES

"Worst Case" computer-aided pred	iction of vapor components/concentration	is: Composite Exposure Standard for Mixtu	re (TWA) (mg/m3): 1.5 mg/m ³ If
the breathing zone concentration of A	ANY of the components listed below is ex	ceeded, "Worst Case" considerations deem	the individual to be overexposed.
Component Breathing Zone ppm Bre	athing Zone mg/m3 Mixture Conc: (%).		
Component	Breathing zone (ppm)	Breathing zone (mg/m3)	Mixture Conc (%)
sodium hypochlorite	0.50	1.5000	1.0
sodium hypochlorite	0.00	0.0000	0.0

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Classification of the mixture 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. A list of reference resources used to assist the committee may be found at:

www.chemwatch.net/references.

The (M)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.

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