

Chemwatch: 5477-72 Version No: 2.1.10.9 Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements Chemwatch Hazard Alert Code: 4 Issue Date: 02/08/2021 Print Date: 02/08/2021

S.GHS.AUS.EN

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

## **Product Identifier**

Product name	Dy-Mark Zinc Guard Rust Converter	
Chemical Name	Not Applicable	
Synonyms	230733501	
Proper shipping name	AEROSOLS	
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	Aerosol spray paint. Use according to manufacturer's directions.
	Application is by spray atomisation from a hand held aerosol pack

#### Details of the supplier of the safety data sheet

Registered company name	Dy-Mark	
Address	89 Formation Street Wacol QLD 4076 Australia	
Telephone	+61 7 3327 3004	
Fax	+61 7 3327 3009	
Website	http://www.dymark.com.au	
Email	info@dymark.com.au	

#### Emergency telephone number

Association / Organisation	Dy-Mark
Emergency telephone numbers	+61 7 3327 3099
Other emergency telephone numbers	Not Available

## **SECTION 2 Hazards identification**

#### Classification of the substance or mixture

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

## ChemWatch Hazard Ratings

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

Poisons Schedule	Not Applicable	
Classification <sup>[1]</sup>	Aerosols Category 1, Eye Irritation Category 2A, Specific target organ toxicity - single exposure Category 3 (narcotic effects), Reproductive Toxicity Category 1B	
Legend:	1. Classified by Chernwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI	

#### Label elements



Signal word Danger

#### Hazard statement(s)

( )		
AUH044	Risk of explosion if heated under confinement.	
AUH066	Repeated exposure may cause skin dryness and cracking.	
H222+H229	Extremely flammable aerosol. Pressurized container: may burst if heated.	
H319	Causes serious eye irritation.	
H336	H336 May cause drowsiness or dizziness.	
H360Fd	H360Fd May damage fertility. May damage the unborn child.	

#### Precautionary statement(s) Prevention

P201	Obtain special instructions before use.	
P210	Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.	
P211	Do not spray on an open flame or other ignition source.	
P251	Do not pierce or burn, even after use.	
P271	Use only outdoors or in a well-ventilated area.	
P280	Wear protective gloves, protective clothing, eye protection and face protection.	
P261	Avoid breathing mist/vapours/spray.	
P264	Wash all exposed external body areas thoroughly after handling.	

#### Precautionary statement(s) Response

P308+P313	IF exposed or concerned: Get medical advice/ attention.	
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P312	Call a POISON CENTER/doctor/physician/first aider/if you feel unwell.	
P337+P313	If eye irritation persists: Get medical advice/attention.	
P304+P340	P304+P340 IF INHALED: Remove person to fresh air and keep comfortable for breathing.	

#### Precautionary statement(s) Storage

P405	Store locked up.	
P410+P412	Protect from sunlight. Do not expose to temperatures exceeding 50 °C/122 °F.	
P403+P233	Store in a well-ventilated place. Keep container tightly closed.	

#### Precautionary statement(s) Disposal

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

## **SECTION 3 Composition / information on ingredients**

P501

#### Substances

See section below for composition of Mixtures

## Mixtures

CAS No	%[weight]	Name
67-64-1	20-25	acetone
67-63-0	15-20	isopropanol
1401-55-4	2-4	tannic acid
111-76-2	2-4	ethylene glycol monobutyl ether
149-91-7	0.3-0.5	gallic acid
1336-21-6	0.05-0.1	ammonium hydroxide
Not Available	balance	Ingredients determined not to be hazardous
115-10-6	20-40	dimethyl ether
Legend:	Legend: 1. Classified by Chernwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L * EU IOELVs available	

## **SECTION 4 First aid measures**

## Description of first aid measures

Eye Contact

If aerosols come in contact with the eyes:

Immediately hold the eyelids apart and flush the eye continuously for at least 15 minutes with fresh running water.

	<ul> <li>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.</li> <li>Transport to hospital or doctor without delay.</li> <li>Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
Skin Contact	If solids or aerosol mists are deposited upon the skin: <ul> <li>Flush skin and hair with running water (and soap if available).</li> <li>Remove any adhering solids with industrial skin cleansing cream.</li> <li>DO NOT use solvents.</li> <li>Seek medical attention in the event of irritation.</li> </ul>
Inhalation	If aerosols, fumes or combustion products are inhaled:  Remove to fresh air.  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.  If breathing is shallow or has stopped, ensure clear airway and apply resuscitation, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.  Transport to hospital, or doctor.
Ingestion	<ul> <li>If swallowed do NOT induce vomiting.</li> <li>If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>Observe the patient carefully.</li> <li>Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>Seek medical advice.</li> </ul>

#### Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

for lower alkyl ethers:

#### BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Administer oxygen by non-representer mask at 10 to 15
   A low-stimulus environment must be maintained.
- Monitor and treat, where necessary, for shock.
- Anticipate and treat, where necessary, for seizures.
- Do NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong
- gag reflex and does not drool.

#### ADVANCED TREATMENT

- Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- Hypotension without signs of hypovolaemia may require vasopressors.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- + Ethers may produce anion gap acidosis. Hyperventilation and bicarbonate therapy might be indicated.
- Haemodialysis might be considered in patients with impaired renal function.
- Consult a toxicologist as necessary.
- BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994 for simple ketones:

#### BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary oedema.
- Monitor and treat, where necessary, for shock.
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5mL/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.
- Give activated charcoal.

ADVANCED TREATMENT

- + Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- Consider intubation at first sign of upper airway obstruction resulting from oedema.
- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- + Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Consult a toxicologist as necessary.
- BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For acute or short term repeated exposures to isopropanol:

- Rapid onset respiratory depression and hypotension indicates serious ingestions that require careful cardiac and respiratory monitoring together with immediate intravenous access.
- Rapid absorption precludes the usefulness of emesis or lavage 2 hours post-ingestion. Activated charcoal and cathartics are not clinically useful. Ipecac is most useful when given 30 mins. post-ingestion.
- There are no antidotes.
- Management is supportive. Treat hypotension with fluids followed by vasopressors.
- Watch closely, within the first few hours for respiratory depression; follow arterial blood gases and tidal volumes.
- Ice water lavage and serial haemoglobin levels are indicated for those patients with evidence of gastrointestinal bleeding.

## **SECTION 5 Firefighting measures**

#### Extinguishing media

SMALL FIRE:

Water spray, dry chemical or CO2

- LARGE FIRE:
- Water spray or fog.

#### 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
dvice for firefighters	
Fire Fighting	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>May be violently or explosively reactive.</li> <li>Wear breathing apparatus plus protective gloves.</li> <li>Prevent, by any means available, spillage from entering drains or water course.</li> <li>If safe, switch off electrical equipment until vapour fire hazard removed.</li> <li>Use water delivered as a fine spray to control fire and cool adjacent area.</li> <li>DO NOT approach containers suspected to be hot.</li> <li>Cool fire exposed containers with water spray from a protected location.</li> <li>If safe to do so, remove containers from path of fire.</li> <li>Equipment should be thoroughly decontaminated after use.</li> </ul>
Fire/Explosion Hazard	<ul> <li>Liquid and vapour are highly flammable.</li> <li>Severe fire hazard when exposed to heat or flame.</li> <li>Vapour forms an explosive mixture with air.</li> <li>Severe explosion hazard, in the form of vapour, when exposed to flame or spark.</li> <li>Vapour may travel a considerable distance to source of ignition.</li> <li>Heating may cause expansion or decomposition with violent container rupture.</li> <li>Aerosol cans may explode on exposure to naked flames.</li> <li>Rupturing containers may rocket and scatter burning materials.</li> <li>Hazards may not be restricted to pressure effects.</li> <li>May emit acrid, poisonous or corrosive fumes.</li> <li>On combustion, may emit toxic fumes of carbon monoxide (CO).</li> <li>Combustion products include:</li> <li>carbon dioxide (CO2)</li> <li>other pyrolysis products typical of burning organic material.</li> <li>Contains low boiling substance: Closed containers may rupture due to pressure buildup under fire conditions.</li> </ul>
HAZCHEM	Not Applicable

#### **SECTION 6 Accidental release measures**

Personal precautions, protective equipment and emergency procedures

See section 8

#### **Environmental precautions**

See section 12

#### Methods and material for containment and cleaning up

Minor Spills	<ul> <li>Clean up all spills immediately.</li> <li>Avoid breathing vapours and contact with skin and eyes.</li> <li>Wear protective clothing, impervious gloves and safety glasses.</li> <li>Shut off all possible sources of ignition and increase ventilation.</li> <li>Wipe up.</li> <li>If safe, damaged cans should be placed in a container outdoors, away from all ignition sources, until pressure has dissipated.</li> <li>Undamaged cans should be gathered and stowed safely.</li> </ul>	
Major Spills	<ul> <li>Clear area of personnel and move upwind.</li> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>May be violently or explosively reactive.</li> <li>Wear breathing apparatus plus protective gloves.</li> <li>Prevent, by any means available, spillage from entering drains or water courses</li> <li>No smoking, naked lights or ignition sources.</li> <li>Increase ventilation.</li> <li>Stop leak if safe to do so.</li> </ul>	
		Continued

<ul> <li>Water spray or fog may be used to disperse / absorb vapour.</li> <li>Absorb or cover spill with sand, earth, inert materials or vermiculite.</li> <li>If safe, damaged cans should be placed in a container outdoors, away from ignition sources, until pressure has dissipated.</li> <li>Undamaged cans should be gathered and stowed safely.</li> <li>Collect residues and seal in labelled drums for disposal.</li> </ul>
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Personal Protective Equipment advice is contained in Section 8 of the SDS.

## **SECTION 7 Handling and storage**

Safe handling	<ul> <li>Avoid all personal contact, including inhalation.</li> <li>Wear protective clothing when risk of exposure occurs.</li> <li>Use in a well-ventilated area.</li> <li>Prevent concentration in hollows and sumps.</li> <li>DO NOT enter confined spaces until atmosphere has been checked.</li> <li>Avoid smoking, naked lights or ignition sources.</li> <li>Avoid contact with incompatible materials.</li> <li>When handling, DO NOT eat, drink or smoke.</li> <li>DO NOT incinerate or puncture aerosol cans.</li> <li>DO NOT spray directly on humans, exposed food or food utensils.</li> <li>Avoid physical damage to containers.</li> <li>Always wash hands with soap and water after handling.</li> <li>Work clothes should be laundered separately.</li> <li>Use good occupational work practice.</li> <li>Observe manufacturer's storage and handling recommendations contained within this SDS.</li> </ul>
Other information	<ul> <li>Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.</li> <li>Keep dry to avoid corrosion of cans. Corrosion may result in container perforation and internal pressure may eject contents of can</li> <li>Store in original containers in approved flammable liquid storage area.</li> <li>DO NOT store in pits, depressions, basements or areas where vapours may be trapped.</li> <li>No smoking, naked lights, heat or ignition sources.</li> <li>Keep containers securely sealed. Contents under pressure.</li> <li>Store away from incompatible materials.</li> <li>Store in a cool, dry, well ventilated area.</li> <li>Avoid storage at temperatures higher than 40 deg C.</li> <li>Store in an upright position.</li> <li>Protect containers against physical damage.</li> <li>Check regularly for spills and leaks.</li> <li>Observe manufacturer's storage and handling recommendations contained within this SDS.</li> </ul>

#### Conditions for safe storage, including any incompatibilities

Suitable container		i <b>ner 🕨</b> Aer	osol dispenser.	suitable for labor		
Stora	Storage incompatibility		id reaction with	oxidising agents	i	



- Must not be stored together Х

 May be stored together with specific preventions
 May be stored together 0

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Note: Depending on other risk factors, compatibility assessment based on the table above may not be relevant to storage situations, particularly where large volumes of dangerous goods are stored and handled. Reference should be made to the Safety Data Sheets for each substance or article and risks assessed accordingly.

## **SECTION 8 Exposure controls / personal protection**

#### **Control parameters**

#### Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	acetone	Acetone	500 ppm / 1185 mg/m3	2375 mg/m3 / 1000 ppm	Not Available	Not Available
Australia Exposure Standards	isopropanol	Isopropyl alcohol	400 ppm / 983 mg/m3	1230 mg/m3 / 500 ppm	Not Available	Not Available
Australia Exposure Standards	ethylene glycol monobutyl ether	2-Butoxyethanol	20 ppm / 96.9 mg/m3	242 mg/m3 / 50 ppm	Not Available	Not Available
Australia Exposure Standards	dimethyl ether	Dimethyl ether	400 ppm / 760 mg/m3	950 mg/m3 / 500 ppm	Not Available	Not Available

#### Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
acetone	Not Available	Not Available	Not Available
isopropanol	400 ppm	2000* ppm	12000** ppm
ethylene glycol monobutyl ether	60 ppm	120 ppm	700 ppm
gallic acid	18 mg/m3	190 mg/m3	1,200 mg/m3

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## Dy-Mark Zinc Guard Rust Converter

Ingredient	TEEL-1	TEEL-2		TEEL-3
ammonium hydroxide	61 ppm	330 ppm		2,300 ppm
dimethyl ether	3,000 ppm	3800* ppm		7200* ppm
Ingredient	Original IDLH		Revised IDLH	
acetone	2,500 ppm		Not Available	
isopropanol	2,000 ppm		Not Available	
tannic acid	Not Available		Not Available	
ethylene glycol monobutyl ether	700 ppm		Not Available	
gallic acid	Not Available		Not Available	
ammonium hydroxide	Not Available		Not Available	
dimethyl ether	Not Available		Not Available	

Occupational Exposure Banding			
Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit	
tannic acid	E	≤ 0.01 mg/m³	
gallic acid	E	≤ 0.01 mg/m³	
ammonium hydroxide	E	≤ 0.1 ppm	
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

	Engineering controls are used to remove a hazard or place a be highly effective in protecting workers and will typically be in The basic types of engineering controls are: Process controls which involve changing the way a job activit Enclosure and/or isolation of emission source which keeps a "adds" and "removes" air in the work environment. Ventilation ventilation system must match the particular process and che Employers may need to use multiple types of controls to prev General exhaust is adequate under normal conditions. If risk obtain adequate protection. Provide adequate ventilation in warehouse or closed storage Air contaminants generated in the workplace possess varying circulating air required to effectively remove the contaminant.	ndependent of worker interactions to provide this hig y or process is done to reduce the risk. selected hazard "physically" away from the worker a is can remove or dilute an air contaminant if designer mical or contaminant in use. ent employee overexposure. of overexposure exists, wear SAA approved respira areas. g "escape" velocities which, in turn, determine the "c	gh level of protection. and ventilation that strategically d properly. The design of a tor. Correct fit is essential to	
	Type of Contaminant:		Speed:	
Appropriate engineering	aerosols, (released at low velocity into zone of active gene	ration)	0.5-1 m/s	
controls	direct spray, spray painting in shallow booths, gas discharg	e (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 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 favourable 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.			
Personal protection				
Eye and face protection	No special equipment for minor exposure i.e. when handling small quantities. OTHERWISE: For potentially moderate or heavy exposures: Safety glasses with side shields. NOTE: Contact lenses pose a special hazard; soft lenses may absorb irritants and ALL lenses concentrate them.			
Skin protection	See Hand protection below			
Hands/feet protection	<ul> <li>No special equipment needed when handling small quantities.</li> <li>OTHERWISE:</li> <li>For potentially moderate exposures:</li> <li>Wear general protective gloves, eg. light weight rubber gloves.</li> <li>For potentially heavy exposures:</li> <li>Wear chemical protective gloves, eg. PVC. and safety footwear.</li> </ul>			
		otwear.		

 Other protection
 No special equipment needed when handling small quantities.

 OTHERWISE:
 • Overalls.

 • Skin cleansing cream.
 • Eyewash unit.

 • Do not spray on hot surfaces.

#### 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:

Dy-Mark Zinc Guard Rust Converter

Material	CPI
BUTYL	С
BUTYL/NEOPRENE	С
CPE	С
HYPALON	С
NAT+NEOPR+NITRILE	С
NATURAL RUBBER	С
NATURAL+NEOPRENE	С
NEOPRENE	С
NEOPRENE/NATURAL	С
NITRILE	С
NITRILE+PVC	С
PE/EVAL/PE	С
PVA	С
PVC	С
PVDC/PE/PVDC	С
SARANEX-23	С
SARANEX-23 2-PLY	С
TEFLON	С
VITON/NEOPRENE	С

# Respiratory protection

Type KAX 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	KAX-AUS	-	KAX-PAPR-AUS / Class 1
up to 50 x ES	-	KAX-AUS / Class 1	-
up to 100 x ES	-	KAX-2	KAX-PAPR-2 ^

#### ^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

Aerosols, in common with most vapours/ mists, should never be used in confined spaces without adequate ventilation. Aerosols, containing agents designed to enhance or mask smell, have triggered allergic reactions in predisposed individuals.

\* 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.

#### **SECTION 9** Physical and chemical properties

#### Information on basic physical and chemical properties

Appearance	Highly flammable liquid; does not mix with water.		
Physical state	Liquid	Relative density (Water = 1)	Not Available
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Applicable	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)	*-41 (dimethyl ether)	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	HIGHLY FLAMMABLE.	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (%)	Not Available

Vapour density (Air = 1) Not Available

VOC g/L Not Available

# **SECTION 10 Stability and reactivity**

Reactivity	See section 7
Chemical stability	<ul> <li>Elevated temperatures.</li> <li>Presence of open flame.</li> <li>Product is considered stable.</li> <li>Hazardous polymerisation will not occur.</li> </ul>
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

## **SECTION 11 Toxicological information**

#### Information on toxicological effects

Inhaled	Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo. Aliphatic alcohols with more than 3-carbons cause headache, dizziness, drowsiness, muscle weakness and delirium, central depression, coma, seizures and behavioural changes. Secondary respiratory depression and failure, as well as low blood pressure and irregular heart rhythms, may follow. Following inhalation, ethers cause lethargy and stupor. Inhaling lower alkyl ethers results in headache, dizziness, weakness, blurred vision, seizures and possible coma. Material is highly volatile and may quickly form a concentrated atmosphere in confined or unventilated areas. The vapour may displace and replace air in breathing zone, acting as a simple asphyxiant. This may happen with little warning of overexposure. Inhalation of high concentrations of gas/vapour causes lung irritation with coughing and nausea, central nervous depression with headache and dizziness, slowing of reflexes, fatigue and inco-ordination. <b>WARNING:Intentional misuse by concentrating/inhaling contents may be lethal</b> . The odour of isopropanol may give some warning of exposure, but odour fatigue may occur. Inhalation of isopropanol may produce irritation of the nose and throat with sneezing, sore throat and runny nose. Inhalational exposure to diethyl ether may cause immediate unconsciousness, inco-ordination, blurring of vision, headache, dizziness and death depending on dose and extent of exposure. It is a weak heart sensitiser in dogs. Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual. Overexposure to non-ring alcohols causes nervous system symptoms. These include headache, muscle weakness and inco-ordination, giddiness, confusion, delirium and coma. Ingestion of alkyl ethers may produce stupor, blurred vision, headache, dizziness and irritation of the nose and throat. Respiratory distress and asphyxia may result. Not normally a hazard due to physical form of product. Considered an unlikely route of entry in commercial/industrial environments Central nervous system (CNS) depression may include general discomfort, symptoms of giddiness, headache, dizziness, nausea, anaesthetic effects, slowed reaction time, slurred speech and may progress to unconsciousness. Serious poisonings may result in respiratory depression and may be fatal.
Skin Contact	Repeated exposure may cause skin cracking, flaking or drying following normal handling and use. There is some evidence to suggest that the material may cause mild but significant inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering. Spray mist may produce discomfort Most liquid alcohols appear to act as primary skin irritants in humans. Significant percutaneous absorption occurs in rabbits but not apparently in man. Alkyl ethers may defat and dehydrate the skin producing dermatoses. Absorption may produce headache, dizziness, and central nervous system depression. Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material may damage the health of the individual; systemic effects may result following absorption.
Eye	Not considered to be a risk because of the extreme volatility of the gas. Eye contact with alkyl ethers (vapour or liquid) may produce irritation, redness and tears. Isopropanol vapour may cause mild eye irritation at 400 parts per million. Splashes may cause severe eye irritation, possible burns to the cornea and eye damage. Eye contact may cause tearing and blurring of vision. There is evidence that material may produce eye irritation in some persons and produce eye damage 24 hours or more after instillation. Severe inflammation may be expected with pain. The liquid may produce eye discomfort and is capable of causing temporary impairment of vision and/or transient eye inflammation, ulceration
Chronic	Ample evidence exists, from results in experimentation, that developmental disorders are directly caused by human exposure to the material. Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following. Main route of exposure to the gas in the workplace is by inhalation. Chronic exposure to alkyl ethers may result in loss of appetite, excessive thirst, fatigue, and weight loss. Long term, or repeated exposure of isopropanol may cause inco-ordination and tredness. Repeated inhalation exposure los isopropanol may produce sleepiness, inco-ordination and liver degeneration. Animal data show developmental effects only at exposure levels that produce toxic effects in adult animals. Isopropanol does not cause genetic damage. There are inconclusive reports of human sensitisation from skin contacts with isopropanol. Chronic alcoholics are more tolerant of the whole-body effects of isopropanol. Animal testing showed the chronic exposure did not produce reproductive effects. NOTE: Commercial isopropanol does not contain "isopropyl oil", which caused an excess incidence of sinus and throat cancers in isoproanol production workers in the past. "Isopropyl oil" is no longer formed during production of isopropanol. Workers exposed to acetone for long periods showed inflammation of the airways, stomach and small bowel, attacks of giddiness and loss of strength. Exposure to acetone may enhance the liver toxicity of chlorinated solvents.
	Continued

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# Dy-Mark Zinc Guard Rust Converter

Dy-Mark Zinc Guard Rust	TOXICITY	IRRITATION
Converter	Not Available	Not Available
	ΤΟΧΙΟΙΤΥ	IRRITATION
	Dermal (rabbit) LD50: 20 mg/kg <sup>[2]</sup>	Eye (human): 500 ppm - irritant
	Inhalation(Mouse) LC50; 44 mg/L4h <sup>[2]</sup>	Eye (rabbit): 20mg/24hr -moderate
aaatana	Oral(Rat) LD50; 1738 mg/kg <sup>[1]</sup>	Eye (rabbit): 3.95 mg - SEVERE
acetone		Eye: adverse effect observed (irritating) <sup>[1]</sup>
		Skin (rabbit): 500 mg/24hr - mild
		Skin (rabbit):395mg (open) - mild
		Skin: no adverse effect observed (not irritating) $\left[ 1 \right]$
	ΤΟΧΙCITY	IRRITATION
	Dermal (rabbit) LD50: 12792 mg/kg <sup>[1]</sup>	Eye (rabbit): 10 mg - moderate
isopropanol	Inhalation(Mouse) LC50; 27.2 mg/l4h <sup>[2]</sup>	Eye (rabbit): 100 mg - SEVERE
	Oral(Mouse) LD50; 3600 mg/kg <sup>[2]</sup>	Eye (rabbit): 100mg/24hr-moderate
		Skin (rabbit): 500 mg - mild
	ΤΟΧΙΟΙΤΥ	IRRITATION
tannic acid	Oral(Rat) LD50; 2260 mg/kg <sup>[2]</sup>	Not Available
	ΤΟΧΙΟΙΤΥ	IRRITATION
	Dermal (rabbit) LD50: 667 mg/kg <sup>[1]</sup>	Eye (rabbit): 100 mg SEVERE
	Inhalation(Rat) LC50; 2.21 mg/l4h <sup>[2]</sup>	Eye (rabbit): 100 mg/24h-moderate
thylene glycol monobutyl ether	Oral(Guinea) LD50; 1414 mg/kg <sup>[1]</sup>	Eye: adverse effect observed (irritating) <sup>[1]</sup>
o thoi		Skin (rabbit): 500 mg, open; mild
		Skin: adverse effect observed (irritating) <sup>[1]</sup>
		Skin: no adverse effect observed (not irritating) $\!\!\!\![1]$
	тохісіту	IRRITATION
gallic acid	Oral(Mouse) LD50; >5000 mg/kg <sup>[1]</sup>	Not Available
	тохісіту	IRRITATION
ammonium hydroxide	Inhalation(Rat) LC50; 2000 ppm4h <sup>[2]</sup>	Eye (rabbit): 0.25 mg SEVERE
·	Oral(Rat) LD50; ~350-370 mg/kg <sup>[2]</sup>	Eye (rabbit): 1 mg/30s SEVERE
	ΤΟΧΙΟΙΤΥ	IRRITATION
dimethyl ether	Inhalation(Rat) LC50; >20000 ppm4h <sup>[1]</sup>	Not Available
Legend:	1. Value obtained from Europe ECHA Registered Substan	ces - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwi

ACETONE	For acetone: The acute toxicity of acetone is low. Acetone is not a skin irritant or sensitizer, but it removes fat from the skin, and it also irritates the eye. Animal testing shows acetone may cause macrocytic anaemia. Studies in humans have shown that exposure to acetone at a level of 2375 mg/cubic metre has not caused neurobehavioural deficits.
ISOPROPANOL	Isopropanol is irritating to the eyes, nose and throat but generally not to the skin. Prolonged high dose exposure may also produce depression of the central nervous system and drowsiness. Few have reported skin irritation. It can be absorbed from the skin or when inhaled. Intentional swallowing is common particularly among alcoholics or suicide victims and also leads to fainting, breathing difficulty, nausea, vomiting and headache. In the absence of unconsciousness, recovery usually occurred. Repeated doses may damage the kidneys. A decrease in the frequency of mating has been found in among animals, and newborns have been found to have a greater incidence of low birth weight. Tumours of the testes have been observed in the male rat.
TANNIC ACID	For nitric oxide synthase (NOS) inhibitors: Nitric oxide provokes many cellular responses and modulates physiological functions differently depending on the organ system. Systemic nitric oxide inhibition may be limited by the widespread involvement of nitric oxide in most body systems. To further complicate matters, depending on the disease studied, changes in nitric oxide may either ameliorate or exacerbate the pathophysiology of the disease. This proves to be a particular challenge in patients with co-morbidities Nitric oxide inhibition could be detrimental to patients with cardiovascular and renal diseases. Nitric oxide is cardio-protective during ischemic events by causing coronary vasodilation and improving oxygen delivery. Nitric oxide inhibition also suppresses statin-induced oxygen delivery to myocardium. Nitric oxide inhibition could contribute to endothelial dysfunction and inflammatory syndrome in patients with autoimmune disease, leading to an escalation of cardiovascular morbidity and mortality. One animal study shows that chronic NOS inhibition may also produce long-term biological effects by enhancing early atherogenesis in animals In patients with chronic kidney disease, nitric oxide inhibition aggravates endothelial dysfunction, vasoconstriction, blood pressure elevation and atherosclerosis, thereby worsening kidney disease progression, particularly in the setting of diabetic nephropathy. Nitric oxide inhibition is also

demonstrated in insulin resistance. Erectile dysfunction and micturition disorders are also mediated by nitric oxide, and could be adversely affected by nitric oxide inhibition.

In a clinical trial on patients with severe sepsis and hypotension, L-NMMA ('Tilarginine'), the endogenous nonselective NOS inhibitor, caused a fall in cardiac output, worsening tissue perfusion.

The use of nitric oxide inhibitors in patients with poly-pharmacy remains a challenge, as there is inadequate understanding of interactions between nitric oxide inhibitors and other drugs. Known interactions have already been reported with statins, fibrates, thiazolidinediones, metformin, antioxidant vitamins, aspirin, n-3 polyunsaturated fatty acids and plant flavonoids.

Methylene blue, a nitric oxide inhibitor, has been used for many years in septic shock and anaphylactic shock. It was alleged to improve mortality by elevating blood pressure and systemic vascular resistance in these clinical scenarios. Nevertheless, outcome studies on the use of nitric oxide inhibitors in cardiogenic shock delivered disappointing results. Human studies were conducted only with nonselective l-arginine analogs, which fail to reduce mortality in septic shock. In fact, nonselective nitric oxide synthase (NOS) inhibitor treatment alone elevates mortality Nitric oxide (NO) is now known to play important functional roles in a variety of physiological systems. Within the vasculature, NO induces vasodilation, inhibits platelet aggregation, prevents neutrophil/platelet adhesion to endothelial cells, inhibits smooth muscle cell proliferation and migration, regulates programmed cell death (apoptosis) and maintains endothelial cell barrier function. NO generated by neurons acts as a neurotransmitter, whereas NO generated by macrophages in response to invading microbes acts as an antimicrobial agent. Because neurons, blood vessels and cells of the immune system are integral parts of the reproductive organs, and in view of the important functional role that NO plays in those systems, it is likely that NO is an important regulator of the biology and physiology of the reproductive system. NO has established itself as a polyvalent molecule which plays a decisive role in regulating multiple functions within the female as well as the male reproductive system. There is evidence that mouse and human spermatozoa contain constitutive nitric oxide synthase (cNOS) and can synthesise nitric oxide. Nitric oxide is also a potent regulator of embryonic differentiation, specifically in pre- and post-implantation mouse embryos - low levels may produce developmental toxicity. Nitric oxide synthase inhibitors, which suppress all forms of nitric oxide synthase increased the level of mortality of pre- and post-implantation embryos in females mated to intact males soon after the administration of inhibitors. Studies of the morphology of embryos have shown that there was a delay in embryogenesis at the stages of cleavage and gastrulation

Nitric oxide (NO) is produced locally in the bovine corpus luteum (CL) and appears to mediate prostaglandin F2a (PGF2a)-induced regression of the bovine CL in vivo and as a result luteal steroidogenesis; it may be one of the components of an autocrine/ paracrine luteolytic cascade induced by PGF2a.

Tannic acid could cause potential health hazards such as damage to the eye, skin, respiratory tract, and gastrointestinal tract. It may cause irritation, redness, pain, blurred vision, and possible eye damage. When tannic acid is absorbed through the skin in harmful amounts, it may cause irritation, redness, and pain. Nausea, vomiting and diarrhoea are symptoms of tannic acid ingestion and prolonged exposure may cause liver damage. Upon inhalation, tannic acid may cause respiratory tract irritation.

NOTE: Changes in kidney, liver, spleen and lungs are observed in animals exposed to high concentrations of this substance by all routes. \*\* ASCC (NZ) SDS

For ethylene glycol monoalkyl ethers and their acetates (EGMAEs):

Typical members of this category are ethylene glycol propylene ether (EGPE), ethylene glycol butyl ether (EGBE) and ethylene glycol hexyl ether (EGHE) and their acetates.

EGMAEs are substrates for alcohol dehydrogenase isozyme ADH-3, which catalyzes the conversion of their terminal alcohols to aldehydes (which are transient metabolites). Further, rapid conversion of the aldehydes by aldehyde dehydrogenase produces alkoxyacetic acids, which are the predominant urinary metabolites of mono substituted glycol ethers.

Acute Toxicity: Oral LD50 values in rats for all category members range from 739 (EGHE) to 3089 mg/kg bw (EGPE), with values increasing with decreasing molecular weight. Four to six hour acute inhalation toxicity studies were conducted for these chemicals in rats at the highest vapour concentrations practically achievable. Values range from LC0 > 85 ppm (508 mg/m3) for EGHE, LC50 > 400ppm (2620 mg/m3) for EGBEA to LC50 > 2132 ppm (9061 mg/m3) for EGPE. No lethality was observed for any of these materials under these conditions. Dermal LD50 values in rabbits range from 435 mg/kg bw (EGBE) to 1500 mg/kg bw (EGBEA). Overall these category members can be considered to be of low to moderate acute toxicity. All category members cause reversible irritation to skin and eyes, with EGBEA less irritating and EGHE more irritating than the other category members. EGPE and EGBE are not sensitisers in experimental animals or humans. Signs of acute toxicity in rats, mice and rabbits are consistent with haemolysis (with the exception of EGHE) and non-specific CNS depression typical of organic solvents in general. Alkoxyacetic acid metabolites, propoxyacetic acid (PAA) and butoxyacetic acid (BAA), are responsible for the red blood cell hemolysis. Signs of toxicity in humans deliberately ingesting cleaning fluids containing 9-22% EGBE are similar to those of rats, with the exception of haemolysis. Although decreased blood haemoglobin and/or haemoglobinuria were observed in some of the human cases, it is not clear if this was due to haemolysis or haemodilution as a result of administration of large volumes of fluid. Red blood cells of humans are many-fold more resistant to toxicity from EGPE and EGBE in *vitro* than those of rats.

**Repeat dose toxicity:** The fact that the NOAEL for repeated dose toxicity of EGBE is less than that of EGPE is consistent with red blood cells being more sensitive to EGBE than EGPE. Blood from mice, rats, hamsters, rabbits and baboons were sensitive to the effects of BAA *in vitro* and displayed similar responses, which included erythrocyte swelling (increased haematocrit and mean corpuscular hemoglobin), followed by hemolysis. Blood from humans, pigs, dogs, cats, and guinea pigs was less sensitive to haemolysis by BAA *in vitro*.

**Mutagenicity:** In the absence and presence of metabolic activation, EGBE tested negative for mutagenicity in Ames tests conducted in *S. typhimurium* strains TA97, TA98, TA100, TA1535 and TA1537 and EGHE tested negative in strains TA98, TA100, TA1535, TA1537 and TA1538. *In vitro* cytogenicity and sister chromatid exchange assays with EGBE and EGHE in Chinese Hamster Ovary Cells with and without metabolic activation and in vivo micronucleus tests with EGBE in rats and mice were negative, indicating that these glycol ethers are not genotoxic.

Carcinogenicity: In a 2-year inhalation chronic toxicity and carcinogenicity study with EGBE in rats and mice a significant increase in the incidence of liver haemangiosarcomas was seen in male mice and forestomach tumours in female mice. It was decided that based on the mode of action data available, there was no significant hazard for human carcinogenicity

Reproductive and developmental toxicity. The results of reproductive and developmental toxicity studies indicate that the glycol ethers in this category are not selectively toxic to the reproductive system or developing fetus, developmental toxicity is secondary to maternal toxicity. The repeated dose toxicity studies in which reproductive organs were examined indicate that the members of this category are not associated with toxicity to reproductive organs (including the testes).

Results of the developmental toxicity studies conducted via inhalation exposures during gestation periods on EGPE (rabbits -125, 250, 500 ppm or 531, 1062, or 2125 mg/m3 and rats - 100, 200, 300, 400 ppm or 425, 850, 1275, or 1700 mg/m3), EGBE (rat and rabbit - 25, 50, 100, 200 ppm or 121, 241, 483, or 966 mg/m3), and EGHE (rat and rabbit - 20.8, 41.4, 79.2 ppm or 124, 248, or 474 mg/m3) indicate that the members of the category are not teratogenic.

The NOAELs for developmental toxicity are greater than 500 ppm or 2125 mg/m3 (rabbit-EGPE), 100 ppm or 425 mg/m3 (rat-EGPE), 50 ppm or 241 mg/m3 (rat EGBE) and 100 ppm or 483 mg/m3 (rabbit EGBE) and greater than 79.2 ppm or 474 mg/m3 (rat and rabbit-EGHE). Animal testing showed that exposure to ethylene glycol monobutyl ether resulted in toxicity to both the mother and the embryo. Reproductive effects were thought to be less than that of other monoalkyl ethers of ethylene glycol.

Chronic exposure may cause anaemia, with enlargement and fragility of red blood cells. It is thought that in animals butoxyethanol may cause generalized clotting and bone infarction. In animals, 2-butoxyethanol also increased the rate of some cancers, including liver cancer. For ethylene glycol:

Ethylene glycol is quickly and extensively absorbed throughout the gastrointestinal tract. Limited information suggests that it is also absorbed through the airways; absorption through skin is apparently slow. Following absorption, it is distributed throughout the body. In humans, it is initially metabolized by alcohol dehydrogenase to form glycoaldehyde, which is rapidly converted to glycolic acid and glycoxal. These breakdown products are oxidized to glyoxylate, which may be further metabolized to formic acid, and glycine. Breakdown of both glycine and formic acid can generate carbon dioxide, which is one of the major elimination products of ethylene glycol. In addition to exhaled carbon dioxide, ethylene glycol is eliminated in the urine as both the parent compound and glycolic acid. Elimination is rapid and occurs within a few hours. Respiratory effects: Respiratory system involvement occurs 12-24 hours after swallowing sufficient amounts of ethylene glycol. Symptoms include hyperventilation, shallow rapid breathing, and generalized swelling of the lungs with calcium oxalate deposits occasionally appearing in

## ETHYLENE GLYCOL MONOBUTYL ETHER

	the lungs. Respiratory system involvement appears to be dose-dependent and occurs at may be other changes compatible with adult respiratory distress syndrome (ARDS). Swe aspiration of stomach contents. Symptoms related to acidosis such as fast or excessive to symptoms such as swelling of the lung and inflammation of the bronchi and lungs are rel	lling of the lung can be a result of heart failure, ARDS, o preathing are frequently observed; however, major	
	poisoning. Cardiovascular effects: Cardiovascular system involvement in humans occurs at the sam second phase of ethylene glycol poisoning by swallowing, which is 12-24 hours after acu heart include increased heart rate, heart enlargement and ventricular gallop. There may to cardiogenic shock. In lethal cases, inflammation of the heart muscle has been observe rare and usually seen after swallowing higher doses of ethylene glycol. In summary, acut	te exposure. The symptoms of poisoning involving the also be high or low blood pressure, which may progress ad at autopsy. Cardiovascular involvement appears to be	
	serious cardiovascular effects in humans. The effects of a long-term, low-dose exposure Gastrointestinal effects: Common early acute effects of swallowing ethylene glycol includ abdominal cramping and pain. One patient showed intermittent diarrhea and pain, and at	e nausea, vomiting with or without blood, heartburn and	
	have occurred. Musculoskeletal effects: Reported musculoskeletal effects in cases of acute ethylene gly pain, associated with high levels of creatinine in the blood, and jerks and contractions as		
	Liver effects: Autopsies carried out on people who died following acute ethylene glycol po liver as well as hydropic and fatty degeneration and cell death (necrosis) of the liver.		
	Kidney effects: Adverse kidney effects are seen during the third stage of ethylene glycol oxalate crystals are deposited in the tubules and are seen in the urine. There may also b inflammation of the tubule interstitium. If untreated, the degree of kidney damage progres decreased kidney function, reduction in urine output and ultimately, kidney failure. With a	e degeneration and death of tubule cells, and sees and leads to blood and protein in the urine,	
	to normal or near normal. Metabolic effects: Metabolic changes can occur within 12 hours of exposure to ethylene e accumulation of glycolic acid in the blood and therefore a reduction in blood pH. The anic anions (mainly glycolate).		
	Effects on the nervous system: Adverse reactions involving the nervous system are amo glycol is swallowed. These early effects are also the only symptoms caused by unmetabor (see above), they occur from 0.5-12 hours after exposure and are considered to be part of Inco-ordination, slurred speech, confusion and sleepiness are common in the early stage there may be effects on cranial nerves (which may be reversible over many months). Sw calcium oxalate in the walls of the small blood vessels of the brain were found at autopsy poisoning.	blised ethylene glycol. Together with metabolic effects of the first stage in ethylene glycol poisoning. s, as are irritation, restlessness and disorientation. Later elling of the brain (cerebrum) and crystal deposits of	
	Reproductive effects: Animal testing showed that ethylene glycol may affect fertility, survi Effects on development: Animal studies indicate that birth defects may occur after expos weight. Cancer: No studies are known regarding cancer effects in humans or animal, after skin e	ure in pregnancy; there may also be reduction in foetal	
	Genetic toxicity: No human studies available, but animal testing results are consistently r		
GALLIC ACID	Oral (mice) NOAEL: 5000 mg/kg (non toxic) ** ** [Food and Chemical Toxicology, 2001, Vol 39, Iss 9, pp 919-922] 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.		
ACETONE & ISOPROPANOL & ETHYLENE GLYCOL MONOBUTYL ETHER	The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.		
	Asthma-like symptoms may continue for months or even years after exposure to the mat		
ISOPROPANOL & GALLIC ACID & AMMONIUM HYDROXIDE	known as reactive airways dysfunction syndrome (RADS) which can occur after exposure criteria for diagnosing RADS include the absence of previous airways disease in a non-a asthma-like symptoms within minutes to hours of a documented exposure to the irritant. airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on me lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating i the concentration of and duration of exposure to the irritating substance. On the other ha result of exposure due to high concentrations of irritating substance (often particles) and disorder is characterized by difficulty breathing, cough and mucus production.	e to high levels of highly irritating compound. Main topic individual, with sudden onset of persistent Other criteria for diagnosis of RADS include a reversible thacholine challenge testing, and the lack of minimal nhalation is an infrequent disorder with rates related to nd, industrial bronchitis is a disorder that occurs as a	
ACID & AMMONIUM	criteria for diagnosing RADS include the absence of previous airways disease in a non-a asthma-like symptoms within minutes to hours of a documented exposure to the irritant. airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on me lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating i the concentration of and duration of exposure to the irritating substance. On the other ha result of exposure due to high concentrations of irritating substance (often particles) and	e to high levels of highly irritating compound. Main topic individual, with sudden onset of persistent Other criteria for diagnosis of RADS include a reversible thacholine challenge testing, and the lack of minimal nhalation is an infrequent disorder with rates related to nd, industrial bronchitis is a disorder that occurs as a	
ACID & AMMONIUM HYDROXIDE ISOPROPANOL & TANNIC	criteria for diagnosing RADS include the absence of previous airways disease in a non-a asthma-like symptoms within minutes to hours of a documented exposure to the irritant. a airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on me lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating i the concentration of and duration of exposure to the irritating substance. On the other ha result of exposure due to high concentrations of irritating substance (often particles) and disorder is characterized by difficulty breathing, cough and mucus production. The substance is classified by IARC as Group 3: <b>NOT</b> classifiable as to its carcinogenicity to humans.	e to high levels of highly irritating compound. Main topic individual, with sudden onset of persistent Other criteria for diagnosis of RADS include a reversible sthacholine challenge testing, and the lack of minimal nhalation is an infrequent disorder with rates related to nd, industrial bronchitis is a disorder that occurs as a is completely reversible after exposure ceases. The	
ACID & AMMONIUM HYDROXIDE ISOPROPANOL & TANNIC ACID ETHYLENE GLYCOL MONOBUTYL ETHER &	criteria for diagnosing RADS include the absence of previous airways disease in a non-a asthma-like symptoms within minutes to hours of a documented exposure to the irritant. I airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on me lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating i the concentration of and duration of exposure to the irritating substance. On the other ha result of exposure due to high concentrations of irritating substance (often particles) and disorder is characterized by difficulty breathing, cough and mucus production. The substance is classified by IARC as Group 3: <b>NOT</b> classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing.	e to high levels of highly irritating compound. Main topic individual, with sudden onset of persistent Dther criteria for diagnosis of RADS include a reversible sthacholine challenge testing, and the lack of minimal nhalation is an infrequent disorder with rates related to nd, industrial bronchitis is a disorder that occurs as a is completely reversible after exposure ceases. The Repeated or prolonged exposure to irritants may	
ACID & AMMONIUM HYDROXIDE ISOPROPANOL & TANNIC ACID ETHYLENE GLYCOL MONOBUTYL ETHER & AMMONIUM HYDROXIDE	criteria for diagnosing RADS include the absence of previous airways disease in a non-a asthma-like symptoms within minutes to hours of a documented exposure to the irritant. a inflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on me lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating i the concentration of and duration of exposure to the irritating substance. On the other ha result of exposure due to high concentrations of irritating substance (often particles) and disorder is characterized by difficulty breathing, cough and mucus production. The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing. The material may produce severe irritation to the eye causing pronounced inflammation. produce conjunctivitis.	e to high levels of highly irritating compound. Main topic individual, with sudden onset of persistent Other criteria for diagnosis of RADS include a reversible ithacholine challenge testing, and the lack of minimal nhalation is an infrequent disorder with rates related to nd, industrial bronchitis is a disorder that occurs as a is completely reversible after exposure ceases. The Repeated or prolonged exposure to irritants may	
ACID & AMMONIUM HYDROXIDE ISOPROPANOL & TANNIC ACID ETHYLENE GLYCOL MONOBUTYL ETHER & AMMONIUM HYDROXIDE Acute Toxicity	criteria for diagnosing RADS include the absence of previous airways disease in a non-a asthma-like symptoms within minutes to hours of a documented exposure to the irritant. airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on me lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating i the concentration of and duration of exposure to the irritating substance. On the other ha result of exposure due to high concentrations of irritating substance (often particles) and disorder is characterized by difficulty breathing, cough and mucus production. The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing. The material may produce severe irritation to the eye causing pronounced inflammation. produce conjunctivitis. Carcinogenicity.	e to high levels of highly irritating compound. Main topic individual, with sudden onset of persistent Other criteria for diagnosis of RADS include a reversible ithacholine challenge testing, and the lack of minimal nhalation is an infrequent disorder with rates related to nha, industrial bronchitis is a disorder that occurs as a is completely reversible after exposure ceases. The Repeated or prolonged exposure to irritants may	
ACID & AMMONIUM HYDROXIDE ISOPROPANOL & TANNIC ACID ETHYLENE GLYCOL MONOBUTYL ETHER & AMMONIUM HYDROXIDE Acute Toxicity Skin Irritation/Corrosion	criteria for diagnosing RADS include the absence of previous airways disease in a non-a asthma-like symptoms within minutes to hours of a documented exposure to the irritant, a airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on me lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating i the concentration of and duration of exposure to the irritating substance. On the other ha result of exposure due to high concentrations of irritating substance (often particles) and disorder is characterized by difficulty breathing, cough and mucus production. The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing. The material may produce severe irritation to the eye causing pronounced inflammation. produce conjunctivitis.  Carcinogenicity Reproductivity	e to high levels of highly irritating compound. Main topic individual, with sudden onset of persistent Other criteria for diagnosis of RADS include a reversible thacholine challenge testing, and the lack of minimal nhalation is an infrequent disorder with rates related to nd, industrial bronchitis is a disorder that occurs as a is completely reversible after exposure ceases. The Repeated or prolonged exposure to irritants may	

# **SECTION 12 Ecological information**

Toxicity					
	Endpoint	Test Duration (hr)	Species	Value	Source
Dy-Mark Zinc Guard Rust Converter	Not Available	Not Available	Not Available	Not Available	Not Available

	Endpoint	Test Duration (hr)	Species	Value	Sourc
	NOEC(ECx)	48h	Fish	0.001mg/L	4
acetone	LC50	96h	Fish	>100mg/l	4
	EC50	48h	Crustacea	6098.4mg/L	5
	EC50	96h	Algae or other aquatic plants	9.873-27.684mg/l	4
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	EC50(ECx)	24h	Algae or other aquatic plants	0.011mg/L	4
	EC50	72h	Algae or other aquatic plants	>1000mg/l	1
isopropanol	LC50	96h	Fish	4200mg/l	4
	EC50	48h	Crustacea	7550mg/l	4
	EC50	96h	Algae or other aquatic plants	>1000mg/l	1
	Endpoint	Test Duration (hr)	Species	Value	Sourc
tannic acid	LC50	96h	Fish	37mg/l	2
	NOEC(ECx)	72h	Fish	0.96mg/L	4
	Endpoint	Test Duration (hr)	Species	Value	Sour
	LC50	96h	Fish	1250mg/l	2
ethylene glycol monobutyl	EC50	72h	Algae or other aquatic plants	623mg/l	2
ether	EC50	48h	Crustacea	164mg/l	2
	EC10(ECx)	48h	Crustacea	7.2mg/l	2
	EC50	96h	Algae or other aquatic plants	720mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Sour
	EC50	48h	Crustacea	19.1mg/l	2
gallic acid	LC50	96h	Fish	>100mg/l	2
	NOEC(ECx)	48h	Algae or other aquatic plants	1.6mg/l	4
	Endpoint	Test Duration (hr)	Species	Value	Sour
ammonium hydroxide	LC50	96h	Fish	33.3mg/L	4
	EC50(ECx)	96h	Crustacea	0.83mg/L	5
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	EC50	48h	Crustacea	>4400mg/L	2
dimethyl ether	LC50	96h	Fish	1783.04mg/l	2
	NOEC(ECx)	48h	Crustacea	>4000mg/l	1
	EC50	96h	Algae or other aquatic plants	154.917mg/l	2

Extracted from 1. IOCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

#### DO NOT discharge into sewer or waterways.

## Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
acetone	LOW (Half-life = 14 days)	MEDIUM (Half-life = 116.25 days)
isopropanol	LOW (Half-life = 14 days)	LOW (Half-life = 3 days)
ethylene glycol monobutyl ether	LOW (Half-life = 56 days)	LOW (Half-life = 1.37 days)
gallic acid	LOW	LOW
dimethyl ether	LOW	LOW

#### **Bioaccumulative potential**

Ingredient	Bioaccumulation
acetone	LOW (BCF = 0.69)
isopropanol	LOW (LogKOW = 0.05)
ethylene glycol monobutyl ether	LOW (BCF = 2.51)
gallic acid	LOW (LogKOW = 0.7)
dimethyl ether	LOW (LogKOW = 0.1)

## Mobility in soil

Ingredient	Mobility
acetone	HIGH (KOC = 1.981)

Ingredient	Mobility
isopropanol	HIGH (KOC = 1.06)
ethylene glycol monobutyl ether	HIGH (KOC = 1)
gallic acid	LOW (KOC = 64.16)
dimethyl ether	HIGH (KOC = 1.292)

## **SECTION 13 Disposal considerations**

Waste treatment methods	
Product / Packaging disposal	<ul> <li>DO NOT allow wash water from cleaning or process equipment to enter drains.</li> <li>It may be necessary to collect all wash water for treatment before disposal.</li> <li>In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.</li> <li>Where in doubt contact the responsible authority.</li> <li>Consult State Land Waste Management Authority for disposal.</li> <li>Discharge contents of damaged aerosol cans at an approved site.</li> <li>Allow small quantifies to evaporate.</li> <li>DO NOT incinerate or puncture aerosol cans.</li> <li>Bury residues and emptied aerosol cans at an approved site.</li> </ul>

## **SECTION 14 Transport information**

# Labels Required Image: Constraint of the pollutant of the po

## Land transport (ADG)

Eand transport (ADO)	
UN number	1950
UN proper shipping name	AEROSOLS
Transport hazard class(es)	Class     2.1       Subrisk     Not Applicable
Packing group	Not Applicable
Environmental hazard	Not Applicable
Special precautions for user	Special provisions63 190 277 327 344 381Limited quantity1000ml

## Air transport (ICAO-IATA / DGR)

	-,			
UN number	1950			
UN proper shipping name	Aerosols, flammable			
	ICAO/IATA Class	2.1		
Transport hazard class(es)	ICAO / IATA Subrisk	Not Applicable		
	ERG Code	10L		
Packing group	Not Applicable			
Environmental hazard	Not Applicable			
	Special provisions		A145 A167 A802	
	Cargo Only Packing Ir	nstructions	203	
	Cargo Only Maximum	Qty / Pack	150 kg	
Special precautions for user	Passenger and Cargo	Packing Instructions	203	
	Passenger and Cargo	Maximum Qty / Pack	75 kg	
	Passenger and Cargo	Limited Quantity Packing Instructions	Y203	
	Passenger and Cargo	Limited Maximum Qty / Pack	30 kg G	

## Sea transport (IMDG-Code / GGVSee)

UN number	1950
UN proper shipping name	AEROSOLS

Transport hazard class(es)		2.1 Not Applicable
Packing group	Not Applicable	
Environmental hazard	Not Applicable	
Special precautions for user	EMS Number Special provisions Limited Quantities	

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
acetone	Not Available
isopropanol	Not Available
tannic acid	Not Available
ethylene glycol monobutyl ether	Not Available
gallic acid	Not Available
ammonium hydroxide	Not Available
dimethyl ether	Not Available

## Transport in bulk in accordance with the ICG Code

Ship Type
Not Available

# **SECTION 15 Regulatory information**

National Inventory

Status

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

acetone is found on the following regulatory lists	
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	Australian Inventory of Industrial Chemicals (AIIC)
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5	
isopropanol is found on the following regulatory lists	
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC
Australian Inventory of Industrial Chemicals (AIIC)	Monographs
tannic acid is found on the following regulatory lists	
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
Australian Inventory of Industrial Chemicals (AIIC)	
ethylene glycol monobutyl ether is found on the following regulatory lists	
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	Australian Inventory of Industrial Chemicals (AIIC)
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
gallic acid is found on the following regulatory lists	
Australian Inventory of Industrial Chemicals (AIIC)	
ammonium hydroxide is found on the following regulatory lists	
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	Australian Inventory of Industrial Chemicals (AIIC)
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6	
dimethyl ether is found on the following regulatory lists	
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	Australian Inventory of Industrial Chemicals (AIIC)
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5	
National Inventory Status	

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (acetone; isopropanol; ethylene glycol monobutyl ether; gallic acid; ammonium hydroxide; dimethyl ether)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (tannic acid)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

#### **SECTION 16 Other information**

Revision Date	02/08/2021	
Initial Date	02/08/2021	
SDS Version Summary		
SDS Version Summary Version	Date of Update	Sections Updated

#### Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

#### Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average PC-STEL: Permissible Concentration-Short Term Exposure Limit IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure  $\mathsf{Limit}_\circ$ IDLH: Immediately Dangerous to Life or Health Concentrations ES: Exposure Standard **OSF: Odour Safety Factor** NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level TLV: Threshold Limit Value LOD: Limit Of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors BEI: Biological Exposure Index AIIC: Australian Inventory of Industrial Chemicals DSL: Domestic Substances List NDSL: Non-Domestic Substances List IECSC: Inventory of Existing Chemical Substance in China EINECS: European INventory of Existing Commercial chemical Substances ELINCS: European List of Notified Chemical Substances NLP: No-Longer Polymers ENCS: Existing and New Chemical Substances Inventory KECI: Korea Existing Chemicals Inventory NZIoC: New Zealand Inventory of Chemicals PICCS: Philippine Inventory of Chemicals and Chemical Substances TSCA: Toxic Substances Control Act TCSI: Taiwan Chemical Substance Inventory INSQ: Inventario Nacional de Sustancias Químicas NCI: National Chemical Inventory FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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end of SDS