

Tinning Paste

RestoFinish

Chemwatch: 5544-25

Version No: 3.1

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard (WH) Code: 2

Issue Date: 29/06/2022

Print Date: 29/06/2022

L.GHS,AUS,EN,E

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

Product Identifier

Product name	Tinning Paste
Chemical Name	Not Applicable
Synonyms	001-0201/0204
Proper shipping name	CORROSIVE LIQUID, N.O.S. (contains zinc chloride and lead)
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	Used for tin coating and soldering of metals.
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Details of the supplier of the safety data sheet

Registered company name	RestoFinish
Address	6/8 Stockyard Place West Gosford NSW 2250 Australia
Telephone	(02) 4321 0339
Fax	(02) 4321 0338
Website	www.restofinish.com.au
Email	info@restofinish.com.au

Emergency telephone number

Association / Organisation	RestoFinish
Emergency telephone numbers	+61 2 4321 0339 (Mon-Fri 9am-4.30pm)
Other emergency telephone numbers	000 (After Hours)

SECTION 2 Hazards identification

Classification of the substance or mixture

Poisons Schedule	S6
Classification [1]	Corrosive to Metals Category 1, Skin Corrosion/Irritation Category 1B, Serious Eye Damage/Eye Irritation Category 1, Reproductive Toxicity Category 1B, Reproductive Toxicity Effects on or via Lactation, Hazardous to the Aquatic Environment Long-Term Hazard Category 2
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)	
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Signal word **Danger**

Hazard statement(s)

H290	May be corrosive to metals.
H314	Causes severe skin burns and eye damage.
H360Df	May damage the unborn child. Suspected of damaging fertility.
H362	May cause harm to breast-fed children.
H411	Toxic to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P260	Do not breathe mist/vapours/spray.

P263	Avoid contact during pregnancy and while nursing.
P264	Wash all exposed external body areas thoroughly after handling.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P234	Keep only in original packaging.
P270	Do not eat, drink or smoke when using this product.
P273	Avoid release to the environment.

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water [or shower].
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P308+P313	IF exposed or concerned: Get medical advice/ attention.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P363	Wash contaminated clothing before reuse.
P390	Absorb spillage to prevent material damage.
P391	Collect spillage.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.

Precautionary statement(s) Storage

P405	Store locked up.
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Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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Not Applicable

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
7439-92-1	58-62	<u>lead</u>
7440-31-5	38-42	<u>tin</u>
7646-85-7	<10	<u>zinc chloride</u>
12125-02-9	<5	<u>ammonium chloride</u>

Legend: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> Immediately hold eyelids apart and flush the eye continuously with running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	<p>If skin or hair contact occurs:</p> <ul style="list-style-type: none"> 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 Centre. Transport to hospital, or doctor.
Inhalation	<ul style="list-style-type: none"> Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema. Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs). As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested. Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered. <p>This must definitely be left to a doctor or person authorised by him/her. (ICSC13719)</p> <ul style="list-style-type: none"> If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay.

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Ingestion

- For advice, contact a Poisons Information Centre or a doctor at once.
- Urgent hospital treatment is likely to be needed.
- If swallowed do **NOT** induce vomiting.
- If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
- Observe the patient carefully.
- Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.
- Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.
- Transport to hospital or doctor without delay.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

For acute or short term repeated exposures to strong acids:

- Airway problems may arise from laryngeal edema and inhalation exposure. Treat with 100% oxygen initially.
- Respiratory distress may require cricothyroidotomy if endotracheal intubation is contraindicated by excessive swelling.
- Intravenous lines should be established immediately in all cases where there is evidence of circulatory compromise.
- Strong acids produce a coagulation necrosis characterised by formation of a coagulum (eschar) as a result of the desiccating action of the acid on proteins in specific tissues.

INGESTION:

- Immediate dilution (milk or water) within 30 minutes post ingestion is recommended.
- DO NOT attempt to neutralise the acid since exothermic reaction may extend the corrosive injury.**
- Be careful to avoid further vomit since re-exposure of the mucosa to the acid is harmful. Limit fluids to one or two glasses in an adult.
- Charcoal has no place in acid management.
- Some authors suggest the use of lavage within 1 hour of ingestion.

SKIN:

- Skin lesions require copious saline irrigation. Treat chemical burns as thermal burns with non-adherent gauze and wrapping.
- Deep second-degree burns may benefit from topical silver sulfadiazine.

EYE:

- Eye injuries require retraction of the eyelids to ensure thorough irrigation of the conjunctival cul-de-sacs. Irrigation should last at least 20-30 minutes. **DO NOT use neutralising agents or any other additives.** Several litres of saline are required.
- Cycloplegic drops, (1% cyclopentolate for short-term use or 5% homatropine for longer term use) antibiotic drops, vasoconstrictive agents or artificial tears may be indicated dependent on the severity of the injury.
- Steroid eye drops should only be administered with the approval of a consulting ophthalmologist).

[Ellenhorn and Barceloux: Medical Toxicology]

Copper, magnesium, aluminium, antimony, iron, manganese, nickel, zinc (and their compounds) in welding, brazing, galvanising or smelting operations all give rise to thermally produced particulates of smaller dimension than may be produced if the metals are divided mechanically. Where insufficient ventilation or respiratory protection is available these particulates may produce "metal fume fever" in workers from an acute or long term exposure.

- Onset occurs in 4-6 hours generally on the evening following exposure. Tolerance develops in workers but may be lost over the weekend. (Monday Morning Fever)
- Pulmonary function tests may indicate reduced lung volumes, small airway obstruction and decreased carbon monoxide diffusing capacity but these abnormalities resolve after several months.
- Although mildly elevated urinary levels of heavy metal may occur they do not correlate with clinical effects.
- The general approach to treatment is recognition of the disease, supportive care and prevention of exposure.
- Seriously symptomatic patients should receive chest x-rays, have arterial blood gases determined and be observed for the development of tracheobronchitis and pulmonary edema.

[Ellenhorn and Barceloux: Medical Toxicology]

- Gastric acids solubilise lead and its salts and lead absorption occurs in the small bowel.
- Particles of less than 1 µm diameter are substantially absorbed by the alveoli following inhalation.
- Lead is distributed to the red blood cells and has a half-life of 35 days. It is subsequently redistributed to soft tissue & bone-stores or eliminated. The kidney accounts for 75% of daily lead loss; integumentary and alimentary losses account for the remainder.
- Neurasthenic symptoms are the most common symptoms of intoxication. Lead toxicity produces a classic motor neuropathy. Acute encephalopathy appears infrequently in adults. Diazepam is the best drug for seizures.
- Whole-blood lead is the best measure of recent exposure; free erythrocyte protoporphyrin (FEP) provides the best screening for chronic exposure. Obvious clinical symptoms occur in adults when whole-blood lead exceeds 80 µg/dL.
- British Anti-Lewisite is an effective antidote and enhances faecal and urinary excretion of lead. The onset of action of BAL is about 30 minutes and most of the chelated metal complex is excreted in 4-6 hours, primarily in the bile. Adverse reaction appears in up to 50% of patients given BAL in doses exceeding 5 mg/kg. CaNa2EDTA has also been used alone or in concert with BAL as an antidote. D-penicillamine is the usual oral agent for mobilisation of bone lead; its use in the treatment of lead poisoning remains investigational. 2,3-dimercapto-1-propanesulfonic acid (DMPS) and dimercaptosuccinic acid (DMSA) are water soluble analogues of BAL and their effectiveness is undergoing review. As a rule, stop BAL if lead decreases below 50 µg/dL; stop CaNa2EDTA if blood lead decreases below 40 µg/dL or urinary lead drops below 2 mg/24hrs.

[Ellenhorn & Barceloux: Medical Toxicology]**BIOLOGICAL EXPOSURE INDEX - BEI**

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

Determinant	Index	Sampling Time	Comments
1. Lead in blood	30 µg/100 ml	Not Critical	
2. Lead in urine	150 µg/gm creatinine	Not Critical	B
3. Zinc protoporphyrin in blood	250 µg/100 ml erythrocytes OR 100 µg/100 ml blood	After 1 month exposure	B

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

SECTION 5 Firefighting measures**Extinguishing media**

- DO NOT** use halogenated fire extinguishing agents.
- Metal dust fires need to be smothered with sand, inert dry powders.
- DO NOT USE WATER, CO2 or FOAM.**
- Use DRY sand, graphite powder, dry sodium chloride based extinguishers, G-1 or Met L-X to smother fire.
- Confining or smothering material is preferable to applying water as chemical reaction may produce flammable and explosive hydrogen gas.
- Chemical reaction with CO2 may produce flammable and explosive methane.
- If impossible to extinguish, withdraw, protect surroundings and allow fire to burn itself out.

Special hazards arising from the substrate or mixture

Fire Incompatibility	<ul style="list-style-type: none"> Reacts with acids producing flammable / explosive hydrogen (H₂) gas None known.
Advice for firefighters	
Fire Fighting	<ul style="list-style-type: none"> Alert Fire Brigade and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus. Prevent, by any means available, spillage from entering drains or water course. Use fire fighting procedures suitable for surrounding area. Do not approach containers suspected to be hot. Cool fire exposed containers with water spray from a protected location. If safe to do so, remove containers from path of fire. Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	<ul style="list-style-type: none"> Non combustible. Not considered to be a significant fire risk. Acids may react with metals to produce hydrogen, a highly flammable and explosive gas. Heating may cause expansion or decomposition leading to violent rupture of containers. May emit corrosive, poisonous fumes. May emit acrid smoke. <p>Decomposition may produce toxic fumes of: hydrogen chloride metal oxides</p>
HAZCHEM	2X

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	<ul style="list-style-type: none"> Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material. Check regularly for spills and leaks. Clean up all spills immediately. Avoid breathing vapours and contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Contain and absorb spill with sand, earth, inert material or vermiculite. Wipe up. Place in a suitable, labelled container for waste disposal.
Major Spills	<ul style="list-style-type: none"> Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus. Prevent, by any means available, spillage from entering drains or water course. Consider evacuation (or protect in place). Stop leak if safe to do so. Contain spill with sand, earth or vermiculite. Collect recoverable product into labelled containers for recycling. Neutralise/decontaminate residue (see Section 13 for specific agent). Collect solid residues and seal in labelled 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.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> DO NOT allow clothing wet with material to stay in contact with skin Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. 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 storage and handling recommendations contained within this SDS. Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
Other information	<ul style="list-style-type: none"> DO NOT store near acids, or oxidising agents 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.

Continued...

- Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> CARE: Packing of high density product in light weight metal or plastic packages may result in container collapse with product release Heavy gauge metal packages / Heavy gauge metal drums DO NOT use aluminium or galvanised containers Check regularly for spills and leaks Lined metal can, lined metal pail/ can. Plastic pail. Polyliner drum. Packing as recommended by manufacturer. Check all containers are clearly labelled and free from leaks. <p>For low viscosity materials</p> <ul style="list-style-type: none"> 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. <p>For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.):</p> <ul style="list-style-type: none"> Removable head packaging; Cans with friction closures and low pressure tubes and cartridges <p>may be used.</p> <p>Where combination packages are used, and the inner packages are of glass, porcelain or stoneware, there must be sufficient inert cushioning material in contact with inner and outer packages unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.</p>
Storage incompatibility	<ul style="list-style-type: none"> Avoid strong acids, bases. Avoid reaction with oxidising agents

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	lead	Lead, inorganic dusts & fumes (as Pb)	0.05 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	tin	Tin, metal	2 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	zinc chloride	Zinc chloride (fume)	1 mg/m3	2 mg/m3	Not Available	Not Available
Australia Exposure Standards	ammonium chloride	Ammonium chloride (fume)	10 mg/m3	20 mg/m3	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
lead	0.15 mg/m3	120 mg/m3	700 mg/m3
tin	6 mg/m3	67 mg/m3	400 mg/m3
zinc chloride	2 mg/m3	800 mg/m3	4,800 mg/m3
ammonium chloride	20 mg/m3	54 mg/m3	330 mg/m3

Ingredient	Original IDLH	Revised IDLH
lead	Not Available	Not Available
tin	Not Available	Not Available
zinc chloride	50 mg/m3	Not Available
ammonium chloride	Not Available	Not Available

MATERIAL DATA

Exposure controls

Appropriate engineering controls	<p>Metal dusts must be collected at the source of generation as they are potentially explosive.</p> <ul style="list-style-type: none"> Avoid ignition sources. Good housekeeping practices must be maintained. Dust accumulation on the floor, ledges and beams can present a risk of ignition, flame propagation and secondary explosions. Do not use compressed air to remove settled materials from floors, beams or equipment Vacuum cleaners, of flame-proof design, should be used to minimise dust accumulation. Use non-sparking handling equipment, tools and natural bristle brushes. Cover and reseal partially empty containers. Provide grounding and bonding where necessary to prevent accumulation of static charges during metal dust handling and transfer operations. Do not allow chips, fines or dusts to contact water, particularly in enclosed areas. Metal spraying and blasting should, where possible, be conducted in separate rooms. This minimises the risk of supplying oxygen, in the form of metal oxides, to potentially reactive finely divided metals such as aluminium, zinc, magnesium or titanium. Work-shops designed for metal spraying should possess smooth walls and a minimum of obstructions, such as ledges, on which dust accumulation is possible. Wet scrubbers are preferable to dry dust collectors. Bag or filter-type collectors should be sited outside the workrooms and be fitted with explosion relief doors. Cyclones should be protected against entry of moisture as reactive metal dusts are capable of spontaneous combustion in humid or partially wetted states. Local exhaust systems must be designed to provide a minimum capture velocity at the fume source, away from the worker, of 0.5 metre/sec. Local ventilation and vacuum systems must be designed to handle explosive dusts. Dry vacuum and electrostatic precipitators must not be used, unless specifically approved for use with flammable/ explosive dusts.
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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:
welding, brazing fumes (released at relatively low velocity into moderately still air)	0.5-1.0 m/s (100-200 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 1-2.5 m/s (200-500 f/min.) for extraction of gases discharged 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

- ▶ Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure.
- ▶ Chemical goggles, whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted.
- ▶ Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection.
- ▶ Alternatively a gas mask may replace splash goggles and face shields.
- ▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]

Skin protection

See Hand protection below

- ▶ When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.
- The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.
- The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.
- Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.
- Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:
- frequency and duration of contact,
 - chemical resistance of glove material,
 - glove thickness and
 - dexterity

Hands/feet protection

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- 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, AS/NZS 2161.10.1 or national equivalent) 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, AS/NZS 2161.10.1 or national equivalent) is recommended.
- Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.
- Contaminated gloves should be replaced.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- Excellent when breakthrough time > 480 min
- Good when breakthrough time > 20 min
- Fair when breakthrough time < 20 min
- Poor when glove material degrades

For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.

Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task.

Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:

- Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of.
- Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential

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.

- ▶ Elbow length PVC gloves

Body protection

See Other protection below

Other protection

- During repair or maintenance activities the potential exists for exposures to toxic metal particulate in excess of the occupational standards. Under these circumstances, protecting workers can require the use of specific work practices or procedures involving the combined use of ventilation, wet and vacuum cleaning methods, respiratory protection, decontamination, special protective clothing, and when necessary, restricted work zones.
- Protective over-garments or work clothing must be worn by persons who may become contaminated with particulate during activities such as machining, furnace rebuilding, air cleaning equipment filter changes, maintenance, furnace tending, etc. Contaminated work clothing and over-garments must be managed in a controlled manner to prevent secondary exposure to workers of third parties, to prevent the spread of particulate to other areas, and to prevent particulate from being taken home by workers.
- Personnel who handle and work with **molten metal** should utilise primary protective clothing like polycarbonate face shields, fire resistant tapper's jackets, neck shades (snoods), leggings, spats and similar equipment to prevent burn injuries. In addition to primary protection, secondary or day-to-day work clothing that is fire resistant and sheds metal splash is recommended for use with molten metal. Synthetic materials should never be worn even as secondary clothing (undergarments).
 - ▶ Overalls.
 - ▶ PVC Apron.
 - ▶ PVC protective suit may be required if exposure severe.
 - ▶ Eyewash unit.
 - ▶ Ensure there is ready access to a safety shower.

Respiratory protection

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required. Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	B-AUS P2	-	B-PAPR-AUS / Class 1 P2
up to 50 x ES	-	B-AUS / Class 1 P2	-
up to 100 x ES	-	B-2 P2	B-PAPR-2 P2 ^

^ - 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)

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

Class P2 particulate filters are used for protection against mechanically and thermally generated particulates or both.

P2 is a respiratory filter rating under various international standards, Filters at least 94% of airborne particles

Suitable for:

- Relatively small particles generated by mechanical processes eg. grinding, cutting, sanding, drilling, sawing.
- Sub-micron thermally generated particles e.g. welding fumes, fertilizer and bushfire smoke.
- Biologically active airborne particles under specified infection control applications e.g. viruses, bacteria, COVID-19, SARS

SECTION 9 Physical and chemical properties**Information on basic physical and chemical properties**

Appearance	Liquid with no odour; partly mixes in water.		
Physical state	Liquid	Relative density (Water = 1)	3
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Available	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Partly miscible	pH as a solution (Not Available%)	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 style="list-style-type: none"> ▶ Contact with alkaline material liberates heat ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Information on toxicological effects

	<p>Not normally a hazard due to non-volatile nature of product</p> <p>Acidic corrosives produce respiratory tract irritation with coughing, choking and mucous membrane damage. Symptoms of exposure may include dizziness, headache, nausea and weakness. In more severe exposures, pulmonary oedema may be evident either immediately or after a latent period of 5-72 hours. Symptoms of pulmonary oedema include a tightness in the chest, dyspnoea, frothy sputum and cyanosis. Examination may reveal hypotension, a weak and rapid pulse and moist rates. Death, due to anoxia, may occur several hours after onset of the pulmonary oedema.</p>
Inhaled	<p>Inhalation of freshly formed metal oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in "metal fume fever". Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure.</p> <p>Inhalation of dusts, generated by the material during the course of normal handling, may be damaging to the health of the individual.</p>
Ingestion	<p>The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.</p> <p>As tin salts (stannous and stannic) are generally poorly absorbed from the gastrointestinal tract. Ingestion of food contaminated with tin may cause transient gastrointestinal disturbances such as nausea, vomiting, diarrhea, fever and headache.</p> <p>Parenteral administration provides a substantial description of tin toxicology. Systemic tin is highly toxic producing diarrhoea, muscle paralysis, twitching and neurological damage.</p> <p>By mouth most tin salts are relatively non-toxic. A number of tin "food" poisonings, producing vomiting, nausea and diarrhoea, have occurred after ingestion of fruit juices etc. with tin levels above 1400 ppm. This appears to be due to gastric irritation resulting from the activity and astringency of tin compounds, rather than systemic toxicity. Severe growth retardation occurs in rats with dietary stannous salts at levels exceeding 0.3%.</p> <p>Ingestion of acidic corrosives may produce circumoral burns with a distinct discolouration of the mucous membranes of the mouth, throat and oesophagus. Immediate pain and difficulties in swallowing and speaking may also be evident. Oedema of the epiglottis may produce respiratory distress and possibly, asphyxia. Nausea, vomiting, diarrhoea and a pronounced thirst may occur. More severe exposures may produce a vomitus containing fresh or dark blood and large shreds of mucosa. Shock, with marked hypotension, weak and rapid pulse, shallow respiration and clammy skin may be symptomatic of the exposure. Circulatory collapse may, if left untreated, result in renal failure. Severe cases may show gastric and oesophageal perforation with peritonitis, fever and abdominal rigidity. Stricture of the oesophageal, gastric and pyloric sphincter may occur as within several weeks or may be delayed for years. Death may be rapid and often results from asphyxia, circulatory collapse or aspiration of even minute amounts. Delayed deaths may be due to peritonitis, severe nephritis or pneumonia. Coma and convulsions may be terminal.</p>
Skin Contact	<p>The material can produce chemical burns following direct contact with the skin.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue.</p> <p>Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds 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.</p>
Eye	<p>The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating.</p> <p>When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.</p> <p>Irritation of the eyes may produce a heavy secretion of tears (lachrymation).</p> <p>Direct eye contact with acid corrosives may produce pain, lachrymation, photophobia and burns. Mild burns of the epithelia generally recover rapidly and completely. Severe burns produce long-lasting and possible irreversible damage. The appearance of the burn may not be apparent for several weeks after the initial contact. The cornea may ultimately become deeply vascularised and opaque resulting in blindness.</p>
Chronic	<p>Repeated or prolonged exposure to acids 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.</p> <p>The impact of inhaled acidic agents on the respiratory tract depends upon a number of interrelated factors. These include physicochemical characteristics, e.g., gas versus aerosol; particle size (small particles can penetrate deeper into the lung); water solubility (more soluble agents are more likely to be removed in the nose and mouth). Given the general lack of information on the particle size of aerosols involved in occupational exposures to acids, it is difficult to identify their principal deposition site within the respiratory tract. Acid mists containing particles with a diameter of up to a few micrometers will be deposited in both the upper and lower airways. They are irritating to mucous epithelia, they cause dental erosion, and they produce acute effects in the lungs (symptoms and changes in pulmonary function). Asthmatics appear to be at particular risk for pulmonary effects.</p> <p>Excessive exposure to lead can affect the blood, the nervous system, heart, endocrine organs and the immune system and the digestive system. The synthesis of haemoglobin is inhibited and can result in anaemia. If left untreated, neuromuscular dysfunction, possible paralysis and encephalopathy (brain tissue damage) may result. Other symptoms of overexposure include joint and muscle pain, weakness of the extensor muscles (frequently the hand and wrist), headache, dizziness, abdominal pain, diarrhoea, constipation, nausea, vomiting, blue line on the gums, insomnia and metallic taste. High body levels produce cerebrospinal pressure, brain damage with stupor leading to coma and, in some cases, death. Early symptoms of lead poisoning ("plumbism") include anorexia and loss of weight, constipation, apathy or irritability, occasional vomiting, fatigue, headache, weakness, and a metallic taste in the mouth. Advanced poisonings are characterised by intermittent vomiting, irritability, nervousness, myalgia of the arms and legs (often with wrist and foot drop). Severe poisonings may produce persistent vomiting, ataxia, stupor or</p>

lethargy, visual disturbances progressing to optic neuritis and atrophy, hyper-tension, papilloedema, cranial nerve paralysis, delirium, convulsions and coma. Neurological effects include mental retardation, seizures, cerebral palsy and marked muscular contractions that distort the spine, limbs, hips and sometimes the cranial innervated muscles (dystonia musculorum deformans). Industrial exposure has been associated with irreversible kidney damage.

Chronic exposure to tin dusts and fume results in "stannosis" a mild form of pneumoconiosis. Chest symptoms develop several years after breathing difficulties (dyspnoea) occur. No case of massive fibrosis from over-exposure to tin has been reported.

Lead is a cumulative poison with adverse effects in pregnancy [NIOSH/TIC]

Lead salts have been reported to cross the placenta and induce embryo- and foeto-mortality. They also may have a teratogenic effect (causing birth deformities) in certain animal species. Organometallic lead may not produce these effects. Adverse effects of lead on human reproduction, embryonic and foetal development and postnatal mental development have also been recorded. Foetal exposure to lead may result in birth defects, mental retardation, behavioural disorders and death during the first year of childhood. Paternal effects may include reduced sex drive, impotence, sterility and adverse effects on the sperm which in turn may increase the potential for increased birth defects. Maternal effects may include miscarriage and stillbirth in exposed women, or women whose husbands might be exposed, sterility or decreased fertility, and abnormal menses. Exposure by both parents to lead may exacerbate the reproductive effects.

Metallic dusts generated by the industrial process give rise to a number of potential health problems. The larger particles, above 5 micron, are nose and throat irritants. Smaller particles however, may cause lung deterioration. Particles of less than 1.5 micron can be trapped in the lungs and, dependent on the nature of the particle, may give rise to further serious health consequences.

Metals are widely distributed in the environment and are not biodegradable. Biologically, many metals are essential to living systems and are involved in a variety of cellular, physiological, and structural functions. They often are cofactors of enzymes, and play a role in transcriptional control, muscle contraction, nerve transmission, blood clotting, and oxygen transport and delivery. Although all metals are potentially toxic at some level, some are highly toxic at relatively low levels. Moreover, in some cases the same metal can be essential at low levels and toxic at higher levels, or it may be toxic via one route of entry but not another. Toxic effects of some metals are associated with disruption of functions of essential metals. Metals may have a range of effects, including cancer, neurotoxicity, immunotoxicity, cardiotoxicity, reproductive toxicity, teratogenicity, and genotoxicity. Biological half lives of metals vary greatly, from hours to years. Furthermore, the half life of a given metal varies in different tissues. Lead has a half life of 14 days in soft tissues and 20 years in bone.

In considering how to evaluate the toxicity of metals of potential concern, a number of aspects of metal toxicity should be kept in mind:

Different species vary in their responses to different metals; in some cases, humans are more sensitive than rodents. Thus, there is a need for broad-based testing of metals;

- The route of exposure may affect the dose and site where the metal concentrates, and thus the observed toxic effects;
- Metal-metal interactions can reduce or enhance toxicity; biotransformation can reduce or enhance toxicity;
- It is difficult to predict the toxicity of one metal based on the adverse effects of another; in trying to evaluate the toxicity of one particular metal compound, predictions based on similar compounds of the same metal may be valid.

Tinning Paste (Resto Tinning Paste)	TOXICITY	IRRITATION
	Not Available	Not Available
lead	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Not Available
	Inhalation(Rat) LC50: >5.05 mg/l4h ^[1]	
	Oral (Rat) LD50: >2000 mg/kg ^[1]	
tin	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
	Inhalation(Rat) LC50: >4.75 mg/l4h ^[1]	Skin: no adverse effect observed (not irritating) ^[1]
	Oral (Rat) LD50: >2000 mg/kg ^[1]	
zinc chloride	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Not Available
	Oral (Rat) LD50: 350 mg/kg ^[2]	
ammonium chloride	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit): 100 mg SEVERE
	Oral (Rat) LD50: 1650 mg/kg ^[2]	Eye (rabbit): 500 mg/24h SEVERE
Legend:	1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. * Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances	

LEAD WARNING: Lead is a cumulative poison and has the potential to cause abortion and intellectual impairment to unborn children of pregnant workers.

TIN No significant acute toxicological data identified in literature search.

Mutation DNA Damage Human. Equivocal tumorigenic agent by RTECS criteria. for acid mists, aerosols, vapours

Data from assays for genotoxic activity *in vitro* suggest that eukaryotic cells are susceptible to genetic damage when the pH falls to about 6.5.

Cells from the respiratory tract have not been examined in this respect. Mucous secretion may protect the cells of the airways from direct exposure to inhaled acidic mists, just as mucous plays an important role in protecting the gastric epithelium from its auto-secreted hydrochloric acid. In considering whether pH itself induces genotoxic events *in vivo* in the respiratory system, comparison should be made with the human stomach, in which gastric juice may be at pH 1-2 under fasting or nocturnal conditions, and with the human urinary bladder, in which the pH of urine can range from <5 to > 7 and normally averages 6.2. Furthermore, exposures to low pH *in vivo* differ from exposures *in vitro* in that, *in vivo*, only a portion of the cell surface is subjected to the adverse conditions, so that perturbation of intracellular homeostasis may be maintained more readily than *in vitro*.

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

Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent

asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.

The material may produce respiratory tract irritation. Symptoms of pulmonary irritation may include coughing, wheezing, laryngitis, shortness of breath, headache, nausea, and a burning sensation.

Unlike most organs, the lung can respond to a chemical insult or a chemical agent, by first removing or neutralising the irritant and then repairing the damage (inflammation of the lungs may be a consequence).

The repair process (which initially developed to protect mammalian lungs from foreign matter and antigens) may, however, cause further damage to the lungs (fibrosis for example) when activated by hazardous chemicals. Often, this results in an impairment of gas exchange, the primary function of the lungs. Therefore prolonged exposure to respiratory irritants may cause sustained breathing difficulties.

The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

AMMONIUM CHLORIDE

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

Acute Toxicity	✗	Carcinogenicity	✗
Skin Irritation/Corrosion	✓	Reproductivity	✓
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	✗
Respiratory or Skin sensitisation	✗	STOT - Repeated Exposure	✗
Mutagenicity	✗	Aspiration Hazard	✗

Legend: ✗ - Data either not available or does not fill the criteria for classification
 ✓ - Data available to make classification

SECTION 12 Ecological information**Toxicity**

Tinning Paste (Resto Tinning Paste)	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
lead	NOEC(ECx)	Not Available	Crustacea	0.051mg/L	5
	EC50	72h	Algae or other aquatic plants	1.191mg/L	4
	EC50	96h	Algae or other aquatic plants	0.282-0.864mg/l	4
	LC50	96h	Fish	1.17mg/l	4
tin	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
zinc chloride	BCF	1680h	Fish	58-116	7
	NOEC(ECx)	672h	Algae or other aquatic plants	0.005-0.015mg/L	4
	EC50	72h	Algae or other aquatic plants	0.011mg/L	4
	EC50	48h	Crustacea	0.56mg/L	5
	EC50	96h	Algae or other aquatic plants	0.68-2.9mg/l	4
	LC50	96h	Fish	0.023-0.031mg/l	4
ammonium chloride	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	>76.6mg/l	4
	NOEC(ECx)	Not Available	Fish	0.002mg/L	5
	EC50	48h	Crustacea	0.075-0.126mg/l	4
	EC50	96h	Algae or other aquatic plants	58.476-59.706mg/L	4
	LC50	96h	Fish	0.14mg/l	4

Legend: Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 4. US EPA Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

DO NOT discharge into sewer or waterways.

Toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
zinc chloride	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
zinc chloride	HIGH (BCF = 16000)

Mobility in soil

Ingredient	Mobility
zinc chloride	LOW (KOC = 23.74)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> Containers may still present a chemical hazard/ danger when empty. Return to supplier for reuse/ recycling if possible. <p>Otherwise:</p> <ul style="list-style-type: none"> If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill. Where possible retain label warnings and SDS and observe all notices pertaining to the product. <p>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.</p> <p>A Hierarchy of Controls seems to be common - the user should investigate:</p> <ul style="list-style-type: none"> Reduction Reuse Recycling Disposal (if all else fails) <p>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.</p> <ul style="list-style-type: none"> DO NOT allow wash water from cleaning or process equipment to enter drains. It may be necessary to collect all wash water for treatment before disposal. In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first. Where in doubt contact the responsible authority. Recycle wherever possible. Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. Treat and neutralise at an approved treatment plant. Treatment should involve: Neutralisation with soda-ash or soda-lime followed by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material). Decontaminate empty containers with 5% aqueous sodium hydroxide or soda ash, followed by water. Observe all label safeguards until containers are cleaned and destroyed.
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SECTION 14 Transport information

Labels Required

Marine Pollutant	
HAZCHEM	2X

Land transport (ADG)

UN number	1760
UN proper shipping name	CORROSIVE LIQUID, N.O.S. (contains zinc chloride and lead)
Transport hazard class(es)	Class 8 Subrisk Not Applicable
Packing group	III
Environmental hazard	Environmentally hazardous
Special precautions for user	Special provisions 223 274 Limited quantity 5 L

Air transport (ICAO-IATA / DGR)

UN number	1760		
UN proper shipping name	Corrosive liquid, n.o.s. * (contains zinc chloride and lead)		
Transport hazard class(es)	ICAO/IATA Class	8	
	ICAO / IATA Subrisk	Not Applicable	
	ERG Code	8L	
Packing group	III		
Environmental hazard	Environmentally hazardous		
Special precautions for user	Special provisions	A3 A803	
	Cargo Only Packing Instructions	856	
	Cargo Only Maximum Qty / Pack	60 L	
	Passenger and Cargo Packing Instructions	852	
	Passenger and Cargo Maximum Qty / Pack	5 L	
	Passenger and Cargo Limited Quantity Packing Instructions	Y841	
	Passenger and Cargo Limited Maximum Qty / Pack	1 L	

Sea transport (IMDG-Code / GGVSee)

UN number	1760		
UN proper shipping name	CORROSIVE LIQUID, N.O.S. (contains zinc chloride and lead)		
Transport hazard class(es)	IMDG Class	8	
	IMDG Subrisk	Not Applicable	
Packing group	III		
Environmental hazard	Marine Pollutant		
Special precautions for user	EMS Number	F-A, S-B	
	Special provisions	223 274	
	Limited Quantities	5 L	

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

Not Applicable

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

Product name	Group
lead	Not Available
tin	Not Available
zinc chloride	Not Available
ammonium chloride	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
lead	Not Available
tin	Not Available
zinc chloride	Not Available
ammonium chloride	Not Available

SECTION 15 Regulatory information

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

lead is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4
Australian Inventory of Industrial Chemicals (AIIC)
Chemical Footprint Project - Chemicals of High Concern List

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 1: Carcinogenic to humans
International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 2B: Possibly carcinogenic to humans
International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

tin is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

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

zinc chloride is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
 Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2
 Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
 Australian Inventory of Industrial Chemicals (AIIC)

Ammonium chloride is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
 Australian Inventory of Industrial Chemicals (AIIC)

FEI Equine Prohibited Substances List - Banned Substances
 FEI Equine Prohibited Substances List (EPSL)

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (lead; tin; zinc chloride; ammonium chloride)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (lead; tin)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes

Legend:
 Yes = All CAS declared ingredients are on the inventory
 No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	29/06/2022
Initial Date	27/06/2022

SDS Version Summary

Version	Date of Update	Sections Updated
2.1	27/06/2022	Acute Health (skin), Acute Health (swallowed), Chronic Health, Classification, Environmental, Exposure Standard, Fire Fighter (fire/explosion hazard), Spills (major), Storage (storage incompatibility), Toxicity and Irritation (Other), Transport Information
3.1	29/06/2022	Acute Health (eye), Acute Health (inhaled), Acute Health (skin), Acute Health (swallowed), Chronic Health, Classification, Transport Information

Other information

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

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

Definitions and abbreviations

PC—TWA: Permissible Concentration-Time Weighted Average
 PC—STEL: Permissible Concentration-Short Term Exposure Limit
 IARC: International Agency for Research on Cancer
 ACGIH: American Conference of Governmental Industrial Hygienists
 STEL: Short Term Exposure Limit
 TEEL: Temporary Emergency Exposure Limit
 IDLH: Immediately Dangerous to Life or Health Concentrations
 ES: Exposure Standard
 OSF: Odour Safety Factor
 NOAEL :No Observed Adverse Effect Level
 LOAEL: Lowest Observed Adverse Effect Level
 TLV: Threshold Limit Value
 LOD: Limit Of Detection
 OTV: Odour Threshold Value
 BCF: BioConcentration Factors
 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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