

DLM Wallace

Chemwatch: **22-1207** Version No: **6.1** Safety Data Sheet according to the Health and Safety at Work (Hazardous Substances) Regulations 2017 Chemwatch Hazard Alert Code: 3 Issue Date: 23/12/2022

Print Date: **14/04/2023** S.GHS.NZL.EN.E

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

Product Identifier

Product name	Consolidated Alloys Ezi-Weld 603
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	CORROSIVE LIQUID, TOXIC, N.O.S. (contains potassium bifluoride)
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	Silver brazing flux.
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Details of the manufacturer or supplier of the safety data sheet

Registered company name	DLM Wallace
Address	55 Maurice Road, Penrose Auckland 1061 New Zealand
Telephone	+64 9 622 9100
Fax	+64 9 622 9119
Website	www.dlmwallace.co.nz
Email	enquiries@dlmwallace.co.nz

Emergency telephone number

Association / Organisation	National Poisons Centre
Emergency telephone numbers	0800 764 766
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

Classification ^[1]	Acute Toxicity (Oral) Category 3, Skin Corrosion/Irritation Category 1B, Serious Eye Damage/Eye Irritation Category 1, Specific Target Organ Toxicity - Single Exposure Category 1, Specific Target Organ Toxicity - Repeated Exposure Category 1	
Legend:	1. Classified by Chernwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI	
Determined by Chemwatch using GHS/HSNO criteria	6.1C (oral), 8.2B, 8.3A, 6.9A	

Label elements

Hazard pictogram(s)	
Signal word	Danger

Hazard statement(s)

H301	Toxic if swallowed.	
H314	Causes severe skin burns and eye damage.	
H370	Causes damage to organs.	
H372	Causes damage to organs through prolonged or repeated exposure.	

P260	Do not breathe mist/vapours/spray.
P264	Wash all exposed external body areas thoroughly after handling.
P270	Do not eat, drink or smoke when using this product.
P280	Wear protective gloves, protective clothing, eye protection and face protection.

Precautionary statement(s) Response

Frecautionaly statement(s) Rea	shouse	
P301+P310	IF SWALLOWED: Immediately call a POISON CENTER/doctor/physician/first aider.	
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+P311	IF exposed or concerned: Call a POISON CENTER/doctor/physician/first aider.	
P363	Wash contaminated clothing before reuse.	
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.	

Precautionary statement(s) Storage

P405 Store locked up.

Precautionary statement(s) Disposal

P501 Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
7789-29-9	30-60	potassium bifluoride
Not Available	balance	borates and other non hazardous ingredients
Legend:	 Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; Classification drawn from C&L * EU IOEL Vs available 	

SECTION 4 First aid measures

escription of first aid measure	IS Contraction of the second se
Eye Contact	 If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information 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	If there is evidence of severe skin irritation or skin burns: Avoid further contact. Immediately remove contaminated clothing, including footwear. Flush skin under running water for 15 minutes. Avoiding contamination of the hands, massage calcium gluconate gel into affected areas, pay particular attention to creases in skin. Contact the Poisons Information Centre. Continue gel application for at least 15 minutes after burning sensation ceases. If pain recurs, repeat application of calcium gluconate gel or apply every 20 minutes. If no gel is available, continue washing for at least 15 minutes, using soap if available. If patient is conscious, give six calcium gluconate or calcium carbonate tablets in water by mouth. Transport to hospital, or doctor, urgently.
Inhalation	 If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay. For massive exposures: If dusts, vapours, aerosols, fumes or combustion products are inhaled, remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. If victim is conscious, give six calcium gluconate or calcium carbonate tablets in water by mouth. Transport to hospital, or doctor, urgently.
Ingestion	 IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. For advice, contact a Poisons Information Centre or a doctor. Urgent hospital treatment is likely to be needed. In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS
Skin Contact Inhalation	 Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel. If there is evidence of severe skin irritation or skin burns: Avoid further contact. Immediately remove contaminated clothing, including footwear. Flush skin under running water for 15 minutes. Avoiding contamination of the hands, massage calcium gluconate gel into affected areas, pay particular attention to creases in skin. Contact the Poisons Information Centre. Continue gel application for at least 15 minutes after burning sensation ceases. If pain recurs, repeat application of calcium gluconate gel or pay every 20 minutes. If no gel is available, continue washing for at least 15 minutes, using soap if available. If patient is conscious, give six calcium gluconate calcium carbonate tablets in water by mouth. Transport to hospital, or doctor, urgently. 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 traine Perform CPR if necessary. Transport to hospital, or doctor, without delay. For assive exposures: If dusts, vapours, aerosols, fumes or combustion products are inhaled, remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing,

- should be provided. Further action will be the responsibility of the medical specialist.
- If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS.
- Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise

INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.

NOTE: Wear a protective glove when inducing vomiting by mechanical means.

Indication of any immediate medical attention and special treatment needed

for corrosives:

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
- Anticipate seizures.
- Where eyes have been exposed, flush immediately with water and continue to irrigate with normal saline during transport to hospital.

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
- Skin burns should be covered with dry, sterile bandages, following decontamination.
- DO NOT attempt neutralisation as exothermic reaction may occur

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 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.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Consider endoscopy to evaluate oral injury
- 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 fluorides:

- Fluoride absorption from gastro-intestinal tract may be retarded by calcium salts, milk or antacids.
- ÷. Fluoride particulates or fume may be absorbed through the respiratory tract with 20-30% deposited at alveolar level.
- Peak serum levels are reached 30 mins. post-exposure; 50% appears in the urine within 24 hours.
- For acute poisoning (endotracheal intubation if inadequate tidal volume), monitor breathing and evaluate/monitor blood pressure and pulse frequently since shock may supervene with little warning. Monitor ECG immediately; watch for arrhythmias and evidence of Q-T prolongation or T-wave changes. Maintain monitor. Treat shock vigorously with isotonic saline (in 5% glucose) to restore blood volume and enhance renal excretion.
- Where evidence of hypocalcaemic or normocalcaemic tetany exists, calcium gluconate (10 ml of a 10% solution) is injected to avoid tachycardia.

BIOLOGICAL EXPOSURE INDEX - BEI

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

Determinant	Index
Fluorides in urine	3 mg/gm creatinine
	10mg/gm creatinine

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

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

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility None known.

Advice for firefighters

Fire Fighting

Alert Fire Brigade and tell them location and nature of hazard.

Sampling Time	Commer
Prior to shift	B, NS
End of shift	B. NS

Sai

nts

	 Wear full body protective clothing with breathing apparatus. Prevent, by any means available, spillage from entering drains or water course. Use fire fighting procedures suitable for surrounding area. Do not approach containers suspected to be hot. Cool fire exposed containers with water spray from a protected location. If safe to do so, remove containers from path of fire.
Fire/Explosion Hazard	 Non combustible. Not considered a significant fire risk, however containers may burn. Decomposition may produce toxic fumes of: hydrogen fluoride metal oxides May emit corrosive fumes.

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	 Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material. Check regularly for spills and leaks. Clean up all spills immediately. Avoid breathing vapours and contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Contain and absorb spill with sand, earth, inert material or vermiculite. Wipe up. Place in a suitable, labelled container for waste disposal.
Major Spills	 Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. May be violently or explosively reactive. 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.

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

SECTION 7 Handling and storage

Precautions for safe handling Safe handling	 DO NOT allow clothing wet with material to stay in contact with skin Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. 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.
Other information	 Store in original containers. Keep containers securely sealed. Store in a cool, dry, well-ventilated area. Store away from incompatible materials and foodstuff containers. Protect containers against physical damage and check regularly for leaks. Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	 Lined metal can, lined metal pail/ can. Plastic pail. Polyliner drum. Packing as recommended by manufacturer. Check all containers are clearly labelled and free from leaks. For low viscosity materials Drums and jerricans must be of the non-removable head type. Where a can is to be used as an inner package, the can must have a screwed enclosure. For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.): Removable head packaging; Cans with friction closures and low pressure tubes and cartridges may be used. - Where combination packages are used, and the inner packages are of glass, porcelain or stoneware, there must be sufficient inert cushioning material in contact with inner and outer packages unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.
Storage incompatibility	Derivative of very electropositive metal. Inorganic alkaline metal derivative Salts of inorganic fluoride:
	Continued

are violent reactive with boron, bromine pentafluoride, bromine trifluoride, calcium disilicide, calcium hydride, oxygen difluoride, platinum, potassium.
 in aqueous solutions are incompatible with sulfuric acid, alkalis, ammonia, aliphatic amines, alkanolamines, alkylene oxides, amides,
epichlorohydrin, isocyanates, nitromethans onanic anhydrides, vinyl acetate.
corrode metals in presence of moisture
may be incompatible with glass and porcelain
Contact with acids produces toxic fumes
Reacts with metals producing flammable / explosive hydrogen gas
Dangerous goods of other classes.

Control parameters

Occupational Exposure Limits (OEL)

1.1	NGP	EDIE	NT D	

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
New Zealand Workplace Exposure Standards (WES)	potassium bifluoride	Fluorides, as F	2.5 mg/m3	Not Available	Not Available	(bio) - Exposure can also be estimated by biological monitoring
Emergency Limits						

Ingredient	TEEL-1	TEEL-2		TEEL-3
potassium bifluoride	15 mg/m3	170 mg/m3		1,000 mg/m3
Ingredient	Original IDLH		Revised IDLH	
potassium bifluoride	Not Available		Not Available	

Exposure controls

Appropriate engineering controls	Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are: Process controls which involve changing the way a job activity or process is done to reduce the risk. Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use. Employers may need to use multiple types of controls to prevent employee overexposure.
Individual protection measures, such as personal protective equipment	
Eye and face protection	 Chemical goggles. Full face shield may be required for supplementary but never for primary protection of eyes. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable.
Skin protection	See Hand protection below
Hands/feet protection	 Wear chemical protective gloves, e.g. PVC. Wear safety footwear or safety gumboots, e.g. Rubber When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots. The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.
Body protection	See Other protection below
Other protection	 Overalls. PVC Apron. PVC protective suit may be required if exposure severe. Eyewash unit. Ensure there is ready access to a safety shower.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	White paste with no odour; partly mixes with water.			
Physical state	Non Slump Paste	Relative density (Water = 1)	1.35g/cc (bulk)	
Odour	Not Available	Partition coefficient n-octanol / water	Not Available	

Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	~610	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	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	Partly miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7	
Chemical stability	Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.	
Possibility of hazardous reactions	section 7	
Conditions to avoid	ee 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 or aerosols (mists, fumes), generated by the material during the course of normal handling, may produce serious damage to the health of the individual. Acute effects of fluoride inhalation include irritation of nose and throat, coughing and chest discomfort. A single acute over-exposure may even cause nose bleed.			
Ingestion	Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual. The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion. Fluoride causes severe loss of calcium in the blood, with symptoms appearing several hours later including painful and rigid muscle contractions of the limbs. Cardiovascular collapse can occur and may cause death with increased heart rate and other heart rhythm irregularities. Acute potassium poisoning after swallowing is rare, because vomiting usually occurs and renal excretion is fast. Potassium causes a slow, weak pulse, irregularities in heart rhythm, heart block and an eventual fall in blood pressure.			
Skin Contact	The material can produce chemical burns following direct contact with the skin. Fluorides are easily absorbed through the skin and cause death of soft tissue and erode bone. Healing is delayed and death of tissue may continue to spread beneath skin. Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.			
Eye	The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating. If applied to the eyes, this material causes severe eye damage.			
Chronic	Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Extended exposure to inorganic fluorides causes fluorosis, which includes signs of joint pain and stiffness, tooth discolouration, nausea and vomiting, loss of appetite, diarrhoea or constipation, weight loss, anaemia, weakness and general unwellness. There may also be frequent urination and thirst.			
Consolidated Alloys Ezi-Weld	ΤΟΧΙΟΙΤΥ	IRRITATION		
603	Not Available	Not Available		
	тохісіту	IRRITATION		
potassium bifluoride	Not Available	Not Available		
Legend:	1. Value obtained from Europe ECHA Registered Sub- specified data extracted from RTECS - Register of Tox	stances - Acute toxicity 2. Value obtained from manufacturer's SDS. Unless otherwise ic Effect of chemical Substances		
Consolidated Alloys Ezi-Weld	Not available.			

POTASSIUM BIFLUORIDE	No significant acute toxicological data identified in literature search. The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. The material may 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 material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.		
Acute Toxicity	✓	Carcinogenicity	×
Skin Irritation/Corrosion	×	Reproductivity	×
Serious Eye Damage/Irritation	×	STOT - Single Exposure	×
Respiratory or Skin sensitisation	×	STOT - Repeated Exposure	✓
Mutagenicity	×	Aspiration Hazard	×
	•	Legend: 🗙 – Data either r	not available or does not fill the criteria for classification

Data available to make classification

SECTION 12 Ecological information

Toxicity

Consolidated Alloys Ezi-Weld 603	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
potassium bifluoride	NOEC(ECx)	504h	Crustacea	3.7mg/l	2
	EC50	96h	Algae or other aquatic plants	43mg/l	2
	LC50	96h	Fish	51mg/l	2
	EC50	48h	Crustacea	97mg/l	2

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

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
	No Data available for all ingredients	No Data available for all ingredients

Bioaccumulative potenti	ial	
Ingredient	Bioaccumulation	
	No Data available for all ingredients	
Mobility in soil		
Ingredient	Mobility	
	No Data available for all ingredients	

SECTION 13 Disposal considerations

Product / Packaging disposal	 Containers may still present a chemical hazard/ danger when empty. Return to supplier for reuse/ recycling if possible. Otherwise: If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill. Where possible retain label warnings and SDS and observe all notices pertaining to the product. Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked. A Hierarchy of Controls seems to be common - the user should investigate: Reduction Reuse Recycling Disposal (if all else fails)
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Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.
licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material)
Treat and neutralise at an approved treatment plant. Treatment should involve: Neutralisation followed by: burial in a land-fill specifically
disposal facility can be identified.
Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or
Recycle wherever possible.
Remove solids to site approved for hazardous waste
Add excess calcium chloride to precipitate the fluoride and/ or carbonate
 Neutralise with sodium carbonate or if product does not dissolve completely add a small quantity of hydrochloric acid followed by sodium
Cautionsly dissolve in water
For small quantities:
Where in doubt contact the responsible authority.
In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
It may be necessary to collect all wash water for treatment before disposal.
 DO NOT allow wash water from cleaning or process equipment to enter drains.
appropriate.
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
contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be
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 be

Ensure that the hazardous substance is disposed in accordance with the Hazardous Substances (Disposal) Notice 2017

Disposal Requirements

Packages that have been in direct contact with the hazardous substance must be only disposed if the hazardous substance was appropriately removed and cleaned out from the package. The package must be disposed according to the manufacturer's directions taking into account the material it is made of. Packages which hazardous content have been appropriately treated and removed may be recycled.

The hazardous substance must only be disposed if it has been treated by a method that changed the characteristics or composition of the substance and it is no longer hazardous. Only dispose to the environment if a tolerable exposure limit has been set for the substance.

Only deposit the hazardous substance into or onto a landfill or sewage facility or incinerator, where the hazardous substance can be handled and treated appropriately.

SECTION 14 Transport information

Marine Pollutant

HAZCHEM

NO 2X

Labels Required

Land transport (UN)

1 ()			
UN number or ID number	2922		
UN proper shipping name	CORROSIVE LIQUID, TOXIC, N.O.S. (contains potassium bifluoride)		
Transport hazard class(es)	Class 8 Subsidiary risk 6.1		
Packing group	11		
Environmental hazard	Not Applicable		
Special precautions for user	Special provisions 274 Limited quantity 1 L		

Air transport (ICAO-IATA / DGR)

	-)			
UN number	2922			
UN proper shipping name	Corrosive liquid, toxic, n.o.s. * (contains potassium bifluoride)			
Transport hazard class(es)	ICAO/IATA Class ICAO / IATA Subrisk	8 6.1 8P		
Packing group	ERG Code	88		
Environmental hazard	Not Applicable			
	Special provisions		A3 A4 A803	
	Cargo Only Packing Instructions		855	
	Cargo Only Maximum Qty / Pack		30 L	
Special precautions for user	Passenger and Cargo Packing Instructions		851	
	Passenger and Cargo Maximum Qty / Pack		1 L	
	Passenger and Cargo Limited Quantity Packing Instructions		Y840	

Passenger and Cargo Limited Maximum Qty / Pack

0.5 L

Sea transport (IMDG-Code / GO	SVSee)			
UN number	2922	22		
UN proper shipping name	CORROSIVE LIQUID,	ORROSIVE LIQUID, TOXIC, N.O.S. (contains potassium bifluoride)		
Transport hazard class(es)	IMDG Class8IMDG Subrisk6.	1		
Packing group	П	II.		
Environmental hazard	Not Applicable			
Special precautions for user	EMS Number Special provisions Limited Quantities	F-A, S-B 274 1 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
potassium bifluoride	Not Available

Transport in bulk in accordance with the IGC Code

Product name	Ship Type
potassium bifluoride	Not Available

SECTION 15 Regulatory information

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

This substance is to be managed using the conditions specified in an applicable Group Standard

HSR Number	Group Standard		
HSR002510	Additives Process Chemicals and Raw Materials Acutely Toxic Corrosive Group Standard 2020		
HSR002615	Metal Industry Products Acutely Toxic Corrosive Group Standard 2020		
HSR002677	Surface Coatings and Colourants Acutely Toxic Corrosive Group Standard 2020		
HSR002686	Water Treatment Chemicals Acutely Toxic Corrosive Group Standard 2020		
HSR100425	Pharmaceutical Active Ingredients Group Standard 2020		
HSR002559	Dental Products Acutely Toxic Corrosive Group Standard 2020		
HSR002566	Embalming Products Acutely Toxic Corrosive Group Standard 2020		
HSR002595	Industrial and Institutional Cleaning Products Acutely Toxic Corrosive Group Standard 2020		
HSR100757	Veterinary Medicines Limited Pack Size Finished Dose Group Standard 2020		
HSR100758	Veterinary Medicines Non dispersive Closed System Application Group Standard 2020		
HSR100756	Active Ingredients for Use in the Manufacture of Agricultural Compounds Group Standard 2020		

Please refer to Section 8 of the SDS for any applicable tolerable exposure limit or Section 12 for environmental exposure limit.

potassium bifluoride is found on the following regulatory lists

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Not Classified as Carcinogenic	New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals - Classification Data	
New Zealand Approved Hazardous Substances with controls	New Zealand Inventory of Chemicals (NZIoC)	
New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification	New Zealand Workplace Exposure Standards (WES)	
of Chemicals		

Hazardous Substance Location

Subject to the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Quantity (Compliance Certificate)	Quantity (Compliance Certificate - Farms >4 ha)
6.1C	1000 kg or 1000 L	3500 kg or 3500 L
8.2B	250 kg or 250 L	3500 kg or 3500 L

Certified Handler

Subject to Part 4 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Class of substance	Quantities
Not Applicable	Not Applicable

Refer Group Standards for further information

Maximum quantities of certain hazardous substances permitted on passenger service vehicles

Subject to Regulation 13.14 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Gas (aggregate water capacity in mL)	Liquid (L)	Solid (kg)	Maximum quantity per package for each classification
6.1C	120	1	3	
8.2B	120	1	3	

Tracking Requirements

Not Applicable

National Inventory Status

National Inventory	Status	
Australia - AIIC / Australia Non-Industrial Use	Yes	
Canada - DSL	Yes	
Canada - NDSL	No (potassium bifluoride)	
China - IECSC	Yes	
Europe - EINEC / ELINCS / NLP	Yes	
Japan - ENCS	Yes	
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	23/12/2022
Initial Date	25/01/2010

SDS Version Summary

Version	Date of Update	Sections Updated
5.1	03/09/2020	Classification change due to full database hazard calculation/update.
6.1	23/12/2022	Classification review due to GHS Revision change.

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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