Magic Glass Auto Klene Solutions

Chemwatch: **5205-05** Version No: **5.1.1.1**

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 2

Issue Date: **01/11/2019**Print Date: **01/02/2021**S.GHS.AUS.EN

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

Product Identifier Product name Magic Glass Chemical Name Not Applicable Synonyms Not Available 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 Spray on glass cleaning liquid for windows and glazed surfaces.

Details of the supplier of the safety data sheet

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

Emergency telephone number

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

SECTION 2 Hazards identification

Classification of the substance or mixture

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

ChemWatch Hazard Ratings

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

Poisons Schedule	Not Applicable
Classification [1]	Skin Corrosion/Irritation Category 2, Eye Irritation Category 2A
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)



Signal word Warnin

Hazard statement(s)

H315	Causes skin irritation.
H319	Causes serious eye irritation.

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AUH018	n use, may form flammable/explosive vapour/air mixture.	
AUH019	UH019 May form explosive peroxides.	
Precautionary statement(s) Prevention		
P280	Wear protective gloves/protective clothing/eye protection/face protection.	

Precautionary statement(s) Response

P321	Specific treatment (see advice on this label).	
P362	Take off contaminated clothing and wash before reuse.	
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P337+P313	If eye irritation persists: Get medical advice/attention.	
P302+P352	IF ON SKIN: Wash with plenty of water.	
P332+P313	If skin irritation occurs: Get medical advice/attention.	

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

Not Applicable

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
111-76-2	<15	ethylene glycol monobutyl ether
64-17-5	<15	ethanol
67-63-0	<15	isopropanol
1336-21-6	0-5	ammonium hydroxide
7732-18-5	balance	water

SECTION 4 First aid measures

Description of first aid measures

Description of first aid fileasures		
Eye Contact	 If this product comes in contact with the eyes: Wash out immediately with fresh running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Seek medical attention without delay; if pain persists or recurs seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel. 	
Skin Contact	If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation.	
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. 	
Ingestion	 If swallowed do NOT induce vomiting. If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. Observe the patient carefully. Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. Seek medical advice. If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus. 	

Indication of any immediate medical attention and special treatment needed

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

To treat poisoning by the higher aliphatic alcohols (up to C7):

- Gastric lavage with copious amounts of water.
- It may be beneficial to instill 60 ml of mineral oil into the stomach.
- Oxygen and artificial respiration as needed.
- F Electrolyte balance: it may be useful to start 500 ml. M/6 sodium bicarbonate intravenously but maintain a cautious and conservative attitude toward electrolyte replacement unless shock or severe acidosis threatens.
- To protect the liver, maintain carbohydrate intake by intravenous infusions of glucose.
 Haemodialysis if coma is deep and persistent. [GOSSELIN, SMITH HODGE: Clinical Toxicology of Commercial Products, Ed 5)

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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 shock.
- Monitor and treat, where necessary, for pulmonary oedema.
- Anticipate and treat, where necessary, for seizures
- ▶ DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool
- ► Give activated charcoal

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.
- If the patient is hypoglycaemic (decreased or loss of consciousness, tachycardia, pallor, dilated pupils, diaphoresis and/or dextrose strip or glucometer readings below 50 mg), give 50% dextrose.
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.

- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Acidosis may respond to hyperventilation and bicarbonate therapy.
- Haemodialysis might be considered in patients with severe intoxication
- Consult a toxicologist as necessary. BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For C8 alcohols and above.

Symptomatic and supportive therapy is advised in managing patients.

Treat symptomatically.

SECTION 5 Firefighting measures

Extinguishing media

- Alcohol stable foam.
- Dry chemical powder
- BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog Large fires only.

Special hazards arising from the substrate or mixture

Fire Fighting

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

Advice for firefighters

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water courses.
- Use water delivered as a fine spray to control fire and cool adjacent 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.

WARNING: In use may form flammable/ explosive vapour-air mixtures.

- Combustible.
- ▶ Slight fire hazard when exposed to heat or flame.
- ▶ Heating may cause expansion or decomposition leading to violent rupture of containers.
- On combustion, may emit toxic fumes of carbon monoxide (CO).
- May emit acrid smoke

Fire/Explosion Hazard

Mists containing combustible materials may be explosive. Combustion products include:

carbon dioxide (CO2) other pyrolysis products typical of burning organic material.

May emit poisonous fumes

May emit corrosive fumes.

WARNING: Long standing in contact with air and light may result in the formation of potentially explosive peroxides.

HAZCHEM

Not Applicable

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

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See section 12

Methods and material for containment and cleaning up

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Minor Spills	 Remove all ignition sources. 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	Moderate hazard. Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves. Prevent, by any means available, spillage from entering drains or water course. No smoking, naked lights or ignition sources. Increase ventilation.	

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. Prevent concentration in hollows and sumps. DO NOT enter confined spaces until atmosphere has been checked. Avoid smoking, naked lights or ignition sources. Avoid contact with incompatible materials.
Other information	 Store in original containers. Keep containers securely sealed. No smoking, naked lights or ignition sources. Store in a cool, dry, well-ventilated area. Store away from incompatible materials and foodstuff containers. Protect containers against physical damage and check regularly for leaks. Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	 Metal can or drum Packaging as recommended by manufacturer. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	 Avoid reaction with oxidising agents Avoid contamination of water, foodstuffs, feed or seed.

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

INOREDIENT DATA						
Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	ethylene glycol monobutyl ether	2-Butoxyethanol	20 ppm / 96.9 mg/m3	242 mg/m3 / 50 ppm	Not Available	Not Available
Australia Exposure Standards	ethanol	Ethyl alcohol	1000 ppm / 1880 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	isopropanol	Isopropyl alcohol	400 ppm / 983 mg/m3	1230 mg/m3 / 500 ppm	Not Available	Not Available

Emergency Limits

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
ethylene glycol monobutyl ether	Butoxyethanol, 2-; (Glycol ether EB)	60 ppm	120 ppm	700 ppm
ethanol	Ethanol: (Ethyl alcohol)	Not Available	Not Available	15000* ppm
isopropanol	Isopropyl alcohol	400 ppm	2000* ppm	12000** ppm
ammonium hydroxide	Ammonium hydroxide	61 ppm	330 ppm	2,300 ppm

Ingredient	Original IDLH	Revised IDLH
ethylene glycol monobutyl ether	700 ppm	Not Available
ethanol	3,300 ppm	Not Available
isopropanol	2,000 ppm	Not Available
ammonium hydroxide	Not Available	Not Available
water	Not Available	Not Available

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Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
ammonium hydroxide	E	≤ 0.1 ppm
Notes:	Occupational exposure banding is a process of assigning chemicals into sadverse health outcomes associated with exposure. The output of this processing of exposure concentrations that are expected to protect worker hea	ocess is an occupational exposure band (OEB), which corresponds to a

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.

Personal protection









Eye and face protection

Safety glasses with side shields.

Chemical goggles

Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable.

Skin protection

See Hand protection below

- ▶ Wear chemical protective gloves, e.g. PVC.
- Wear safety footwear or safety gumboots, e.g. Rubber

Hands/feet protection

The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.

The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.

Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be

washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. Body protection See Other protection below

Other protection

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

Recommended material(s)

GLOVE SELECTION INDEX

Respiratory protection

Type AK-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	AK-AUS P2	-	AK-PAPR-AUS / Class 1 P2
up to 50 x ES	-	AK-AUS / Class 1 P2	-
up to 100 x ES	-	AK-2 P2	AK-PAPR-2 P2 ^

^ - Full-face

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

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Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the *computer-generated* selection:

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

^{*} CPI - Chemwatch Performance Index

A: Best Selection

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

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

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Pale blue liquid with a mild ammonia odour; mixes with water.				
Physical state	Liquid	Liquid Relative density (Water = 1) ~1			
Odour	Not Available	Partition coefficient n-octanol / water	Not Available		
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable		
pH (as supplied)	6-7.5	Decomposition temperature	Not Available		
Melting point / freezing point (°C)	~0	Viscosity (cSt)	Not Available		
Initial boiling point and boiling range (°C)	~100	Molecular weight (g/mol)	Not Applicable		
Flash point (°C)	Not Applicable	Taste	Not Available		
Evaporation rate	as for water	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)	3 @ 20 degC	Gas group	Not Available		
Solubility in water	Miscible	pH as a solution (1%)	Not Available		
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available		

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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Information on toxicological effects

iniormation on toxicological el	iecis	
Inhaled	Inhalation of vapours may cause drowsiness and dizziness. This may be co-ordination, and vertigo. Inhalation of vapours or aerosols (mists, fumes), generated by the materi of the individual. There is some evidence to suggest that the material can cause respirator cause further lung damage.	al during the course of normal handling, may be damaging to the health
Ingestion	Swallowing of the liquid may cause aspiration into the lungs with the risk (ICSC13733) Accidental ingestion of the material may be damaging to the health of the Ingestion may result in nausea, abdominal irritation, pain and vomiting	
Skin Contact	Repeated exposure may cause skin cracking, flaking or drying following r There is some evidence to suggest that this material can cause inflamma Open cuts, abraded or irritated skin should not be exposed to this materia Entry into the blood-stream, through, for example, cuts, abrasions or lesion prior to the use of the material and ensure that any external damage is su	tion of the skin on contact in some persons. al ons, may produce systemic injury with harmful effects. Examine the skin
Eye	This material can cause eye irritation and damage in some persons.	
Chronic	Substance accumulation, in the human body, may occur and may cause there is some evidence from animal testing that exposure to this material Based on experience with similar materials, there is a possibility that exposor cause other toxic effects. Prolonged exposure to ethanol may cause damage to the liver and cause Long term, or repeated exposure of isopropanol may cause inco-ordinatic Repeated inhalation exposure to isopropanol may produce sleepiness, in effects only at exposure levels that produce toxic effects in adult animals. There are inconclusive reports of human sensitisation from skin contacts effects of isopropanol. Animal testing showed the chronic exposure did not produce reproductive. There has been some concern that this material can cause cancer or mule thylene glycol esters and their ethers cause wasting of the testicles, reportain compounds are more dangerous.	I may result in toxic effects to the unborn baby, obsure to the material may reduce fertility in humans at levels which do excarring. It may also worsen damage caused by other agents, on and tiredness, co-ordination and liver degeneration. Animal data show developmental Isopropanol does not cause genetic damage, with isopropanol. Chronic alcoholics are more tolerant of the whole-body of effects, lations but there is not enough data to make an assessment.
	TOXICITY	IRRITATION

	TOXICITY	IRRITATION
Magic Glass	Not Available	Not Available
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 667 mg/kg ^[1]	Eye (rabbit): 100 mg SEVERE
	Inhalation(Rat) LC50; =2.21 mg/l4hrs ^[2]	Eye (rabbit): 100 mg/24h-moderate
ethylene glycol monobutyl ether	Oral(Guinea) LD50; 1414 mg/kg ^[1]	Eye: adverse effect observed (irritating) ^[1]
		Skin (rabbit): 500 mg, open; mild
		Skin: adverse effect observed (irritating) ^[1]
		Skin: no adverse effect observed (not irritating) ^[1]
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >15800 mg/kg ^[1]	Eye (rabbit): 500 mg SEVERE
	Inhalation(Mouse) LC50; =39 mg/l4hrs ^[2]	Eye (rabbit):100mg/24hr-moderate
ethanol	Oral(Rat) LD50; >7692 mg/kg ^[1]	Eye: adverse effect observed (irritating) ^[1]
		Skin (rabbit):20 mg/24hr-moderate
		Skin (rabbit):400 mg (open)-mild
		Skin: no adverse effect observed (not irritating)[1]
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 12.792 mg/kg ^[1]	Eye (rabbit): 10 mg - moderate
isopropanol	Inhalation(Mouse) LC50; =27.2 mg/l4hrs ^[2]	Eye (rabbit): 100 mg - SEVERE
	Oral(Rat) LD50; 0.006 mg/kg ^[1]	Eye (rabbit): 100mg/24hr-moderate
		Skin (rabbit): 500 mg - mild
	TOXICITY	IRRITATION
ammonium hydroxide	Inhalation(Rat) LC50; 2.868 mg/L4hrs ^[2]	Eye (rabbit): 0.25 mg SEVERE
	Oral(Rat) LD50; =350 mg/kg ^[2]	Eye (rabbit): 1 mg/30s SEVERE
	TOXICITY	IRRITATION
water		

ETHYLENE GLYCOL

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

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ASCC (NZ) SDS

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

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

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

Acute Toxicity: Oral LD50 values in rats for all category members range from 739 (EGHE) to 3089 mg/kg bw (EGPE), with values increasing with decreasing molecular weight. Four to six hour acute inhalation toxicity studies were conducted for these chemicals in rats at the highest vapour concentrations practically achievable. Values range from LC0 > 85 ppm (508 mg/m3) for EGHE, LC50 > 400ppm (2620 mg/m3) for EGBEA to LC50 > 2132 ppm (9061 mg/m3) for EGPE. No lethality was observed for any of these materials under these conditions. Dermal LD50 values in rabbits range from 435 mg/kg bw (EGBE) to 1500 mg/kg bw (EGBEA). Overall these category members can be considered to be of low to moderate acute toxicity.

Animal testing showed that exposure to ethylene glycol monobutyl ether resulted in toxicity to both the mother and the embryo. Reproductive effects were thought to be less than that of other monoalkyl ethers of ethylene glycol.

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

Ethylene glycol is quickly and extensively absorbed throughout the gastrointestinal tract. Limited information suggests that it is also absorbed through the airways; absorption through skin is apparently slow. Following absorption, it is distributed throughout the body. In humans, it is initially metabolized by alcohol dehydrogenase to form glycoaldehyde, which is rapidly converted to glycolic acid and glyoxal. These breakdown products are oxidized to glyoxylate, which may be further metabolized to formic acid, oxalic acid, and glycine. Breakdown of both glycine and formic acid can generate carbon dioxide, which is one of the major elimination products of ethylene glycol. In addition to exhaled carbon dioxide, ethylene glycol is eliminated in the urine as both the parent compound and glycolic acid.

ISOPROPANOL

WATER

MONOBUTYL ETHER

Isopropanol is irritating to the eyes, nose and throat but generally not to the skin. Prolonged high dose exposure may also produce depression of the central nervous system and drowsiness. Few have reported skin irritation. It can be absorbed from the skin or when inhaled. Intentional swallowing is common particularly among alcoholics or suicide victims and also leads to fainting, breathing difficulty, nausea, vomiting and headache. In the absence of unconsciousness, recovery usually occurred. Repeated doses may damage the kidneys.

The substance is classified by IARC as Group 3:

NOT classifiable as to its carcinogenicity to humans.

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

No significant acute toxicological data identified in literature search

ETHYLENE GLYCOL MONOBUTYL ETHER & AMMONIUM HYDROXIDE

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

ETHYLENE GLYCOL MONOBUTYL ETHER & ETHANOL & ISOPROPANOL

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.

ISOPROPANOL & AMMONIUM HYDROXIDE

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

Legend:

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

🧪 – Data available to make classification

SECTION 12 Ecological information

Toxicity

Magic Glass Not	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
ethylene glycol monobutyl ether	LC50	96	Fish	1250-mg/L	4
	EC50	48	Crustacea	Crustacea 164mg/L	
	EC50	72	Algae or other aquatic plants	623mg/L	2
	NOEL	336	Not Available	49.50000-mg	/L 4
	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96	Fish	42-mg/L	4
ethanol	EC50	48	Crustacea	2-mg/L	4
	EC50	96	Algae or other aquatic plants	-8.358-26.503mg	/L 4
	EC10	168	Algae or other aquatic plants	1.91-mg/L	4

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	NOEC	2016	Fish	0.000375-mg/L	4
	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96	Fish	>1400-mg/L	4
	EC50	48	Crustacea	7550mg/L	4
isopropanol	EC50	96	Algae or other aquatic plants	>1000mg/L	1
	EC10	168	Algae or other aquatic plants	12.44-mg/L	4
	NOEC	5760	Fish	<0.02-mg/L	4
ammonium hydroxide	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96	Fish	37mg/L	4
annionali nyaroxiae					
aondin nyuroxido	NOEC	72	Fish	3.5mg/L	4
aondin nydroxide	NOEC Endpoint	72 Test Duration (hr)			4 Source
water			Fish	3.5mg/L	

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
ethylene glycol monobutyl ether	LOW (Half-life = 56 days)	LOW (Half-life = 1.37 days)
ethanol	LOW (Half-life = 2.17 days)	LOW (Half-life = 5.08 days)
isopropanol	LOW (Half-life = 14 days)	LOW (Half-life = 3 days)
water	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation	
ethylene glycol monobutyl ether	LOW (BCF = 2.51)	
ethanol	LOW (LogKOW = -0.31)	
isopropanol	LOW (LogKOW = 0.05)	
water	LOW (LogKOW = -1.38)	

Mobility in soil

Ingredient	Mobility
ethylene glycol monobutyl ether	HIGH (KOC = 1)
ethanol	HIGH (KOC = 1)
isopropanol	HIGH (KOC = 1.06)
water	LOW (KOC = 14.3)

SECTION 13 Disposal considerations

Waste treatment methods

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) Product / Packaging disposal

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.

 Recycle wherever possible or consult manufacturer for recycling options.
- ► Consult State Land Waste Authority for disposal.
- ▶ Bury or incinerate residue at an approved site.
- Recycle containers if possible, or dispose of in an authorised landfill.

SECTION 14 Transport information

Labels Nequilled		
Marine Pollutant	NO	
HAZCHEM	Not Applicable	

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Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

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
ethylene glycol monobutyl ether	Not Available
ethanol	Not Available
isopropanol	Not Available
ammonium hydroxide	Not Available
water	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
ethylene glycol monobutyl ether	Not Available
ethanol	Not Available
isopropanol	Not Available
ammonium hydroxide	Not Available
water	Not Available

SECTION 15 Regulatory information

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

ethylene glycol monobutyl ether 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 6

Australian Inventory of Industrial Chemicals (AIIC)

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

ethanol is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

isopropanol is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

ammonium hydroxide 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 6

Australian Inventory of Industrial Chemicals (AIIC)

water is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

National Inventory Status

National Inventory	Status	
Australia - AIIC / Australia Non-Industrial Use	Yes	
Canada - DSL	Yes	
Canada - NDSL	No (ethylene glycol monobutyl ether; ethanol; isopropanol; ammonium hydroxide; water)	
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 - ARIPS	Yes	

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National Inventory	Status
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 Other information

Revision Date	01/11/2019
Initial Date	24/03/2016

SDS Version Summary

Version	Issue Date	Sections Updated
2.1.1.1	24/03/2016	Advice to Doctor, Engineering Control, Personal Protection (Respirator), Storage (storage incompatibility)
5.1.1.1	01/11/2019	One-off system update. NOTE: This may or may not change the GHS classification

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.