

Veet

Auto Klene Solutions

Chemwatch: 5191-29
Version No: 5.1.1.1
Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 3

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	Veet
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	CORROSIVE LIQUID, N.O.S. (contains potassium hydroxide)
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	Use according to manufacturer's directions.
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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. DANGEROUS GOODS. According to the WHS Regulations and the ADG Code.

ChemWatch Hazard Ratings

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

Poisons Schedule	S6
Classification [1]	Metal Corrosion Category 1, Skin Corrosion/Irritation Category 1B, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Acute Aquatic Hazard Category 3, Chronic Aquatic Hazard Category 3
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	Danger

Hazard statement(s)

H290	May be corrosive to metals.
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H314	Causes severe skin burns and eye damage.
H317	May cause an allergic skin reaction.
H412	Harmful to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P260	Do not breathe mist/vapours/spray.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P234	Keep only in original container.
P273	Avoid release to the environment.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/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.
P310	Immediately call a POISON CENTER or doctor/physician.
P321	Specific treatment (see advice on this label).
P363	Wash contaminated clothing before reuse.
P302+P352	IF ON SKIN: Wash with plenty of water.

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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SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
61789-40-0	<10	<u>cocamidopropylbetaine</u>
7758-29-4	<10	<u>sodium tripolyphosphate</u>
1310-58-3	<10	<u>potassium hydroxide</u>
111-76-2	<5	<u>ethylene glycol monobutyl ether</u>
Not Available	>60	Ingredients determined not to be hazardous

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"> ▶ 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. ▶ 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>

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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 ethylene glycol:

- ▶ Early treatment of ingestion is important. Ensure emesis is satisfactory.
- ▶ Test and correct for metabolic acidosis and hypocalcaemia.
- ▶ Apply sustained diuresis when possible with hypertonic mannitol.
- ▶ Evaluate renal status and begin haemodialysis if indicated. [I.L.O.]
- ▶ Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective.
- ▶ Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution.
- ▶ Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites.
- ▶ Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days.
- ▶ Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis.

[Ellenhorn and Barceloux: Medical Toxicology]

It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated with such exposures.

Laitinen J., et al: Occupational & Environmental Medicine 1996; 53, 595-600

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

SECTION 5 Firefighting measures

Extinguishing media

The product contains a substantial proportion of water, therefore there are no restrictions on the type of extinguishing media which may be used. Choice of extinguishing media should take into account surrounding areas.

Though the material is non-combustible, evaporation of water from the mixture, caused by the heat of nearby fire, may produce floating layers of combustible substances.

In such an event consider:

- ▶ foam.
- ▶ dry chemical powder.
- ▶ carbon dioxide.

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.
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Advice for firefighters

Fire Fighting

- ▶ 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.**

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	<ul style="list-style-type: none"> ▶ 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	<p>The emulsion is not combustible under normal conditions. However, it will break down under fire conditions and the hydrocarbon component will burn.</p> <p>Decomposes on heating and produces toxic fumes of: carbon dioxide (CO₂) nitrogen oxides (NO_x) other pyrolysis products typical of burning organic material. May emit corrosive fumes.</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	<p>Environmental hazard - contain spillage.</p> <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	<p>Environmental hazard - contain spillage.</p> <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.

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. ▶ Avoid contact with moisture. ▶ Avoid contact with incompatible materials. ▶ When handling, DO NOT eat, drink or smoke. ▶ Keep containers securely sealed when not in use.
Other information	<ul style="list-style-type: none"> ▶ 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	<ul style="list-style-type: none"> ▶ 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>-</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, acid chlorides, acid anhydrides and chloroformates.

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	potassium hydroxide	Potassium hydroxide	Not Available	Not Available	2 mg/m3	Not Available
Australia Exposure Standards	ethylene glycol monobutyl ether	2-Butoxyethanol	20 ppm / 96.9 mg/m3	242 mg/m3 / 50 ppm	Not Available	Not Available

Emergency Limits

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
sodium tripolyphosphate	Sodium tripolyphosphate	0.61 mg/m3	6.8 mg/m3	620 mg/m3
potassium hydroxide	Potassium hydroxide	0.18 mg/m3	2 mg/m3	54 mg/m3
ethylene glycol monobutyl ether	Butoxyethanol, 2-; (Glycol ether EB)	60 ppm	120 ppm	700 ppm

Ingredient	Original IDLH	Revised IDLH
cocamidopropylbetaine	Not Available	Not Available
sodium tripolyphosphate	Not Available	Not Available
potassium hydroxide	Not Available	Not Available
ethylene glycol monobutyl ether	700 ppm	Not Available


Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
cocamidopropylbetaine	E	≤ 0.1 ppm
sodium tripolyphosphate	E	≤ 0.01 mg/m ³

Notes:

Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.

Exposure controls

Appropriate engineering controls	<p>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:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>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.</p> <p>Employers may need to use multiple types of controls to prevent employee overexposure.</p>
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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. <p>NOTE:</p> <ul style="list-style-type: none"> The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact. Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed. <p>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.</p> <p>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.</p> <p>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.</p>
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> Overalls. PVC Apron. PVC protective suit may be required if exposure severe. Eyewash unit. Ensure there is ready access to a safety shower.

Recommended material(s)

Respiratory protection

Continued...

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GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

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

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Material	CPI
BUTYL	A
NEOPRENE	B
NAT+NEOPR+NITRILE	C
NATURAL RUBBER	C
NATURAL+NEOPRENE	C
NITRILE	C
NITRILE+PVC	C
PE/EVAL/PE	C
PVA	C
PVC	C
SARANEX-23	C
VITON	C

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

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), 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)

- ▶ Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- ▶ The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- ▶ Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Liquid with a characteristic odour; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	Not Available
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Available	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	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	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	<ul style="list-style-type: none"> ▶ 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

Inhaled	Not normally a hazard due to non-volatile nature of product Inhaling corrosive bases may irritate the respiratory tract. Symptoms include cough, choking, pain and damage to the mucous membrane.
Ingestion	The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion. Accidental ingestion of the material may be damaging to the health of the individual.
Skin Contact	The material can produce chemical burns following direct contact with the 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. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence from animal testing that exposure to this material may result in toxic effects to the unborn baby. There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment.

Veet	TOXICITY	IRRITATION
	Not Available	Not Available
cocamidopropylbetaine	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye: adverse effect observed (irritating) ^[1]
	Oral(Rat) LD50; >1800 mg/kg ^[1]	Eye: primary irritant *
		Skin: adverse effect observed (irritating) ^[1]
		Skin: primary irritant *
sodium tripolyphosphate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >3160 mg/kg ^[2]	Not Available
	Oral(Rat) LD50; >2000 mg/kg ^[1]	
potassium hydroxide	TOXICITY	IRRITATION
	Oral(Rat) LD50; =214-324 mg/kg ^[2]	Eye (rabbit):1mg/24h rinse-moderate
		Skin (human): 50 mg/24h SEVERE
		Skin (rabbit): 50 mg/24h SEVERE
ethylene glycol monobutyl ether	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 667 mg/kg ^[1]	Eye (rabbit): 100 mg SEVERE
	Inhalation(Rat) LC50; =2.21 mg/4hrs ^[2]	Eye (rabbit): 100 mg/24h-moderate
	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]
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	

COCAMIDOPROPYLBETAINE	<p>* [Van Waters and Rogers] ** [Canada Colors and Chemicals Ltd.] Toxicokinetics, metabolism and distribution. Absorption of the chemical across dermal and gastrointestinal membranes is possible based on the relatively low molecular weight of the chemical (500 Da) and given that it is a surfactant (EC, 2003). Acute toxicity. Acute oral toxicity studies in rats and mice indicated that the LD50 values of the chemical (at 30-35.61% concentration) ranged from 1800 mg/kg bw (male rats) up to 5000 mg/kg bw, with mortalities noted in most studies (CIR, 2010). Of note is an acute oral toxicity study conducted in Sprague-Dawley rats (5/sex) at a single dose of 1800 mg/kg bw (formulation containing 35.61% of the chemical), where no males but all five females died. Overall, the data suggests that mortality occurs following oral administration of the chemical and that it may be an acute oral toxicant. Therefore, based on these data the chemical may be harmful if swallowed. An acute dermal toxicity study in rats was conducted using 2000 mg/kg bw of a 31% formulation of the chemical (CIR, 2010). Irritation was observed, but there were no clinical signs of systemic toxicity or mortalities. The lack of effects in this study suggests that the chemical is likely to be of low acute dermal toxicity. Irritation. The chemical has a quaternary ammonium functional group, which is a structural alert for corrosion. Numerous skin irritation studies, conducted with formulations containing 7.5-30% of the chemical, indicated that the chemical has irritant properties. The studies were, in-general, conducted under occlusive conditions, with exposure times of up to 24 hours (7.5-10%). Based on the information available, the chemical is likely to be a skin irritant. Eye irritation studies with the chemical showed that corrosive and necrotic effects occurred at 30% whereas less severe effects were observed at lower concentrations of 2.3-10%. The chemical is classified with the risk phrase R36: Irritating to eyes, however, based on studies conducted on the chemical it may be a severe eye irritant. Sensitisation. The chemical has a quaternary ammonium functional group, which is a structural alert for sensitisation (Conflicting results have been obtained with the chemical in animal studies. Positive results were reported in an LLNA study (an EC3 value was not reported). In addition, positive results were obtained in two guinea pig maximisation studies conducted by a single laboratory, the first at 3% induction and 3% challenge, and the second at 0.15% induction and 0.015% challenge. However, there was no sensitisation in a guinea pig maximisation test when the chemical was tested at 6% induction and 1% challenge. In addition, no sensitisation was observed in another test in guinea pigs at 0.75% induction and 0.02% challenge. No evidence of sensitisation was reported in a HRIPT on a formulation containing the chemical at 0.6% concentration (a 10% dilution of a ~6% formulation) with 110 volunteers. In HRIPT studies on formulations containing the chemical, no evidence of sensitisation was reported at concentrations of 1.87%</p>
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	<p>(88 subjects), 0.93% (93 subjects), 0.3% (100 subjects), 1.5-3.0% (141 subjects), 6.0% (210 subjects), 0.018% (27 subjects). However, positive results were observed in provocative studies conducted on formulations containing the chemical (at 0.3-1% concentration), conducted in subjects diagnosed with various forms of contact dermatitis, suggesting that the chemical may cause reactions in sensitive individuals. In one study authors note that sensitisation effects of the chemical (and related compounds) are most likely due to the impurities, including DMAPA and amidopropyl dimethylamines, however, they do not exclude the possibility of the causing the sensitisation. The potential for skin sensitisation, due to the presence of the above impurities in the chemical, will be limited by their reported low concentration. In summary, a definitive conclusion cannot be made on the skin sensitisation potential of the chemical. The available information suggests that skin sensitisation is possible. Although there are some inconsistencies in the results reported for studies conducted on the chemical, the scientific data points towards the positive findings being caused by impurities, in particular DMAPA and amidopropyl dimethylamines, which are present in the chemical at low concentrations. Repeated Dose Toxicity. In a 28-day repeated dose oral toxicity study, rats were administered a 30.6% solution of the chemical at 0, 100, 500 or 1000 mg/kg bw/day. Inflammation of the non-glandular stomach was noted in animals of the high-dose group, although this effect was attributed to the irritant properties of the test material. Mortality was also observed in this study at all treatment levels but there was no dose-response relationship. In another 28-day repeated dose oral toxicity study, rats were administered a solution containing the chemical (concentration not stated) at 0, 250, 500 or 1000 mg/kg bw/day. The NOEL was reported as 500 mg/kg bw/day, which appears to be based on non-systemic irritant effects on the non-glandular stomach. No mortalities were observed. In a 90-day repeated dose oral toxicity study, rats were administered a solution containing the chemical (concentration not stated) at 0, 250, 500 or 1000 mg/kg bw/day. There were no mortalities and the noted effects are isolated to the stomach region and appear to be irritant in nature. The NOEL established by the study authors was 250 mg/kg bw/day, based on these effects. Mutagenicity. The chemical was not mutagenic in numerous bacterial reverse mutation assays. Negative results were also obtained for the chemical in a mouse lymphoma test and a micronucleus test in mice. Carcinogenicity. No signs of carcinogenicity were noted in a 20 month dermal study in mice (3 applications/week) for a hair dye formulation containing the chemical at a concentration of 0.09%. The formation of nitrosamines is possible. Secondary amides (and the identified impurities) may serve as substrates for N-nitrosation, therefore formulation with N-nitrosating agents should be avoided. The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested. Possible cross-reactions to several fatty acid amidopropyl dimethylamines were observed in patients that were reported to have allergic contact dermatitis to a baby lotion that contained 0.3% oleamidopropyl dimethylamine. Stearamidopropyl dimethylamine at 2% in hair conditioners was not a contact sensitizer when tested neat or diluted to 30%. However, irritation reactions were observed. A 10-year retrospective study found that out of 46 patients with confirmed allergic eyelid dermatitis, 10.9% had relevant reactions to oleamidopropyl dimethylamine and 4.3% had relevant reactions to cocamidopropyl dimethylamine. Several cases of allergic contact dermatitis were reported in patients from the Netherlands that had used a particular type of body lotion that contained oleamidopropyl dimethylamine. In 12 patients tested with their personal cosmetics, containing the fatty acid amidopropyl dimethylamine cocamidopropyl betaine (CAPB), 9 had positive reactions to at least one dilution and 5 had irritant reactions. All except 3 patients, who were not tested, had 2 or 3+ reaction to the 3,3-dimethylaminopropylamine (DMAPA, the reactant used in producing fatty acid amidopropyl dimethylamines) at concentrations as low as 0.05%. The presence of DMAPA was investigated via thin-layer chromatography in the personal cosmetics of 4 of the patients that had positive reactions. DMAPA was measured in the products at 50 - 150 ppm suggesting that the sensitising agent in CAPB-induced allergy is DMAPA. The sensitisation potential of a 4% aqueous liquid fabric softener formulation containing 0.5% stearyl/palmitylamidopropyl dimethylamine was investigated using. The test material caused some irritation in most volunteers. After a rest period of 2 weeks, the subjects received challenge patches with the same concentration of test material on both arms. Patch sites were graded 48 and 96 h after patching. Most undiluted cationic surfactants satisfy the criteria for classification as Harmful (Xn) with R22 and as Irritant (Xi) for skin and eyes with R38 and R41. Amphoteric surfactants are easily absorbed in the gut and partly excreted unchanged in the faeces. It has not been shown to accumulate in the body. Concentrated betaines are expected to irritate the skin and eyes, but dilute solutions only irritate the eyes. No evidence of delayed contact hypersensitivity was found in animal testing. Tests for mutation-causing potential have proved negative.</p>
POTASSIUM HYDROXIDE	<p>The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.</p>
ETHYLENE GLYCOL MONOBUTYL ETHER	<p>NOTE: Changes in kidney, liver, spleen and lungs are observed in animals exposed to high concentrations of this substance by all routes. ** ASCC (NZ) SDS</p> <p>The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>For ethylene glycol monoalkyl ethers and their acetates (EGMAEs):</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>For ethylene glycol:</p> <p>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 glycolaldehyde, 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.</p>
COCAMIDOPROPYLBETAINE & POTASSIUM HYDROXIDE	<p>The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p>
COCAMIDOPROPYLBETAINE & ETHYLENE GLYCOL MONOBUTYL ETHER	<p>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.</p>

Veet

**SODIUM
TRIPOLYPHOSPHATE &
POTASSIUM 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	✗
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**

Veet	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
cocamidopropylbetaine	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96	Fish	1.9mg/L	2
	EC50	48	Crustacea	6.4mg/L	2
	EC50	96	Algae or other aquatic plants	0.55mg/L	2
sodium tripolyphosphate	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48	Crustacea	>70.7- <101.3mg/L	2
	EC50	96	Algae or other aquatic plants	69.2mg/L	2
	potassium hydroxide	Endpoint	Test Duration (hr)	Species	Value
LC50		96	Fish	80mg/L	2
NOEC		24	Fish	28mg/L	2
ethylene glycol monobutyl ether		Endpoint	Test Duration (hr)	Species	Value
	LC50	96	Fish	1250-mg/L	4
	EC50	48	Crustacea	164mg/L	2
	EC50	72	Algae or other aquatic plants	623mg/L	2
Legend:	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEL	336	Not Available	49.50000-mg/L	4
	<i>Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data</i>				

On the basis of available evidence concerning either toxicity, persistence, potential to accumulate and/or observed environmental fate and behaviour, the material may present a danger, immediate or long-term and/or delayed, to the structure and/or functioning of natural ecosystems.

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

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

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

Prevent, by any means available, spillage from entering drains or water courses.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
ethylene glycol monobutyl ether	LOW (Half-life = 56 days)	LOW (Half-life = 1.37 days)

Bioaccumulative potential

Ingredient	Bioaccumulation
ethylene glycol monobutyl ether	LOW (BCF = 2.51)

Mobility in soil

Ingredient	Mobility
ethylene glycol monobutyl ether	HIGH (KOC = 1)

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"> ▸ 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 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. Observe all label safeguards until containers are cleaned and destroyed.
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SECTION 14 Transport information

Labels Required

	
Marine Pollutant	NO
HAZCHEM	2X

Land transport (ADG)

UN number	1760	
UN proper shipping name	CORROSIVE LIQUID, N.O.S. (contains potassium hydroxide)	
Transport hazard class(es)	Class	8
	Subrisk	Not Applicable
Packing group	III	
Environmental hazard	Not Applicable	
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 potassium hydroxide)	
Transport hazard class(es)	ICAO/IATA Class	8
	ICAO / IATA Subrisk	Not Applicable
	ERG Code	8L
Packing group	III	
Environmental hazard	Not Applicable	
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 potassium hydroxide)	
Transport hazard class(es)	IMDG Class	8
	IMDG Subrisk	Not Applicable
Packing group	III	
Environmental hazard	Not Applicable	
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
cocamidopropylbetaine	Not Available
sodium tripolyphosphate	Not Available
potassium hydroxide	Not Available
ethylene glycol monobutyl ether	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
cocamidopropylbetaine	Not Available
sodium tripolyphosphate	Not Available
potassium hydroxide	Not Available
ethylene glycol monobutyl ether	Not Available

SECTION 15 Regulatory information

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

cocamidopropylbetaine 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 5
- Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
- Australian Inventory of Industrial Chemicals (AIIC)

sodium tripolyphosphate is found on the following regulatory lists

- Australian Inventory of Industrial Chemicals (AIIC)

potassium 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 5
- Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
- Australian Inventory of Industrial Chemicals (AIIC)

ethylene glycol monobutyl ether is found on the following regulatory lists

- Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
- 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

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (cocamidopropylbetaine; sodium tripolyphosphate; potassium hydroxide; ethylene glycol monobutyl ether)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes

National Inventory	Status
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - ARIPS	Yes

Legend:

Yes = All CAS declared ingredients are on the inventory

No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 Other information

Revision Date	01/11/2019
Initial Date	28/08/2015

SDS Version Summary

Version	Issue Date	Sections Updated
2.1.1.1	28/08/2015	Acute Health (eye), Acute Health (inhaled), Acute Health (skin), Acute Health (swallowed), Advice to Doctor, Appearance, Chronic Health, Classification, Disposal, Engineering Control, Environmental, Exposure Standard, Fire Fighter (extinguishing media), Fire Fighter (fire/explosion hazard), Fire Fighter (fire fighting), Fire Fighter (fire incompatibility), First Aid (eye), First Aid (inhaled), First Aid (skin), First Aid (swallowed), Handling Procedure, Ingredients, Instability Condition, Personal Protection (other), Personal Protection (Respirator), Personal Protection (eye), Personal Protection (hands/feet), Physical Properties, Spills (major), Spills (minor), Storage (storage incompatibility), Storage (storage requirement), Storage (suitable container), Transport, Transport Information, Use
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.