Wheel Wizard
Auto Klene Solutions

Chemwatch Hazard Alert Code: **3**

Chemwatch: **5175-90**
Version No: **6.1.1.1**
Safety Data Sheet according to WHS and ADG requirements

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	Wheel Wizard
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	CORROSIVE LIQUID, N.O.S. (contains oxalic acid)
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	Acidic cleaner for brake dust removal on wheels.

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	2		
Body Contact	3		
Reactivity	1		
Chronic	2		

0 = Minimum
1 = Low
2 = Moderate
3 = High
4 = Extreme

Poisons Schedule	S6
Classification [1]	Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 1B, Serious Eye Damage Category 1, Reproductive Toxicity Category 2, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation), 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)

H302	Harmful if swallowed.

H314	Causes severe skin burns and eye damage.
H361	Suspected of damaging fertility or the unborn child.
H335	May cause respiratory irritation.
H412	Harmful to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P260	Do not breathe mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P281	Use personal protective equipment as required.
P270	Do not eat, drink or smoke when using this product.
P273	Avoid release to the environment.

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): 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.
P308+P313	IF exposed or concerned: Get medical advice/attention.
P310	Immediately call a POISON CENTER or doctor/physician.
P321	Specific treatment (see advice on this label).
P363	Wash contaminated clothing before reuse.

Precautionary statement(s) Storage

P405	Store locked up.
P403+P233	Store in a well-ventilated place. Keep container tightly closed.

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
144-62-7	10-30	oxalic acid
9002-92-0	0-10	lauryl alcohol, ethoxylated
141-43-5	0-10	ethanolamine
7732-18-5	balance	water

SECTION 4 First aid measures

Description of first aid measures

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 skin or hair contact occurs: ‣ 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	‣ 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. ‣ 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

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	considered. **This must definitely be left to a doctor or person authorised by him/her.** (ICSC13719)
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

- Effective therapy against burns from oxalic acid involves replacement of calcium.
- Intravenous oxalic acid is substantially excreted (88% - 90%) in the urine within 36 hours.

For acute or short term repeated exposures to strong acids:

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

INGESTION:

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

SKIN:

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

EYE:

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

[Ellenhorn and Barceloux: Medical Toxicology]

Treatment must be prompt.

- Give immediately by mouth, a dilute solution of any soluble calcium salt; calcium lactate, lime water, finely pulverised chalk or plaster suspended in a large volume of water or milk. Large amounts of calcium are required to inactivate oxalate by precipitating it as the insoluble calcium salt. Do NOT give an emetic drug.
- Perform gastric lavage carefully or not at all if severe mucosal injury is evident. Dilute lime water (calcium hydroxide) makes a good lavage fluid if used in large quantity.
- Administer a slow intravenous injection of 10-20 ml of calcium gluconate (10% solution) or of calcium chloride (5% solution). This injection may be repeated frequently to prevent hypocalcaemic tetany. Calcium gluconate (10 m) may also be given intramuscularly every few hours. Calcium compounds are never given subcutaneously; even the intramuscular route is hazardous in infants because of the incidence of sloughing.
- In severe cases parathyroid extract (100 USP units) should be given intramuscularly.
- Morphine may be necessary to control pain.
- Treat shock by cautious intravenous injection of isotonic saline solution. Check for metabolic acidosis and infuse sodium bicarbonate if necessary.
- Watch for oedema of the glottis late formation of oesophageal stricture.
- Useful demulcents by mouth include milk of magnesia, bismuth subcarbonate, and mineral oil.
- Prophylactic and therapeutic measures in anticipation of renal damage.

[GOSSELIN SMITH HODGE: Clinical Toxicology of Commercial Products]

Oxalates are readily metabolized to oxalic acid in the body. Oxalic acid is excreted in the urine at a rate of 8-40 mg/day in healthy normal men and women. About half is excreted as oxalic acid and half as magnesium, calcium or other salts. Ingested oxalic acid is also excreted in the feces. In rats, approximately half of ingested oxalic acid is destroyed by bacterial action and about 25% is excreted unchanged in the feces. In humans, calcium oxalate is deposited in the kidneys as crystals and may be deposited in non-crystalline form, bound to lipid, in the liver and other body tissues.

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

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

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. - Cool fire exposed containers with water spray from a protected location. - If safe to do so, remove containers from path of fire.

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Fire/Explosion Hazard	- Non combustible. - Not considered to be a significant fire risk. - Acids may react with metals to produce hydrogen, a highly flammable and explosive gas. - Heating may cause expansion or decomposition leading to violent rupture of containers. - May emit corrosive, poisonous fumes. May emit acrid smoke. Decomposition may produce toxic fumes of: carbon dioxide (CO_2) nitrogen oxides (NO_x) other pyrolysis products typical of burning organic material.
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	- 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. - 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	- **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	- **DO NOT** use aluminium or galvanised containers - Check regularly for spills and leaks - Lined metal can, lined metal pail/ can. - Plastic pail. - Polyliner drum. - Packing as recommended by manufacturer. - Check all containers are clearly labelled and free from leaks. 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	- Reacts with mild steel, galvanised steel / zinc producing hydrogen gas which may form an explosive mixture with air. - Segregate from alkalies, oxidising agents and chemicals readily decomposed by acids, i.e. cyanides, sulfides, carbonates. - Avoid strong bases.

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	▸ Avoid strong acids, acid chlorides, acid anhydrides and chloroformates. Avoid contamination of water, foodstuffs, feed or seed.

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	oxalic acid	Oxalic acid	1 mg/m3	2 mg/m3	Not Available	Not Available
Australia Exposure Standards	ethanolamine	Ethanolamine	3 ppm / 7.5 mg/m3	15 mg/m3 / 6 ppm	Not Available	Not Available

Emergency Limits

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
oxalic acid	Oxalic acid, anhydrous; (Ethanedioic acid)	2 mg/m3	20 mg/m3	500 mg/m3
lauryl alcohol, ethoxylated	Brij-35; (alpha-Dodecyl-omega-hydroxypoly(oxyethylene))	2.9 mg/m3	31 mg/m3	200 mg/m3
ethanolamine	Ethanolamine	6 ppm	170 ppm	1,000 ppm

Ingredient	Original IDLH	Revised IDLH
oxalic acid	500 mg/m3	Not Available
lauryl alcohol, ethoxylated	Not Available	Not Available
ethanolamine	30 ppm	Not Available
water	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
lauryl alcohol, ethoxylated	E	≤ 0.1 ppm
Notes:	*Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.*	

Exposure controls

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	▸ 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.

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

Respiratory protection

Type ABK-P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 &

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"Forsberg Clothing Performance Index".
The effect(s) of the following substance(s) are taken into account in the ***computer-generated*** selection:
Wheel Wizard

Material	CPI
BUTYL	A
NEOPRENE	A
VITON	A
NATURAL RUBBER	C
NATURAL+NEOPRENE	C
NEOPRENE/NATURAL	C
NITRILE	C
NITRILE+PVC	C
PVA	C
PVC	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.

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	ABK-AUS P2	-	ABK-PAPR-AUS / Class 1 P2
up to 50 x ES	-	ABK-AUS / Class 1 P2	-
up to 100 x ES	-	ABK-2 P2	ABK-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	Clear green liquid; mixes with water.

Physical state	Liquid	**Relative density (Water = 1)**	1.193
Odour	Not Available	**Partition coefficient n-octanol / water**	Not Available
Odour threshold	Not Available	**Auto-ignition temperature (°C)**	Not Applicable
pH (as supplied)	1.9	**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	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)	2 @ 20 degC	**Gas group**	Not Available
Solubility in water	Miscible	**pH as a solution (1%)**	2.5
Vapour density (Air = 1)	Not Available	**VOC g/L**	Not Available

SECTION 10 Stability and reactivity

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

SECTION 11 Toxicological information

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Information on toxicological effects

Inhaled	Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual. Inhalation of oxalic acid dusts or vapours can cause ulceration of the linings of the nose and throat, nosebleed, headache and nervousness. The airborne dust behaves as a strong acid producing severe local burns of the linings of the nose and throat. Corrosive acids can cause irritation of the respiratory tract, with coughing, choking and mucous membrane damage. There may be dizziness, headache, nausea and weakness. Inhalation of soluble oxalate produces irritation of the respiratory tract. Effects on the body may include protein in the urine, ulceration of the mucous membranes, headache, nervousness, cough, vomiting, severe weight loss, back pain (due to kidney injury) and weakness.
Ingestion	Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 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. Oxalic acid is a minor, normal body constituent occurring in blood, kidney, muscle and liver at very low concentrations. Higher concentrations are toxic. Ingestion of 5 grams has caused death within hours. It is a poison which affects the central nervous system and kidney function. Low doses may cause low blood calcium concentration. Ingestion of acidic corrosives may produce burns around and in the mouth, the throat and oesophagus. Immediate pain and difficulties in swallowing and speaking may also be evident.
Skin Contact	Skin contact with the material may be harmful; systemic effects may result following absorption. The material can produce chemical burns following direct contact with the skin. Solutions of 5% to 10% oxalic acid are irritating to the skin after prolonged contact; early gangrene may occur after hand immersion in oxalate solutions. Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue. Oxalate ion is an irritant, and may cause skin irritation. Following contact, skin lesions may develop. Open cuts, abraded or irritated skin should not be exposed to this material
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. Direct eye contact with acid corrosives may produce pain, tears, sensitivity to light and burns. Mild burns of the epithelia generally recover rapidly and completely.
Chronic	Based on experience with animal studies, exposure to the material may result in toxic effects to the development of the foetus, at levels which do not cause significant toxic effects to the mother. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Based on experience with similar materials, there is a possibility that exposure to the material may reduce fertility in humans at levels which do not cause other toxic effects. Repeated or prolonged exposure to acids may result in the erosion of teeth, swelling and/or ulceration of mouth lining. Irritation of airways to lung, with cough, and inflammation of lung tissue often occurs. Chronic exposure to oxalates may result in circulatory failure or nervous system irregularities, the latter due to calcium binding to oxalate. Prolonged and severe exposure can cause chronic cough, protein in the urine, vomiting, pain in the back, and gradual weight loss and weakness.

	TOXICITY	IRRITATION
Wheel Wizard	Not Available	Not Available
oxalic acid	Dermal (rabbit) LD50: 2000 mg/kg[2]	Eye: adverse effect observed (irritating)[1]
	Oral(Rat) LD50; 7.5 mg/kg[1]	Skin: no adverse effect observed (not irritating)[1]
lauryl alcohol, ethoxylated	dermal (rat) LD50: >2000 mg/kg[1]	Eye (rabbit): 0.75 mg/24h SEVERE
	Oral(Rat) LD50; 1000 mg/kg[1]	Eye (rabbit): 100 mg
		Eye: adverse effect observed (irritating)[1]
		Skin (rabbit): 500 mg/24h mild
		Skin (rabbit): 75 mg/24h mild
		Skin: no adverse effect observed (not irritating)[1]
ethanolamine	Dermal (rabbit) LD50: >=2.509-<=2.887 mg/kg[1]	Eye (rabbit): 0.76 mg - SEVERE
	Inhalation(Guinea) LC50; ~0.145 mg/l4hrs[2]	Skin (rabbit):505 mg open-moderate
	Oral(Rat) LD50; 1.091 mg/kg[1]	
water	Oral(Rat) LD50; >90 mg/kg[2]	Not Available

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*

LAURYL ALCOHOL, ETHOXYLATED	Polyethers (such as ethoxylated surfactants and polyethylene glycols) are highly susceptible to being oxidized in the air. They then form complex mixtures of oxidation products. Animal testing reveals that whole the pure, non-oxidised surfactant is non-sensitizing, many of the oxidation products are sensitisers. The oxidization products also cause irritation. Humans have regular contact with alcohol ethoxylates through a variety of industrial and consumer products such as soaps, detergents and other cleaning products. Exposure to these chemicals can occur through swallowing, inhalation, or contact with the skin or eyes. Studies of acute

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	toxicity show that relatively high volumes would have to occur to produce any toxic response. No death due to poisoning with alcohol ethoxylates has ever been reported. Studies show that alcohol ethoxylates have low toxicity through swallowing and skin contact. Animal studies show these chemicals may produce gastrointestinal irritation, stomach ulcers, hair standing up, diarrhea and lethargy. Slight to severe irritation occurred when undiluted alcohol ethyoxylates were applied to the skin and eyes of animals. These chemicals show no indication of genetic toxicity or potential to cause mutations and cancers. Both laboratory and animal testing has shown that there is no evidence for alcohol ethoxylates (AEs) causing genetic damage, mutations or cancer. No adverse reproductive or developmental effects were observed. Tri-ethylene glycol ethers undergo enzymatic oxidation to toxic alkoxy acids. They may irritate the skin and the eyes. At high oral doses, they may cause depressed reflexes, flaccid muscle tone, breathing difficulty and coma. Death may result in experimental animal. However, repeated exposure may cause dose dependent damage to the kidneys as well as reproductive and developmental defects.
ETHANOLAMINE	* Bayer Overexposure to most of these materials may cause adverse health effects. Many amine-based compounds can cause release of histamines, which, in turn, can trigger allergic and other physiological effects, including constriction of the bronchi or asthma and inflammation of the cavity of the nose. Whole-body symptoms include headache, nausea, faintness, anxiety, a decrease in blood pressure, rapid heartbeat, itching, reddening of the skin, urticaria (hives) and swelling of the face, which are usually transient. There are generally four routes of possible or potential exposure: inhalation, skin contact, eye contact, and swallowing. Inhalation: Inhaling vapours may result in moderate to severe irritation of the tissues of the nose and throat and can irritate the lungs. Higher concentrations of certain amines can produce severe respiratory irritation, characterized by discharge from the nose, coughing, difficulty in breathing and chest pain. Chronic exposure via inhalation may cause headache, nausea, vomiting, drowsiness, sore throat, inflammation of the bronchi and lungs, and possible lung damage. Repeated and/or prolonged exposure to some amines may result in liver disorders, jaundice and liver enlargement. Some amines have been shown to cause kidney, blood and central nervous system disorders in animal studies. While most polyurethane amine catalysts are not sensitisers, some certain individuals may also become sensitized to amines and my experience distress while breathing, including asthma-like attacks, whenever they are subsequently exposed to even very small amounts of vapours. Once sensitized, these individuals must avoid any further exposure to amines.
WATER	No significant acute toxicological data identified in literature search.
OXALIC ACID & LAURYL ALCOHOL, ETHOXYLATED & ETHANOLAMINE	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.
LAURYL ALCOHOL, ETHOXYLATED & ETHANOLAMINE	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.

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

Wheel Wizard

Endpoint	Test Duration (hr)	Species	Value	Source
Not Available	Not Available	Not Available	Not Available	Not Available

oxalic acid

Endpoint	Test Duration (hr)	Species	Value	Source
EC50	48	Crustacea	-125-150mg/L	4
EC50	72	Algae or other aquatic plants	>18.39-<19.92mg/L	2
NOEC	0.33	Algae or other aquatic plants	-0.002-0.003e mol/dm3	4

lauryl alcohol, ethoxylated

Endpoint	Test Duration (hr)	Species	Value	Source
LC50	96	Fish	5.849mg/L	2
EC50	48	Crustacea	1.2mg/L	5
EC50	72	Algae or other aquatic plants	0.237mg/L	2
BCF	72	Fish	1-mg/L	4
NOEC	504	Crustacea	0.144mg/L	2

ethanolamine

Endpoint	Test Duration (hr)	Species	Value	Source
LC50	96	Fish	>100mg/L	2
EC50	48	Crustacea	32.6mg/L	2

Continued...

	EC50	72	Algae or other aquatic plants	2.1mg/L	2
	NOEC	504	Crustacea	0.85mg/L	2
water	**Endpoint**	**Test Duration (hr)**	**Species**	**Value**	**Source**
	Not Available	Not Available	Not Available	Not Available	Not Available
Legend:	*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*				

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
oxalic acid	LOW	LOW
lauryl alcohol, ethoxylated	LOW	LOW
ethanolamine	LOW	LOW
water	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
oxalic acid	LOW (LogKOW = -1.7365)
lauryl alcohol, ethoxylated	LOW (LogKOW = 3.6722)
ethanolamine	LOW (LogKOW = -1.31)
water	LOW (LogKOW = -1.38)

Mobility in soil

Ingredient	Mobility
oxalic acid	HIGH (KOC = 1.895)
lauryl alcohol, ethoxylated	LOW (KOC = 10)
ethanolamine	HIGH (KOC = 1)
water	LOW (KOC = 14.3)

SECTION 13 Disposal considerations

Waste treatment methods

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. ▸ Recycle wherever possible. ▸ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. ▸ Treat and neutralise at an approved treatment plant. Treatment should involve: Neutralisation with soda-ash or soda-lime followed by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material). ▸ Decontaminate empty containers with 5% aqueous sodium hydroxide or soda ash, followed by water. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 Transport information

Labels Required

	
Marine Pollutant	NO
HAZCHEM	2X

Land transport (ADG)

UN number	1760

Continued...

UN proper shipping name	CORROSIVE LIQUID, N.O.S. (contains oxalic acid)
Transport hazard class(es)	Class: 8 Subrisk: Not Applicable
Packing group	II
Environmental hazard	Not Applicable
Special precautions for user	Special provisions: 274 Limited quantity: 1 L

Air transport (ICAO-IATA / DGR)

UN number	1760
UN proper shipping name	Corrosive liquid, n.o.s. * (contains oxalic acid)
Transport hazard class(es)	ICAO/IATA Class: 8 ICAO / IATA Subrisk: Not Applicable ERG Code: 8L
Packing group	II
Environmental hazard	Not Applicable
Special precautions for user	Special provisions: A3 A803 Cargo Only Packing Instructions: 855 Cargo Only Maximum Qty / Pack: 30 L 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 / GGVSee)

UN number	1760
UN proper shipping name	CORROSIVE LIQUID, N.O.S. (contains oxalic acid)
Transport hazard class(es)	IMDG Class: 8 IMDG Subrisk: Not Applicable
Packing group	II
Environmental hazard	Not Applicable
Special precautions for user	EMS Number: F-A , S-B Special provisions: 274 Limited Quantities: 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
oxalic acid	Not Available
lauryl alcohol, ethoxylated	Not Available
ethanolamine	Not Available
water	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
oxalic acid	Not Available
lauryl alcohol, ethoxylated	Not Available
ethanolamine	Not Available
water	Not Available

SECTION 15 Regulatory information

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

oxalic acid is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Continued...

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

lauryl alcohol, ethoxylated is found on the following regulatory lists

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 3
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4
Australian Inventory of Industrial Chemicals (AIIC)

ethanolamine is found on the following regulatory lists

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

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 (oxalic acid; lauryl alcohol, ethoxylated; ethanolamine; 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
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	21/05/2015

SDS Version Summary

Version	Issue Date	Sections Updated
3.1.1.1	31/08/2017	Acute Health (skin), Classification
6.1.1.1	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.

end of SDS