

Rigid Arterial Fluid

Frigid Fluid Company

Chemwatch: **5184-04** Version No: **4.1.1.1**

Safety Data Sheet according to OSHA HazCom Standard (2012) requirements

Chemwatch Hazard Alert Code: 3

Issue Date: 29/05/2015 Print Date: 01/06/2015 Initial Date: Not Available S.GHS.USA.EN

SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

Product Identifier

Product name	Rigid Arterial Fluid
Synonyms	Not Available
Proper shipping name	Formaldehyde solutions, with not less than 25 percent formaldehyde
Other means of identification	Not Available

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Arterial embalming fluid.
Relevant lacininea acco	7 internal erribalithing hala.

Details of the manufacturer/importer

Registered company name	Frigid Fluid Company
Address	11631 W Grand Ave Melrose Park 60164 IL United States
Telephone	+1 708-836-1215
Fax	Not Available
Website	Not Available
Email	Not Available

Emergency telephone number

Association / Organisation	Not Available
Emergency telephone numbers	1-800-424-9300
Other emergency telephone numbers	Not Available

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

Considered a Hazardous Substance by the 2012 OSHA Hazard Communication Standard (29 CFR 1910.1200). Classified as Dangerous Goods for transport purposes.



GHS Classification

Flammable Liquid Category 4, Metal Corrosion Category 1, Acute Toxicity (Oral) Category 3, Acute Toxicity (Dermal) Category 3, Acute Toxicity (Inhalation) Category 2, Skin Corrosion/Irritation Category 1B, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Carcinogen Category 1A, STOT - SE Category 1, Acute Aquatic Hazard Category 3

Label elements

GHS label elements







SIGNAL WORD

DANGER

Hazard statement(s)

	··	
H227	Combustible liquid	
H290	May be corrosive to metals	
H301	Toxic if swallowed	
H311	Toxic in contact with skin	

Chemwatch: **5184-04**Version No: **4.1.1.1**

Page 2 of 11

Rigid Arterial Fluid

Issue Date: **29/05/2015** Print Date: **01/06/2015**

H330	Fatal if inhaled
H314	Causes severe skin burns and eye damage
H318	Causes serious eye damage
H317	May cause an allergic skin reaction
H350	May cause cancer
H370	Causes damage to organs
H402	Harmful to aquatic life

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.	
P210	Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.	
P260	Do not breathe dust/fume/gas/mist/vapours/spray.	
P270	Do not eat, drink or smoke when using this product.	
P271	Use only outdoors or in a well-ventilated area.	
P280	Wear protective gloves/protective clothing/eye protection/face protection.	

Precautionary statement(s) Response

P301+P310	IF SWALLOWED: Immediately call a POISON CENTER/doctor/physician/first aider	
P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.	
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower.	
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.	
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P307+P311	IF exposed: Call a POISON CENTER/doctor/physician/first aider	

Precautionary statement(s) Storage

P403+P233	Store in a well-ventilated place. Keep container tightly closed.
P403+P235	Store in a well-ventilated place. Keep cool.
P405	Store locked up.

Precautionary statement(s) Disposal

P501 Dispose of contents/container to authorised chemical landfill or if organic to high temperature incineration

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
50-00-0	35	formaldehyde.
67-56-1	7-11	<u>methanol</u>
102-71-6	1-4	triethanolamine

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).

Chemwatch: **5184-04**Page **3** of **11**Issue Date: **29/05/2015**Version No: **4.1.1.1**Print Date: **01/06/2015**

Rigid Arterial Fluid

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. This must definitely be left to a doctor or person authorised by him/her. (ICSC13719) Avoid giving milk or oils Avoid giving alcohol. ▶ IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. ▶ For advice, contact a Poisons Information Centre or a doctor. Urgent hospital treatment is likely to be needed. In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. ▶ If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the MSDS should be provided. Further action will be the responsibility of the medical specialist ▶ If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the MSDS. Ingestion Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise ▶ INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. NOTE: Wear a protective glove when inducing vomiting by mechanical means. If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

Indication of any immediate medical attention and special treatment needed

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

EWERGENCT DEFARTMENT

- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- ► Consider endoscopy to evaluate oral injury.
- Consult a toxicologist as necessary.

BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For acute or short-term repeated exposures to formaldehyde:

INGESTION

- ▶ Patients present early with severe corrosion of the gastro-intestinal tract and systemic effects.
- Inflammation and ulceration may progress to strictures.
- > Severe acidosis results from rapid conversion of formaldehyde to formic acid. Coma, hypotension, renal failure and apnoea complicate ingestion.
- Decontaminate by dilution with milk or water containing ammonium acetate; vomiting should be induced. Follow with gastric lavage using a weak ammonia solution (converts formaldehyde to relatively inert pentamethylenetetramine)
- ▶ Gastric lavage is warranted only in first 15 minutes following ingestion.

SKIN:

• Formaldehyde can combine with epidermal protein to produce a hapten-protein couple capable of sensitising T-lymphocytes. Subsequent exposures cause a type IV hypersensitivity reaction (i.e allergic contact dermatitis). [Ellenhom & Barceloux: Medical Toxicology]

For acute and short term repeated exposures to methanol:

- Toxicity results from accumulation of formaldehyde/formic acid.
- Clinical signs are usually limited to CNS, eyes and GI tract Severe metabolic acidosis may produce dyspnea and profound systemic effects which may become intractable. All symptomatic patients should have arterial pH measured. Evaluate airway, breathing and circulation.
- ▶ Stabilise obtunded patients by giving naloxone, glucose and thiamine.
- Decontaminate with Ipecac or lavage for patients presenting 2 hours post-ingestion. Charcoal does not absorb well; the usefulness of cathartic is not established.
- Forced diuresis is not effective; haemodialysis is recommended where peak methanol levels exceed 50 mg/dL (this correlates with serum bicarbonate levels below 18 mEq/L).
- Ethanol, maintained at levels between 100 and 150 mg/dL, inhibits formation of toxic metabolites and may be indicated when peak methanol levels exceed 20 mg/dL. An intravenous solution of ethanol in D5W is optimal.
- Folate, as leucovorin, may increase the oxidative removal of formic acid. 4-methylpyrazole may be an effective adjunct in the treatment. 8. Phenytoin may be preferable to diazepam for controlling

Chemwatch: 5184-04 Page 4 of 11 Issue Date: 29/05/2015 Version No: 4.1.1.1 Print Date: 01/06/2015

Rigid Arterial Fluid

seizure

[Ellenhorn Barceloux: Medical Toxicology]

BIOLOGICAL EXPOSURE INDEX - BEL

Determinant Index Sampling Time Comment Methanol in urine 15 ma/l End of shift B. NS Before the shift at end of workweek B NS 2. Formic acid in urine 80 mg/gm creatinine

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

NS: Non-specific determinant - observed following exposure to other materials.

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.

Fire/Explosion Hazard

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

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

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

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

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
- No smoking, naked lights or ignition sources.
- Increase ventilation.

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

- Avoid all personal contact, including inhalation.
 - ▶ Wear protective clothing when risk of exposure occurs.
- Safe handling ▶ Use in a well-ventilated area.
 - Avoid contact with moisture.
 - 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 MSDS.

Conditions for safe storage, including any incompatibilities

Suitable container

▶ Lined metal can, lined metal pail/ can.

Chemwatch: **5184-04**Version No: **4.1.1.1**

Page 5 of 11 Rigid Arterial Fluid

Issue Date: 29/05/2015 Print Date: 01/06/2015

- Plastic pail.
- Polvliner 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.
- Braine and joinbane i
 - Avoid reaction with oxidising agents
 Avoid strong acids, bases.

Storage incompatibility

• Incidents involving interaction of active oxidants and reducing agents, either by design or accident, are usually very energetic and examples of so-called redox reactions.

PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

Control parameters

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
US OSHA Permissible Exposure Levels (PELs) - Table Z1	formaldehyde.	Formaldehyde	0.75 ppm	2 ppm	Not Available	see 1910.1048
US OSHA Permissible Exposure Levels (PELs) - Table Z2	formaldehyde.	Formaldehyde	0.75 ppm	2 ppm	Not Available	see 1910.1048
US ACGIH Threshold Limit Values (TLV)	formaldehyde.	‡ Formaldehyde	Not Available	Not Available	0.3 ppm	TLV® Basis: URT & eye irr
US NIOSH Recommended Exposure Limits (RELs)	formaldehyde.	Methanal, Methyl aldehyde, Methylene oxide / Formaldehyde solution [Note: Formalin is an aqueous solution that is 37% formaldehyde by weight; inhibited solutions usually contain 6-12% methyl alcohol. Also see specific listings for Formaldehyde and Methyl alcohol.]	0.016 ppm	Not Available	0.1 ppm	Ca See Appendix A
US OSHA Permissible Exposure Levels (PELs) - Table Z1	methanol	Methyl alcohol	260 mg/m3 / 200 ppm	Not Available	Not Available	Not Available
US ACGIH Threshold Limit Values (TLV)	methanol	Methanol	200 ppm	250 ppm	Not Available	TLV® Basis: Headache; eye dam; dizziness; nausea; BEI
US NIOSH Recommended Exposure Limits (RELs)	methanol	Carbinol, Columbian spirits, Methanol, Pyroligneous spirit, Wood alcohol, Wood naphtha, Wood spirit	260 mg/m3 / 200 ppm	325 mg/m3 / 250 ppm	Not Available	[skin]
US ACGIH Threshold Limit Values (TLV)	triethanolamine	Triethanolamine	5 mg/m3	Not Available	Not Available	TLV® Basis: Eye & skin irr; BEIA

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
formaldehyde.	Formaldehyde	Not Available	Not Available	Not Available
methanol	Methyl alcohol; (Methanol)	Not Available	Not Available	Not Available
triethanolamine	Triethanolamine; (Trihydroxytriethylamine)	15 mg/m3	51 mg/m3	1100 mg/m3

Ingredient	Original IDLH	Revised IDLH
formaldehyde.	30 ppm	20 ppm
methanol	25,000 ppm	6,000 ppm
triethanolamine	Not Available	Not Available

Exposure controls

Appropriate engineering controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.

The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Personal protection











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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

Page 6 of 11 Rigid Arterial Fluid

Issue Date: **29/05/2015**Print Date: **01/06/2015**

Skin protection	 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. See Hand protection below
Jan protection	·
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. NOTE: 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. 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.
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.
Thermal hazards	Not Available

Recommended material(s)

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:

Rigid Arterial Fluid

Material	CPI
BUTYL	Α
NEOPRENE	В
BUTYL/NEOPRENE	С
NAT+NEOPR+NITRILE	С
NATURAL RUBBER	С
NATURAL+NEOPRENE	С
NEOPRENE/NATURAL	С
NITRILE	С
PE	С
PE/EVAL/PE	С
PVA	С
PVC	С
PVDC/PE/PVDC	С
SARANEX-23	С
SARANEX-23 2-PLY	С
TEFLON	С
VITON	С
VITON/NEOPRENE	С

^{*} 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.

Respiratory protection

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

^ - Full-fac

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)

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Clear, orange liquid with pungent odour; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.1
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature	Not Available

Chemwatch: **5184-04** Page **7** of **11**

Version No: **4.1.1.1**

Rigid Arterial Fluid

Issue Date: **29/05/2015** Print Date: **01/06/2015**

Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	63	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	85	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Combustible.	Oxidising properties	Not Available
Upper Explosive Limit (%)	73	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	6	Volatile Component (%vol)	>90
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	<1	VOC g/L	Not Available

SECTION 10 STABILITY AND REACTIVITY

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

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual. The material can produce chemical burns following direct contact with the skin. There is strong evidence to suggest that this material, on a single contact with skin, can cause serious, irreversible damage of organs. 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 us of the material and ensure that any external damage is suitably protected. Minor regular skin contact results in hardening of skin, making it feel like leather. It may also cause skin inflammation and an itchy rash especially among workers exposed to formaldehyde in hospitals, in the production of resins, textiles, shampoos and laminated furniture. 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. Irritation of the eyes may produce a heavy secretion of tears (lachrymation). Studies show that inhaling this substance for over a long period (e.g. in an occupational setting) may increase the risk of cancer. 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 that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population.		
Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by swallowing. Swallowing of the liquid may cause aspiration into the lungs with the risk of chemical pneumonitis; serious consequences may result. (ICSC13733) This substance if swallowed may cause immediate severe abdominal pain, with vomiting, nausea, passage of frequent watery stool, reduced or no urine production, dizziness, followed by unconsciousness, convulsions and may result in death. It can also cause sight problems and possible permanent blindness. Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual. The material can produce chemical burns following direct contact with skin, can cause serious, irreversible damage of organs. Open cuts, abraded or irritated skin should not be exposed to this material. On a single contact with skin, can cause serious, irreversible damage of organs. Open cuts, abraded or irritated skin should not be exposed to this material. On a single contact with skin, can cause serious, irreversible damage of organs. Open cuts, abraded or irritated skin should not be exposed to this material. On the exposed to this material contact with skin, can cause serious, irreversible damage of organs. Open cuts, abraded or irritated skin should not be exposed to this material. On a single contact with skin, can cause serious, irreversible damage of organs. Open cuts, abraded or irritated skin should not be exposed to this material. On a single contact with skin, can cause serious, irreversible damage of organs. Open cuts, abraded or irritated skin should not be exposed to the exposure on the skin prior to the us of the material and ensure that any external damage is suitably protected. Minor regular skin contact results in hardening of skin, making it feel l	Inhaled	There is strong evidence to suggest that this material can cause, if inhaled once, serious, irreversible damage of organs. Minor but regular methanol exposures may effect the central nervous system, optic nerves and retinae. Symptoms may be delayed, with headache, fatigue, nausea, blurring of vision and double vision. Continued or severe exposures may cause damage to optic nerves, which may become severe with permanent visual impairment even blindness resulting. WARNING: Methanol is only slowly eliminated from the body and should be regarded as a cumulative poison which cannot be made non-harmful [CCINFO]
There is strong evidence to suggest that this material, on a single contact with skin, can cause serious, irreversible damage of organs. 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 us of the material and ensure that any external damage is suitably protected. Minor regular skin contact results in hardening of skin, making it feel like leather. It may also cause skin inflammation and an itchy rash especially among workers exposed to formaldehyde in hospitals, in the production of resins, textiles, shampoos and laminated furniture. 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. Irritation of the eyes may produce a heavy secretion of tears (lachrymation). 510meth Studies show that inhaling this substance for over a long period (e.g. in an occupational setting) may increase the risk of cancer. 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 that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Long-term exposure to methanol vapour, at concentrations exceeding 3000 ppm, may produce cumulative effects characterised by gastrointestinal disturbance (nausea, vomiting), headache, ringing in the ears, insomnia, trembling, unsteady gait, vertigo, conjunctivitis and clouded or double vision. Liver and/or kidney	Ingestion	Strong evidence exists that exposure to the material may produce serious irreversible damage (other than carcinogenesis, mutagenesis and teratogenesis) following a single exposure by swallowing. Swallowing of the liquid may cause aspiration into the lungs with the risk of chemical pneumonitis; serious consequences may result. (ICSC13733) This substance if swallowed may cause immediate severe abdominal pain, with vomiting, nausea, passage of frequent watery stool, reduced or no urine production, dizziness, followed by unconsciousness, convulsions and may result in death. It can also cause sight problems and possible permanent blindness. Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may
If applied to the eyes, this material causes severe eye damage. Irritation of the eyes may produce a heavy secretion of tears (lachrymation). 510meth Studies show that inhaling this substance for over a long period (e.g. in an occupational setting) may increase the risk of cancer. 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 that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Long-term exposure to methanol vapour, at concentrations exceeding 3000 ppm, may produce cumulative effects characterised by gastrointestinal disturbance (nausea, vomiting), headache, ringing in the ears, insomnia, trembling, unsteady gait, vertigo, conjunctivitis and clouded or double vision. Liver and/or kidney	Skin Contact	There is strong evidence to suggest that this material, on a single contact with skin, can cause serious, irreversible damage of organs. 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. Minor regular skin contact results in hardening of skin, making it feel like leather. It may also cause skin inflammation and an itchy rash especially among
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 that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Long-term exposure to methanol vapour, at concentrations exceeding 3000 ppm, may produce cumulative effects characterised by gastrointestinal disturbance (nausea, vomiting), headache, ringing in the ears, insomnia, trembling, unsteady gait, vertigo, conjunctivitis and clouded or double vision. Liver and/or kidney	Еуе	If applied to the eyes, this material causes severe eye damage. Irritation of the eyes may produce a heavy secretion of tears (lachrymation).
	Chronic	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 that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Long-term exposure to methanol vapour, at concentrations exceeding 3000 ppm, may produce cumulative effects characterised by gastrointestinal disturbances (nausea, vomiting), headache, ringing in the ears, insomnia, trembling, unsteady gait, vertigo, conjunctivitis and clouded or double vision. Liver and/or kidney

Rigid Arterial Fluid	TOXICITY Not Available	IRRITATION Not Available
	TOXICITY Dermal (rabbit) LD50: 270 mg/kg ^[2]	IRRITATION Eye (human): 4 ppm/5m
formaldehyde.	Inhalation (rat) LC50: 250 ppm/4H ^[2]	Eye (rabbit): 0.75 mg/24H SEVERE
	Oral (rat) LD50: 100 mg/kgm ^[2]	Skin (human): 0.15 mg/3d-l mild

Chemwatch: 5184-04 Version No: 4.1.1.1

Page **8** of **11**

Rigid Arterial Fluid

Issue Date: 29/05/2015 Print Date: 01/06/2015

		Skin (rabbit): 2 mg/	24H SEVERE
	TOXICITY	IRRITATION	
	Dermal (rabbit) LD50: 15800 mg/kg ^[2]	Eye (rabbit): 100 m	g/24h-moderate
methanol	Inhalation (rat) LC50: 64000 ppm/4h ^[2]	Eye (rabbit): 40 mg	-moderate
	Oral (rat) LD50: >11872769 mg/kg ^[1]	Skin (rabbit): 20 mg	/24 h-moderate
	TOXICITY	IRRITATION	
	dermal (rat) LD50: >18080 mg/kg ^[2]	Eye (rabbit): 0.1 ml	-
	Oral (rat) LD50: 5559.6 mg/kg(female) * ^[2]	Eye (rabbit): 10 mg	- mild
		Eye (rabbit): 5.62 m	ng - SEVERE
		minor conjunctival	rritation
triethanolamine		minor iritis,	
		no corneal injury *	
		no irritation *	
		Skin (human): 15 n	
		Skin (rabbit): 4 h oo	
		Skin (rabbit): 560 m	
		with significant disc	charge;
Legend:	New York Properties Negistered Substances - A extracted from RTECS - Register of Toxic Effect of chemical Substances.		manufacturer's msds. Unless otherwise specified data
METHANOL	The material may cause skin irritation after prolonged or repeate scaling and thickening of the skin.	ed exposure and may produce on co	entact skin redness, swelling, the production of vesicles,
TRIETHANOLAMINE	Lachrymation, diarrhoea, convulsions, urinary tract changes, cl		
	in liver weight, dermatitis after systemic exposure, kidney, urete quoted above is for occluded patch in male or female animals *	r, bladder tumours recorded. Equivo	
Rigid Arterial Fluid & FORMALDEHYDE. & TRIETHANOLAMINE		r, bladder turnours recorded. Equivo Union Carbide and may not be specific to this proma, more rarely as urticaria or Quince delayed type. Other allergic skin regren is not simply determined by its weakly sensitising substance which	duct. ke's oedema. The pathogenesis of contact eczema eactions, e.g. contact urticaria, involve antibody- s ensitisation potential: the distribution of the substance
Rigid Arterial Fluid & FORMALDEHYDE. &	quoted above is for occluded patch in male or female animals * The following information refers to contact allergens as a group Contact allergies quickly manifest themselves as contact eczer involves a cell-mediated (T lymphocytes) immune reaction of the mediated immune reactions. The significance of the contact allergies and the opportunities for contact with it are equally important. A	r, bladder tumours recorded. Equivo Union Carbide and may not be specific to this pro- na, more rarely as urticaria or Quinc e delayed type. Other allergic skin re- ergen is not simply determined by its weakly sensitising substance which iduals come into contact.	duct. ke's oedema. The pathogenesis of contact eczema eactions, e.g. contact urticaria, involve antibody- sensitisation potential: the distribution of the substance is widely distributed can be a more important allergen
Rigid Arterial Fluid & FORMALDEHYDE. & TRIETHANOLAMINE	quoted above is for occluded patch in male or female animals * The following information refers to contact allergens as a group Contact allergies quickly manifest themselves as contact eczer involves a cell-mediated (T lymphocytes) immune reaction of th mediated immune reactions. The significance of the contact alle and the opportunities for contact with it are equally important. A than one with stronger sensitising potential with which few indiv	r, bladder tumours recorded. Equivo Union Carbide and may not be specific to this pro- na, more rarely as urticaria or Quinc e delayed type. Other allergic skin re- ergen is not simply determined by its weakly sensitising substance which iduals come into contact.	duct. ke's oedema. The pathogenesis of contact eczema eactions, e.g. contact urticaria, involve antibodysensitisation potential: the distribution of the substance is widely distributed can be a more important allergen
Rigid Arterial Fluid & FORMALDEHYDE. & TRIETHANOLAMINE	quoted above is for occluded patch in male or female animals * The following information refers to contact allergens as a group Contact allergies quickly manifest themselves as contact eczer involves a cell-mediated (T lymphocytes) immune reaction of th mediated immune reactions. The significance of the contact alle and the opportunities for contact with it are equally important. A than one with stronger sensitising potential with which few indiv	r, bladder tumours recorded. Equivo Union Carbide a and may not be specific to this proma, more rarely as urticaria or Quince e delayed type. Other allergic skin regen is not simply determined by its weakly sensitising substance which iduals come into contact. Carcinogenicity	duct. ke's oedema. The pathogenesis of contact eczema eactions, e.g. contact urticaria, involve antibody- s ensitisation potential: the distribution of the substance is widely distributed can be a more important allergen
Rigid Arterial Fluid & FORMALDEHYDE. & TRIETHANOLAMINE Acute Toxicity Skin Irritation/Corrosion Serious Eye	quoted above is for occluded patch in male or female animals * The following information refers to contact allergens as a group Contact allergies quickly manifest themselves as contact eczer involves a cell-mediated (T lymphocytes) immune reaction of th mediated immune reactions. The significance of the contact alle and the opportunities for contact with it are equally important. A than one with stronger sensitising potential with which few indiv	r, bladder tumours recorded. Equivo Union Carbide o and may not be specific to this proma, more rarely as urticaria or Quince e delayed type. Other allergic skin regreen is not simply determined by its weakly sensitising substance which iduals come into contact. Carcinogenicity Reproductivity	duct. ke's oedema. The pathogenesis of contact eczema eactions, e.g. contact urticaria, involve antibody- s sensitisation potential: the distribution of the substance is widely distributed can be a more important allergen

Legend:

✓ – Data required to make classification available
 X – Data available but does not fill the criteria for classification

Data Not Available to make classification

CMR STATUS

CARCINOGEN	formaldehyde. US Environmental Defense Scorecard Recognized Carcinogens US Air Toxics Hot Spots TSD for Describing Available Cancer Potency Factors US NIOSH Recommended Exposure Limits (RELs) - Carcinogens P65 2A Ca See Appendix A	
EYE	formaldehyde. US - California OEHHA/ARB - Acute Reference Exposure Levels and Target Organs (RELs) - Eye Toxic Air Contaminant: The Air Resources Board has identified this substance as a Toxic Air Contaminant. FORMALDEHYDE X	
RESPIRATORY	formaldehyde. US - California OEHHA/ARB - Chronic Reference Exposure Levels and Target Organs (CRELs) - Respiratory X	
SKIN	US - Hawaii Air Contaminant Limits - Skin Designation US - Alaska Limits for Air Contaminants - Skin Designation US NIOSH Recommended Exposure Limits (RELs) - Skin US - Washington Permissible exposure limits of air contaminants - Skin US - Michigan Exposure Limits for Air Contaminants - Skin US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants - Skin US ACGIH Threshold Limit Values (TLV) - Skin US - California Permissible Exposure Limits for Chemical Contaminants - Skin US - North Carolina Permissible Exposure Limits (PELs) for Air Contaminants - Skin Designation [NLV] US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants - Skin US - Minnesota Permissible Exposure Limits (PELs) - Skin	

Rigid Arterial Fluid

Issue Date: 29/05/2015 Print Date: 01/06/2015

Toxicity

Harmful to aquatic organisms.

For Formaldehyde:

Environmental Fate: Formaldehyde is common in the environment as a contaminant of smoke and as photochemical smog. Concentrated solutions containing formaldehyde are unstable and oxidize slowly. In the presence of air and moisture, polymerization takes place readily in concentrated solutions at room temperature to form paraformaldehyde.

Atmospheric Fate: In the atmosphere, formaldehyde both photolysis and reacts with reactive free radicals (primarily hydroxyl radicals). Reaction with nitrate radicals, insignificant during the day, may be an important removal process at night.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
formaldehyde.	LOW (Half-life = 14 days)	LOW (Half-life = 2.97 days)
methanol	LOW	LOW
triethanolamine	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
formaldehyde.	LOW (LogKOW = 0.35)
methanol	LOW (BCF = 10)
triethanolamine	LOW (BCF = 4)

Mobility in soil

Ingredient	Mobility
formaldehyde.	HIGH (KOC = 1)
methanol	HIGH (KOC = 1)
triethanolamine	LOW (KOC = 10)

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 MSDS and observe all notices pertaining to the product. Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area.

SECTION 14 TRANSPORT INFORMATION

Labels Required



Marine Pollutant

NO

Land transport (DOT)

UN number	2209
Packing group	III
UN proper shipping name	Formaldehyde solutions, with not less than 25 percent formaldehyde
Environmental hazard	No relevant data
Transport hazard class(es)	Class 8 Subrisk Not Applicable
Special precautions for user	Special provisions IB3, T4, TP1

Air transport (ICAO-IATA / DGR)

UN number	2209
Packing group	III
UN proper shipping name	Formaldehyde solution with not less than 25% formaldehyde
Environmental hazard	No relevant data
Transport hazard class(es)	ICAO/IATA Class 8 ICAO / IATA Subrisk Not Applicable ERG Code 8i

Version No: 4.1.1.1

Issue Date: 29/05/2015 Print Date: 01/06/2015

Sea transport (IMDG-Code / GGVSee)

UN number	2209
Packing group	III
UN proper shipping name	FORMALDEHYDE SOLUTION with not less than 25% formaldehyde
Environmental hazard	Not Applicable
Transport hazard class(es)	IMDG Class 8 IMDG Subrisk Not Applicable
Special precautions for user	EMS Number F-A , S-B Special provisions Not Applicable Limited Quantities 5 L

Rigid Arterial Fluid

Transport in bulk according to Annex II of MARPOL 73 / 78 and the IBC code

Source	Ingredient	Pollution Category
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	formaldehyde.	Υ
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	methanol	Y
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	triethanolamine	z

SECTION 15 REGULATORY INFORMATION

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

formaldehyde.(50-00-0) is
found on the following
regulatory lists

"US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants", "US ATSDR Minimal Risk Levels for Hazardous Substances (MRLs)", "US -Hawaii Air Contaminant Limits", "US - California Permissible Exposure Limits for Chemical Contaminants", "US - California Proposition 65 - No Significant Risk Levels (NSRLs) for Carcinogens", "US - Idaho - Limits for Air Contaminants", "US ACGIH Threshold Limit Values (TLV) - Carcinogens", "US National Toxicology Program (NTP) 13th Report Part A Known to be Human Carcinogens", "US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants", "US EPA Carcinogens Listing", "US - Oregon Permissible Exposure Limits (Z-2)", "US - Oregon Permissible Exposure Limits (Z-1)","International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs","US - Michigan Exposure Limits for Air Contaminants", "US - New Jersey Right to Know - Special Health Hazard Substance List (SHHSL): Mutagens", "US - California - Proposition 65 - Priority List for the Development of MADLs for Chemicals Causing Reproductive Toxicity", "US - California OEHHA/ARB - Acute Reference Exposure Levels and Target Organs (RELs)", "US - Washington Toxic air pollutants and their ASIL, SQER and de minimis emission values", "US - Alaska Limits for Air Contaminants", "US NIOSH Recommended Exposure Limits (RELs)", "US OSHA Carcinogens Listing", "US - Washington Permissible exposure limits of air contaminants", "US -Wyoming Toxic and Hazardous Substances Table Z-2 Acceptable ceiling concentration, Acceptable maximum peak above the acceptable ceiling concentration for an 8-hr shift","US OSHA Permissible Exposure Levels (PELs) - Table Z2","US Spacecraft Maximum Allowable Concentrations (SMACs) for Airborne Contaminants", "US - Minnesota Permissible Exposure Limits (PELs)", "US - California Proposition 65 - Carcinogens", "US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants", "US - Idaho - Acceptable Maximum Peak Concentrations", "US ACGIH Threshold Limit Values (TLV)","US - California OEHHA/ARB - Chronic Reference Exposure Levels and Target Organs (CRELs)","US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory", "US OSHA Permissible Exposure Levels (PELs) - Table Z1", "US - New Jersey Right to Know - Special Health Hazard Substance List (SHHSL): Carcinogens'

methanol(67-56-1) is found on the following regulatory lists

"US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants", "US - Hawaii Air Contaminant Limits", "US - California Permissible Exposure Limits for Chemical Contaminants", "US - California Proposition 65 - No Significant Risk Levels (NSRLs) for Carcinogens", "US - Idaho - Limits for Air Contaminants", "US - California Proposition 65 - Reproductive Toxicity", "US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants", "US - Oregon Permissible Exposure Limits (Z-1)", "US - Michigan Exposure Limits for Air Contaminants", "US - California - Proposition 65 -Priority List for the Development of MADLs for Chemicals Causing Reproductive Toxicity", "US - California OEHHA/ARB - Acute Reference Exposure Levels and Target Organs (RELs)", "US - Washington Toxic air pollutants and their ASIL, SQER and de minimis emission values", "US - Alaska Limits for Air Contaminants", "US NIOSH Recommended Exposure Limits (RELs)", "US - Washington Permissible exposure limits of air contaminants", "US Spacecraft Maximum Allowable Concentrations (SMACs) for Airborne Contaminants","US Priority List for the Development of Proposition 65 Safe Harbor Levels - No Significant Risk Levels (NSRLs) for Carcinogens and Maximum Allowable Dose Levels (MADLs) for Chemicals Causing Reproductive Toxicity", "US Minnesota Permissible Exposure Limits (PELs)","US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants","US ACGIH Threshold Limit Values (TLV)", "US - California OEHHA/ARB - Chronic Reference Exposure Levels and Target Organs (CRELs)", "US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory", "US OSHA Permissible Exposure Levels (PELs) - Table Z1"

triethanolamine(102-71-6) is found on the following regulatory lists

"US - California Permissible Exposure Limits for Chemical Contaminants", "International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs", "US ACGIH Threshold Limit Values (TLV)", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory"

National Inventory	Status
Australia - AICS	Υ
Canada - DSL	Υ
China - IECSC	Υ
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	Υ
Korea - KECI	Υ
New Zealand - NZIoC	Υ
Philippines - PICCS	Υ
USA - TSCA	Υ

 Chemwatch: 5184-04
 Page 11 of 11
 Issue Date: 29/05/2015

 Version No: 4.1.1.1
 Print Date: 01/06/2015

Rigid Arterial Fluid

Legend: Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 OTHER INFORMATION

Other information

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

A list of reference resources used to assist the committee may be found at:

www.chemwatch.net

The (M)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.

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