

# **Cummins (Cummins Filtration)**

Chemwatch: 4612-17 Version No: 3.1.1.1 Material Safety Data Sheet according to NOHSC and ADG requirements Chemwatch Hazard Alert Code: 2

Issue Date: 01/01/2013 Print Date: 06/11/2014 Initial Date: Not Available S.Local.AUS.EN

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

# **Product Identifier**

Product nameNew Holland DCAChemical NameNot ApplicableSynonymsDCA, corrosion inhibitor, diesel coolant additive, liquid cooling systemProper shipping nameNot ApplicableChemical formulaNot ApplicableOther means of identificationNot AvailableCAS numberNot Applicable		
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Other means of identification       Not Available         CAS number       Not Applicable	Chemical formula	Not Applicable
CAS number Not Applicable	Other means of identification	Not Available
	CAS number	Not Applicable

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

Relevant identified	Corrosion inhibiting additive for engine cooling water system. Used as per directions. May be premixed or added direct to
uses	cooling water.

#### Details of the manufacturer/importer

Registered company name	Cummins (Cummins Filtration)	New Holland
Address	31 Garden Street Kilsyth 3137 VIC Australia	31-53 Kurrajong Road St Mary's 2760 NSW Australia
Telephone	+61 3 9721 9100	+61 2 9673 7777
Fax	+61 3 9721 9148	+61 2 9673 4588
Website	Not Available	Not Available
Email	Not Available	Not Available

#### **Emergency telephone number**

Association / Organisation	Not Available	Not Available
Emergency telephone numbers	1800 039 008 (24 hours)	Not Available
Other emergency telephone numbers	+61 3 9573 3112	Not Available

#### CHEMWATCH EMERGENCY RESPONSE

Primary Number	Alternative Number 1	Alternative Number 2
1800 039 008	+612 9186 1132	Not Available

Once connected and if the message is not in your prefered language then please dial 01

#### **SECTION 2 HAZARDS IDENTIFICATION**

### Classification of the substance or mixture

HAZARDOUS SUBSTANCE. NON-DANGEROUS GOODS. According to the Criteria of NOHSC, and the ADG Code.

CHEMWATCH HAZARD RATINGS

New	Holland	DCA

		i.
	Min Max	1
Flammability	0	1
Toxicity	2	0 – Minimum
Body Contact	2	1 = Low
Reactivity	0	2 = Moderate
Chronic	2	4 = Extreme

Poisons Schedule	S6	
Risk Phrases <sup>[1]</sup>	R36/38	Irritating to eyes and skin.
	R33	Danger of cumulative effects.
	R22	Harmful if swallowed.
	R51	Toxic to aquatic organisms.
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI	



Relevant risk statements are found in section 2

Indication(s) of danger	Xn		
SAFETY ADVICE			
S13	Keep away from food, drink and animal feeding stuffs.		
S23	Do not breathe gas/fumes/vapour/spray.		
S25	Avoid contact with eyes.		
S26	In case of contact with eyes, rinse with plenty of water and contact Doctor or Poisons Information Centre.		
S29	Do not empty into drains.		
S35	This material and its container must be disposed of in a safe way.		
S36	Wear suitable protective clothing.		
S37	Wear suitable gloves.		
S39	Wear eye/face protection.		
S40	To clean the floor and all objects contaminated by this material, use water.		
S46	If swallowed, seek medical advice immediately and show this container or label.		
S56	Dispose of this material and its container at hazardous or special waste collection point.		
S57	Use appropriate container to avoid environmental contamination.		
S64	If swallowed, rinse mouth with water (only if the person is conscious).		
Other hazards			

Limited evidence of a carcinogenic effect*.	
May produce discomfort of the respiratory system*.	

# SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

### Substances

See section below for composition of Mixtures

# **Mixtures**

CAS No	%[weight]	Name	
7778-77-0	5-15	potassium phosphate, monobasic	
7631-95-0	0.5-2	sodium molybdate	
7757-79-1	1-5	potassium nitrate	
7758-09-0	1-3	potassium nitrite	
1312-76-1	0.5-2	potassium silicate	
Not Available	1-3	organic corrosion inhibitors unregulated	
			Continued

### **SECTION 4 FIRST AID MEASURES**

#### Description of first aid measures

Eye Contact	<ul> <li>If this product comes in contact with the eyes:</li> <li>Immediately hold eyelids apart and flush the eye continuously with running water.</li> <li>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.</li> <li>Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.</li> <li>Transport to hospital or doctor without delay.</li> <li>Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
Skin Contact	<ul> <li>If skin contact occurs:</li> <li>Immediately remove all contaminated clothing, including footwear.</li> <li>Flush skin and hair with running water (and soap if available).</li> <li>Seek medical attention in event of irritation.</li> </ul>
Inhalation	<ul> <li>If fumes or combustion products are inhaled remove from contaminated area.</li> <li>Lay patient down. Keep warm and rested.</li> <li>Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>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.</li> <li>Transport to hospital, or doctor, without delay.</li> </ul>
Ingestion	<ul> <li>IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.</li> <li>For advice, contact a Poisons Information Centre or a doctor.</li> <li>Urgent hospital treatment is likely to be needed.</li> <li>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.</li> <li>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.</li> <li>If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the MSDS.</li> </ul> Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise: <ul> <li>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.</li></ul>

#### Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

As in all cases of suspected poisoning, follow the ABCDEs of emergency medicine (airway, breathing, circulation, disability, exposure), then the ABCDEs of toxicology (antidotes, basics, change absorption, change distribution, change elimination). For poisons (where specific treatment regime is absent):

#### 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.
- 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.

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

# SECTION 5 FIREFIGHTING MEASURES

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Fire Fighting	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear full body protective clothing with breathing apparatus.</li> <li>Prevent, by any means available, spillage from entering drains or water course.</li> </ul>
	Use fire fighting procedures suitable for surrounding area.
Fire/Explosion Hazard	<ul> <li>Non combustible.</li> <li>Not considered to be a significant fire risk.</li> <li>Expansion or decomposition on heating may lead to violent rupture of containers.</li> <li>Decomposes on heating and may produce toxic/ irritating fumes.</li> </ul>

# SECTION 6 ACCIDENTAL RELEASE MEASURES

## Personal precautions, protective equipment and emergency procedures

Minor Spills	<ul> <li>Clean up all spills immediately.</li> <li>Avoid breathing vapours and contact with skin and eyes.</li> <li>Control personal contact with the substance, by using protective equipment.</li> <li>Contain and absorb spill with sand, earth, inert material or vermiculite.</li> </ul>
Major Spills	<ul> <li>Clear area of personnel and move upwind.</li> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear full body protective clothing with breathing apparatus.</li> <li>Prevent, by any means available, spillage from entering drains or water course.</li> </ul>
	Personal Protective Equipment advice is contained in Section 8 of the MSDS.

# SECTION 7 HANDLING AND STORAGE

#### Precautions for safe handling

Safe handling	<ul> <li>Avoid all personal contact, including inhalation.</li> <li>Wear protective clothing when risk of exposure occurs.</li> <li>Use in a well-ventilated area.</li> <li>Prevent concentration in hollows and sumps.</li> </ul>
Other information	<ul> <li>Store in original containers.</li> <li>Keep containers securely sealed.</li> <li>Store in a cool, dry, well-ventilated area.</li> <li>Store away from incompatible materials and foodstuff containers.</li> </ul>

# Conditions for safe storage, including any incompatibilities

Suitable container	<ul> <li>Lined metal can, lined metal pail/ can.</li> <li>Plastic pail.</li> <li>Polyliner drum.</li> <li>Packing as recommended by manufacturer.</li> </ul>
Storage incompatibility	None known

#### PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

# **Control parameters**

# OCCUPATIONAL EXPOSURE LIMITS (OEL)

# INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure	sodium	Molybdenum, soluble compounds (as Mo)	5	Not	Not	Not
Standards	molybdate		mg/m3	Available	Available	Available

#### EMERGENCY LIMITS

Ingredient	TEEL-0	TEEL-1	TEEL-2		TEEL-3
New Holland DCA	Not Available	Not Available	Not Available		Not Available
Ingredient	Original IDLH			Revised IDLH	
potassium phosphate, monobasic	Not Available			Not Available	
sodium molybdate	N.E. mg/m3 / N.E. ppm			1,000 mg/m3	
potassium nitrate	Not Available			Not Available	
potassium nitrite	Not Available			Not Available	
potassium silicate	Not Available			Not Available	
organic corrosion inhibitors unregulated	Not Available			Not Available	
scale inhibitors and surfactants	Not Available			Not Available	
dyes, defoamers, stabilisers	Not Available			Not Available	
water	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.
Personal protection	
Eye and face protection	<ul> <li>Safety glasses with side shields.</li> <li>Chemical goggles.</li> <li>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.</li> </ul>
Skin protection	See Hand protection below
Hands/feet protection	<ul> <li>Wear chemical protective gloves, e.g. PVC.</li> <li>Wear safety footwear or safety gumboots, e.g. Rubber</li> </ul>
Body protection	See Other protection below
Other protection	<ul> <li>Overalls.</li> <li>Eyewash unit.</li> <li>Barrier cream.</li> <li>Skin cleansing cream.</li> </ul>
Thermal hazards	Not Available

#### Recommended material(s)

#### GLOVE SELECTION INDEX

Respiratory protection Not Applicable

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: New Holland DCA

Material

BUTYL	А
NEOPRENE	А
VITON	А
NATURAL RUBBER	С
PVA	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.

## SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

#### Information on basic physical and chemical properties

Appearance	Blue alkaline liquid with a little odour; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.145
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	11-12	Decomposition temperature	Not Available
Melting point / freezing point (°C)	-10	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	100	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Slow	Explosive properties	Not Available
Flammability	Not Available	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)	80 approx.
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution(1%)	10-10.5 @ 3%
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available

# SECTION 10 STABILITY AND REACTIVITY

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

# SECTION 11 TOXICOLOGICAL INFORMATION

# Information on toxicological effects

Inhaled	Not normally a hazard due to non-volatile nature of product Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual. Phosphates are slowly and incompletely absorbed from the gastrointestinal tract and are unlikely (other than in abuse) to produce the systemic effects which occur when introduced by other routes. Such effects include vomiting, lethargy, fever, diarrhoea, falls in blood pressure, slow pulse, cyanosis, carpal spasm, coma and tetany. These effects result following sequestration of blood calcium.
Skin Contact	The material may produce severe skin irritation after prolonged or repeated exposure, and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) thickening of the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.
Eye	The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.
Chronic	Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. Dogs given daily doses of sodium phosphate dibasic for 9-22 weeks showed calcium deposits in the kidneys (nephrocalcinosis) with disseminated atrophy of the proximal tubule. Animals fed on sodium phosphate dibasic and potassium dihydrogen phosphate, in both short- and long-term studies, showed increased bone porosity; hyperparathyroidism and soft tissue calcification were also evident. Persons, exposed for long periods to molybdenum oxides, suffer from anaemia.

New Hellend DCA	TOXICITY	IRRITATION	
New Holland DCA	Not Available	Not Available	
potassium phosphate, monobasic	TOXICITY Not Available	IRRITATION Not Available	
sodium molybdate	TOXICITYInhalation (Rat) LC50: >2080 mg/m3/4hIntraperitoneal (Mouse) LD50: 257 mg/kgIntraperitoneal (Mouse) LD50: 303 mg/kgIntraperitoneal (Rat) LD50: 520 mg/kgIntraperitoneal (Rat) LD50: 576 mg/kgIntravenous (Cat) LD50: 917 mg/kgOral (Dog) LD50: 250 mg/kgOral (Guinea pig) LD50: 310 mg/kgOral (Rat) LD50: 250 mg/kgOral (Rat) LD50: 250 mg/kgOral (Rat) LD50: 250 mg/kgOral (Rat) LD50: 4000 mg/kgSubcutaneous (Mouse) LD50: 570 mg/kg		
	Not Available	Not Available	
	ΤΟΧΙΟΙΤΥ	IRRITATION	
potassium nitrate	Oral (rabbit) LD50: 1901 mg/kg	Nil reported	
		Continued	d

	Oral (rat) LD50: 3750 mg/kg	
	Not Available	Not Available
potassium nitrite	ΤΟΧΙΟΙΤΥ	IRRITATION
	Inhalation (mouse) LC50: 85000 mg/m3/2h	Nil reported
	Oral (rabbit) LD50: 200 mg/kg	
	Not Available	Not Available
	TOXICITY	IRRITATION
potassium silicate	Not Available	Not Available
water	ΤΟΧΙΟΙΤΥ	IRRITATION
	Not Available	Not Available

Not available. Refer to individual constituents.

POTASSIUM PHOSPHATE, MONOBASIC	No data of toxicological significance identified in literature search.
POTASSIUM NITRITE	Reproductive effector in rat and guinea pig. Mutagenic towards bacteria.
WATER	No significant acute toxicological data identified in literature search.
SODIUM MOLYBDATE, POTASSIUM SILICATE	Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS.

Acute Toxicity	*	Carcinogenicity	$\otimes$
Skin Irritation/Corrosion	×	Reproductivity	0
Serious Eye Damage/Irritation	×	STOT - Single Exposure	0
Respiratory or Skin sensitisation	0	STOT - Repeated Exposure	*
Mutagenicity	0	Aspiration Hazard	$\otimes$

Legend: 😽

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

🚫 – Data Not Available to make classification

# **CMR STATUS**

Not Applicable

### SECTION 12 ECOLOGICAL INFORMATION

#### Toxicity

Toxic to aquatic organisms.

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.

# Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
sodium molybdate	LOW	LOW
potassium nitrate	HIGH	HIGH

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water	HIGH	HIGH	

#### **Bioaccumulative potential**

Ingredient	Bioaccumulation
sodium molybdate	LOW (BCF = 10.38)
potassium nitrate	LOW (BCF = 3.162)
water	LOW (BCF = 3.162)

# Mobility in soil

Ingredient	Mobility
sodium molybdate	LOW (KOC = 48.64)
potassium nitrate	LOW (KOC = 14.3)
water	LOW (KOC = 14.3)

### SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods		
	<ul> <li>Containers may still present a chemical hazard/ danger when empty.</li> <li>Return to supplier for reuse/ recycling if possible.</li> </ul>	
Product / Packaging	Otherwise:	
disposal	<ul> <li>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.</li> <li>Where possible retain label warnings and MSDS and observe all notices pertaining to the product.</li> </ul>	

# **SECTION 14 TRANSPORT INFORMATION**

#### Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

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

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

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

#### SECTION 15 REGULATORY INFORMATION

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

potassium phosphate, monobasic(7778-77-0) is found on the following regulatory lists	"Australia Inventory of Chemical Substances (AICS)"
sodium molybdate(7631-95-0) is found on the following regulatory lists	"Australia Exposure Standards","Australia Inventory of Chemical Substances (AICS)","Australia Hazardous Substances Information System - Consolidated Lists"
potassium nitrate(7757-79-1) is found on the following regulatory lists	"Australia Inventory of Chemical Substances (AICS)"
potassium nitrite(7758-09-0) is found on the following regulatory lists	"International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs", "Australia Inventory of Chemical Substances (AICS)", "Australia Hazardous Substances Information System - Consolidated Lists"
potassium silicate(1312-76-1) is found on the following regulatory	"Australia Inventory of Chemical Substances (AICS)"

Continued...

water(7732-18-5) is found on the following regulatory lists

"Australia Inventory of Chemical Substances (AICS)"

# **SECTION 16 OTHER INFORMATION**

lists

#### 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/references

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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