Ranvet's Settle'Em Plus Ranvet Pty Ltd

Chemwatch: 5555-77 Version No: 3.1

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard Alert Code: 3

Issue Date: **09/06/2022** Print Date: **09/19/2022** L.GHS.AUS.EN.E

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

Product Identifier		
Product name	Ranvet's Settle'Em Plus	
Chemical Name	Not Applicable	
Synonyms	Not Available	
Chemical formula	Not Applicable	
Other means of identification	Not Available	

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

	Feed Supplement For Nervous Horses with added CHELATE. Initial dose 60g recommended first 10 days. 30g/500kg daily dose thereafter (30g
Relevant identified uses	measure provided)
	Use according to manufacturer's directions.

Details of the manufacturer or supplier of the safety data sheet

,		
Registered company name	Ranvet Pty Ltd	
Address	10-12 Green Street Banksmeadow NSW 2019 Australia	
Telephone	+61 2 9666 1744	
Fax	+61 2 9666 1755	
Website	http://www.ranvet.com.au/other_msds.htm	
Email	info@ranvet.com.au	

Emergency telephone number

Association / Organisation	Ranvet Pty Ltd
Emergency telephone numbers	+61 417 580 980
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

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

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

Poisons Schedule	Not Applicable	
Classification ^[1]	Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 2A, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Germ Cell Mutagenicity Category 2	
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

Warning

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H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H319	Causes serious eye irritation.
H335	May cause respiratory irritation.
H341	Suspected of causing genetic defects.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.	
P271	Use only outdoors or in a well-ventilated area.	
P280	Wear protective gloves, protective clothing, eye protection and face protection.	
P261	Avoid breathing dust/fumes.	
P264	Wash all exposed external body areas thoroughly after handling.	
P272	Contaminated work clothing should not be allowed out of the workplace.	

Precautionary statement(s) Response

P308+P313	IF exposed or concerned: Get medical advice/ attention.	
P302+P352	F ON SKIN: Wash with plenty of water.	
P305+P351+P338	F IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P312	Call a POISON CENTER/doctor/physician/first aider/if you feel unwell.	
P333+P313	skin irritation or rash occurs: Get medical advice/attention.	
P337+P313	If eye irritation persists: Get medical advice/attention.	
P362+P364	Take off contaminated clothing and wash it before reuse.	
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.	

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		
1309-48-4.	<30	30 <u>magnesium oxide</u>	
Not Available	<30	magnesium salts	
7695-91-2	>8	DL-alpha-tocopherol acetate	
83-88-5	<5	riboflavin	
Not Available	<5	Available Zinc	
Not Available	balance performance additives, nonhazardous		
Legend:	Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L * EU IOELVs available		

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	If this product comes in contact with the eyes: Wash out immediately with fresh running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Seek medical attention without delay; if pain persists or recurs seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation.
Inhalation	 If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay.

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Ingestion

- Immediately give a glass of water.
- First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor.

Indication of any immediate medical attention and special treatment needed

Magnesium is present in the blood, as a normal constituent, at concentrations between 1.6 to 2.2 meg/L. Some 30% is plasma bound. At serum magnesium levels of 3-4 meg/L, signs of CNS depression, loss of reflexes, muscular tone and power, and bradycardia occur. Cardiac arrest (sometimes fatal) and/or respiratory paralysis can occur at plasma levels of 10-15 meq/L. For acute or short term repeated exposures to magnesium:

- Symptomatic hypermagnesaemia appears rarely in the absence of intestinal or renal disease.
- ▶ Elevated magnesium levels may cause hypocalcaemia because of decreased parathyroid hormone activity and decreased end-organ responsiveness.
- Patients with severe hypermagnesemia may develop sudden respiratory arrest and must be watched closely for apnoea.
- ▶ Use fluids, then vasopressors for hypotension. Frequently hypotension responds to calcium administration.
- Induce emesis or administer lavage if patient presents within 4 hours of ingestion. Use sodium cathartics, with caution, in presence of cardiac or renal failure.
- Activated charcoal is not useful.
- Calcium is an antagonist of magnesium action and is an effective antidote when serum levels exceed 5 meq/L and the patient exhibits symptoms. The adult dose of calcium gluconate is 10 ml of a 10% solution over several minutes. [Ellenhorn and Barceloux: Medical Toxicology]

Treat symptomatically.

SECTION 5 Firefighting measures

Extinguishing media

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

Advice for firefighters

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

- Alert Fire Brigade and tell them location and nature of hazard.
 - Wear breathing apparatus plus protective gloves.
 - ▶ Prevent, by any means available, spillage from entering drains or water courses.
 - ▶ Use water delivered as a fine spray to control fire and cool adjacent area.
- Fire Fighting 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.
 - Figure and the Equipment should be thoroughly decontaminated after use.
 - Combustible solid which burns but propagates flame with difficulty: it is estimated that most organic dusts are combustible (circa 70%) according to the circumstances under which the combustion process occurs, such materials may cause fires and / or dust explosions.
 - Drganic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions).
 - Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust (420 micron or less) may burn rapidly and fiercely if ignited - particles exceeding this limit will generally not form flammable dust clouds; once initiated, however, larger particles up to 1400 microns diameter will contribute to the propagation of an
 - In the same way as gases and vapours, dusts in the form of a cloud are only ignitable over a range of concentrations; in principle, the concepts of lower explosive limit (LEL) and upper explosive limit (UEL) are applicable to dust clouds but only the LEL is of practical use; - this is because of the inherent difficulty of achieving homogeneous dust clouds at high temperatures (for dusts the LEL is often called the "Minimum Explosible Concentration", MEC).
 - When processed with flammable liquids/vapors/mists,ignitable (hybrid) mixtures may be formed with combustible dusts. Ignitable mixtures will increase the rate of explosion pressure rise and the Minimum Ignition Energy (the minimum amount of energy required to ignite dust clouds - MIE) will be lower than the pure dust in air mixture. The Lower Explosive Limit (LEL) of the vapour/dust mixture will be lower than the individual LELs for the vapors/mists or dusts.
 - A dust explosion may release of large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people.
 - b Usually the initial or primary explosion takes place in a confined space such as plant or machinery, and can be of sufficient force to damage or rupture the plant. If the shock wave from the primary explosion enters the surrounding area, it will disturb any settled dust layers, forming a second dust cloud, and often initiate a much larger secondary explosion. All large scale explosions have resulted from chain reactions of this
 - P Dry dust can be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport.
 - ▶ Build-up of electrostatic charge may be prevented by bonding and grounding.
 - Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.
 - ▶ All movable parts coming in contact with this material should have a speed of less than 1-meter/sec
 - A sudden release of statically charged materials from storage or process equipment, particularly at elevated temperatures and/ or pressure, may result in ignition especially in the absence of an apparent ignition source.
 - One important effect of the particulate nature of powders is that the surface area and surface structure (and often moisture content) can vary widely from sample to sample, depending of how the powder was manufactured and handled; this means that it is virtually impossible to use flammability data published in the literature for dusts (in contrast to that published for gases and vapours).
 - Autoignition temperatures are often quoted for dust clouds (minimum ignition temperature (MIT)) and dust layers (layer ignition temperature (LIT)); LIT generally falls as the thickness of the layer increases

Combustion products include:

carbon monoxide (CO) carbon dioxide (CO2)

metal oxides

other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

May emit corrosive fumes

HAZCHEM

Not Applicable

Fire/Explosion Hazard

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Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

- Clean up all spills immediately.
- Avoid breathing dust and contact with skin and eyes.
- Wear protective clothing, gloves, safety glasses and dust respirator.
- Use dry clean up procedures and avoid generating dust.

Minor Spills

- Sweep up, shovel up or
- Vacuum up (consider explosion-proof machines designed to be grounded during storage and use).
- ▶ Place spilled material in clean, dry, sealable, labelled container.

Moderate hazard.

- CAUTION: Advise personnel in area.
- ▶ Alert Emergency Services and tell them location and nature of hazard.
- Control personal contact by wearing protective clothing. Prevent, by any means available, spillage from entering drains or water courses.
- **Major Spills**
- Recover product wherever possible. F IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for
- disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal. ALWAYS: Wash area down with large amounts of water and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise Emergency Services

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

SECTION 7 Handling and storage

Precautions for safe handling

- ▶ Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- ▶ Use in a well-ventilated area
- Prevent concentration in hollows and sumps.
- ▶ DO NOT enter confined spaces until atmosphere has been checked.
- ► DO NOT allow material to contact humans, exposed food or food utensils.
- Avoid contact with incompatible materials.
- When handling, **DO NOT** eat, drink or smoke
- ▶ Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- ▶ Work clothes should be laundered separately. Launder contaminated clothing before re-use.
- Use good occupational work practice.
- Observe manufacturer's storage and handling recommendations contained within this SDS.
- · Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
- Drganic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions)
- Minimise airborne dust and eliminate all ignition sources. Keep away from heat, hot surfaces, sparks, and flame. Safe handling
 - Establish good housekeeping practices.
 - Remove dust accumulations on a regular basis by vacuuming or gentle sweeping to avoid creating dust clouds.
 - Use continuous suction at points of dust generation to capture and minimise the accumulation of dusts. Particular attention should be given to overhead and hidden horizontal surfaces to minimise the probability of a "secondary" explosion. According to NFPA Standard 654, dust layers 1/32 in.(0.8 mm) thick can be sufficient to warrant immediate cleaning of the area.
 - Do not use air hoses for cleaning.
 - Minimise dry sweeping to avoid generation of dust clouds. Vacuum dust-accumulating surfaces and remove to a chemical disposal area. Vacuums with explosion-proof motors should be used.
 - Control sources of static electricity. Dusts or their packages may accumulate static charges, and static discharge can be a source of ignition.
 - ▶ Solids handling systems must be designed in accordance with applicable standards (e.g. NFPA including 654 and 77) and other national guidance.
 - Do not empty directly into flammable solvents or in the presence of flammable vapors.
 - The operator, the packaging container and all equipment must be grounded with electrical bonding and grounding systems. Plastic bags and plastics cannot be grounded, and antistatic bags do not completely protect against development of static charges

Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source.

- Do NOT cut, drill, grind or weld such containers.
- In addition ensure such activity is not performed near full, partially empty or empty containers without appropriate workplace safety authorisation or permit.
- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry area protected from environmental extremes.
- Store away from incompatible materials and foodstuff containers
- Protect containers against physical damage and check regularly for leaks.

Other information For major quantities

- Observe manufacturer's storage and handling recommendations contained within this SDS.
- Consider storage in bunded areas ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams).
- Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require consultation with local authorities.

Conditions for safe storage, including any incompatibilities

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Suitable container

Polyethylene Pails with lids 1.5kg, 3kg

- Polyethylene or polypropylene container.
- ► Check all containers are clearly labelled and free from leaks.

Storage incompatibility

Avoid strong acids, bases.Avoid reaction with oxidising agents

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	magnesium oxide	Magnesium oxide (fume)	10 mg/m3	Not Available	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
magnesium oxide	30 mg/m3	120 mg/m3	730 mg/m3

Ingredient	Original IDLH	Revised IDLH
magnesium oxide	750 mg/m3	Not Available
DL-alpha-tocopherol acetate	Not Available	Not Available
riboflavin	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
DL-alpha-tocopherol acetate	E	≤ 0.1 ppm
riboflavin	E	≤ 0.01 mg/m³
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 range of exposure concentrations that are expected to protect worker health.	

MATERIAL DATA

It is the goal of the ACGIH (and other Agencies) to recommend TLVs (or their equivalent) for all substances for which there is evidence of health effects at airborne concentrations encountered in the workplace.

At this time no TLV has been established, even though this material may produce adverse health effects (as evidenced in animal experiments or clinical experience). Airborne concentrations must be maintained as low as is practically possible and occupational exposure must be kept to a minimum.

NOTE: The ACGIH occupational exposure standard for Particles Not Otherwise Specified (P.N.O.S) does NOT apply.

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- ► cause inflammation
- cause increased susceptibility to other irritants and infectious agents
- lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and
- acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

Exposure 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.

- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.
- Exhaust ventilation should be designed to prevent accumulation and recirculation of particulates in the workplace
- If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered. Such protection might consist of:

(a): particle dust respirators, if necessary, combined with an absorption cartridge;

(b): filter respirators with absorption cartridge or canister of the right type;

(c): fresh-air hoods or masks

- Build-up of electrostatic charge on the dust particle, may be prevented by bonding and grounding.
- Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to efficiently remove the contaminant.

Type of Contaminant:	Air Speed:
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active	1-2.5 m/s (200-500
generation into zone of rapid air motion)	ft/min)

controls

Appropriate engineering

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grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).

2.5-10 m/s (500-2000 ft/min)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood-local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 4-10 m/s (800-2000 ft/min) for extraction of crusher dusts generated 2 metres distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Personal protection











Eve and face protection

Safety glasses with side shields.

Chemical goggles.

Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]

Skin protection

See Hand protection below

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. 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.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- · frequency and duration of contact,
- · chemical resistance of glove material,
- · glove thickness and
- · dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- · When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- · Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.
- Contaminated gloves should be replaced.

As defined in ASTM F-739-96 in any application, gloves are rated as:

Hands/feet protection

- \cdot Excellent when breakthrough time > 480 min
- Good when breakthrough time > 20 min • Fair when breakthrough time < 20 min
- Fair when breakthrough time < 20 mir
 Poor when glove material degrades

For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.

Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task.

Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:

- · Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of.
- · Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential

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.

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- polychloroprene.
- nitrile rubber.
- butyl rubber.
- ► fluorocaoutchouc
- polyvinyl chloride.

Gloves should be examined for wear and/ or degradation constantly.

Body protection

See Other protection below

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Other protection

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

Respiratory protection

Type A-P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A P1 Air-line*	-	A PAPR-P1
up to 50 x ES	Air-line**	A P2	A PAPR-P2
up to 100 x ES	-	A P3	-
		Air-line*	-
100+ x ES	-	Air-line**	A PAPR-P3

* - Negative pressure demand ** - Continuous flow

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)

- · Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- · Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- · Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- · Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)
- · Use approved positive flow mask if significant quantities of dust becomes airborne.
- · Try to avoid creating dust conditions.

Class P2 particulate filters are used for protection against mechanically and thermally generated particulates or both.

P2 is a respiratory filter rating under various international standards, Filters at least 94% of airborne particles Suitable for:

- · Relatively small particles generated by mechanical processes eg. grinding, cutting, sanding, drilling, sawing.
- · Sub-micron thermally generated particles e.g. welding fumes, fertilizer and bushfire smoke.
- · Biologically active airborne particles under specified infection control applications e.g. viruses, bacteria, COVID-19, SARS

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties Light beige powder with vanilla scent; mixes with water. **Appearance** Physical state Divided Solid Relative density (Water = 1) Not Available Partition coefficient n-octanol Odour Not Available Not Available / water Odour threshold Not Available Auto-ignition temperature (°C) Not Available Decomposition pH (as supplied) Not Applicable Not Available temperature (°C) Melting point / freezing point Not Available Viscosity (cSt) Not Available Initial boiling point and boiling Not Available Molecular weight (g/mol) Not Applicable range (°C) Flash point (°C) Not Available Not Available **Evaporation rate** Not Available **Explosive properties** Not Available Flammability Not Available **Oxidising properties** Not Available Surface Tension (dyn/cm or Not Applicable Upper Explosive Limit (%) Not Available mN/m) Lower Explosive Limit (%) Not Available Volatile Component (%vol) Not Available Vapour pressure (kPa) Gas group Not Available Not Available

SECTION 10 Stability and reactivity

Vapour density (Air = 1)

Solubility in water

Miscible

Not Available

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

pH as a solution (Not

Available%)

VOC a/L

Not Available

Not Available

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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

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.

Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled.

If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures.

Magnesium salts are generally absorbed so slowly that oral administration causes few toxic effects with purging being the most significant. If evacuation fails due to bowel obstruction or atony, mucosal irritation and absorption may result.

Side effects of magnesium salts include upset stomach, dry mouth, dry nose and dry throat, drowsiness, nausea, heartburn and thickening of the mucous in the throat and nose.

Systemically the magnesium ion produces electrolyte imbalance, central nervous system depression, neurological and cardiac involvement, reflex abolition and death from respiratory paralysis. These effects are rare in the absence of intestinal or renal disorders.

Early signs and symptoms of magnesium intoxication include nausea, vomiting, malaise and confusion. Deep tendon reflexes may be diminished. central nervous system depression may progress to coma and paralysis of the release of acetylcholine at myoneuronal junctions. Central nervous system depression may be compounded by depressed function of the respiratory musculature. Hypotension may also ensue as a result

peripheral vasodilation and/ or decreased cardiac output secondary to conduction defects. Bradycardia is common, leading to eventual arrest in diastole.

The material has **NOT** been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.

Ingestion

Vitamin E is a fat-soluble vitamin that acts as an antioxidant and free radical scavenger in lipophilic environments and is consumed by approximately 20% of the US population. It requires bile for absorption, and 25% of the vitamin is absorbed orally. Storage of the vitamin occurs in adipose tissue, liver, and muscle. The US recommended dietary allowance is 30 mg/day. Adults receiving 2-3 gm/day of Vitamin E developed skin rashes and mild gastrointestinal irritation with diarrhoea; 1 gm/day was tolerated for months with apparent ill-effect.

The oral median lethal dose found in several species is 2 gm/kg, and adverse effects usually are observed at doses greater than 1 gm/kg, which is equivalent to 200-500 mg/kg in humans. Most deleterious effects have been observed in small studies and in case reports.

High doses (800 IU/day) of Vitamin E (tocopherol) may produce fatigue and weakness. The symptoms resolve with removal of the drug. Another study reported emotional disturbances in several women taking the same dosages. These symptoms have not been observed in other large series. Transient nausea and gastric distress have been observed in a few patients taking high dosages of vitamin E, 2000-2500 IU/day. Diarrhea and intestinal cramps have been reported at a dosage of 3200 IU/day. Other nonspecific adverse effects, which have been reported rarely, include fatigue, muscle weakness, delayed wound healing, and headache.

Thyroid hormone levels of triiodothyronine and thyroxine were decreased in healthy students administered 600 IU/day. Similar findings have been observed in animal studies.

Skin Contact

Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.

The material may accentuate any pre-existing dermatitis condition

Repeated exposure may cause skin cracking, flaking or drying following normal handling and use.

Open cuts, abraded or irritated skin should not be exposed to this material

Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds 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.

Eve

Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Strong evidence exists that the substance may cause irreversible but non-lethal mutagenic effects following a single exposure. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals.

Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive.

Substances than can cuase occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers. Wherever it is reasonably practicable, exposure to substances that can cuase occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyper-responsive. Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Health surveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and there

Chronic

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should be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance.

Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

A case of chronic abuse of magnesium citrate (a mild purgative), by a 62 year-old woman, has been reported. Symptoms of abuse included lethargy and severe refractory hypotension. Pathology revealed extreme hypermagnesaemia [6.25 mmol per litre]. She also was found to have a perforated duodenal ulcer. She died after peritoneal dialysis (which reduced serum-magnesium and reduced hypotension.

A patient with normal kidney function developed symptomatic hypermagnesaemia with respiratory arrest and bradycardia after receiving 90 grams of magnesium sulfate over 18 hours.

When magnesium sulfate was given to pregnant rats, a sharp reduction of both the number and the weight of the offspring was observed.

Premature infants with low birthweight have shown life-threatening adverse effects from vitamin E. Sepsis and necrotizing enterocolitis have occurred only in premature infants with low birthweight. A syndrome of ascites, hepatomegaly, and thrombocytopenia resulting in death occurred in the 1980s in association with an intravenous vitamin E preparation used in premature infants with low birthweight. Presumably, the cause was a polysorbate carrier of the vitamin, and the syndrome has not occurred since its removal.

An increased risk of sepsis occurred in one clinical trial (14% vs 6%) of premature neonates with a birth weight less than 1500 g to whom vitamin E was administered. When high-dose vitamin E of up to 30 mg/kg/d was administered to this population to prevent retrolental fibroplasia, necrotizing enterocolitis occurred. Incidence of necrotizing enterocolitis increased 2-fold (12%) in 2 studies; however, others have shown no difference. These findings may be secondary to the compounding effects of prematurity and the effect of the vitamin on the immune system. No other population has demonstrated these findings.

One study has shown that alpha-tocopherol, at dosages of 50 mg/d, increased the risk of subarachnoid hemorrhage by 50% (95% confidence interval [CI], P = 0.07) and fatal subarachnoid hemorrhage by 181% (95% CI, P = 0.01) in men aged 50-69 years who smoked cigarettes compared to placebo. The risk of cerebral infarction was decreased 14% in the same patients. These results have not been found in any previous studies.

Prolonged inhalation of high concentrations of magnesite (magnesium carbonate) dust caused pulmonary deposition and retention. Roasted magnesite (magnesium oxide) produced a greater degree of fibrosis than did crude magnesite. No cases of human systemic poisoning due to exposure to magnesite have been recorded. Pneumoconiosis was found in about 2% of workers exposed to high concentrations of dust from crude or roasted magnesite that also contained 1-3% silicon dioxide. Exposure periods ranged from 6-20 years. This condition occurred mainly in workers exposed to roasted (calcined) magnesite. The pneumoconiosis appeared to be "benign" and was often associated with chronic bronchitis and lung emphysema.

In other reports the severity of the pneumoconiosis was associated with the crystalline silica content of the dust or in a case of magnesium carbonate used in insulating materials, the severity of the disease depended on the asbestos content.

Complaints of coughing are rare amongst magnesite workers, and more frequent among dianase and grog (crushed refractory materials) workers.

Airborne dust concentrations were lowest in dianase facilities but crystalline silica was high. Chronic bronchitis then, appears to increase where concentrations of crystalline silica are highest

Long term exposure to high dust concentrations may cause changes in lung function (i.e. pneumoconiosis) caused by particles less than 0.5 micron penetrating and remaining in the lung. A prime symptom is breathlessness. Lung shadows show on X-ray.

Denvette Settle!Em Dive	TOXICITY	IRRITATION	
Ranvet's Settle'Em Plus	Not Available	Not Available	
	TOXICITY	IRRITATION	
magnesium oxide	Not Available	Not Available	
	TOXICITY	IRRITATION	
DL-alpha-tocopherol acetate	dermal (rat) LD50: >3000 mg/kg ^[1]	Eye (rabbit): non-irritating *	
	Oral (Mouse) LD50; >49700 mg/kg ^[2]	Skin (rabbit): non-irritating *	
	TOXICITY	IRRITATION	
riboflavin	Oral (Rat) LD50; >10000 mg/kg ^[2]	Eye (rabbit): non-irritant (Draize) *	
		Skin (rabit): non-irritant (Draize) *	
Legend:	Nalue 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		

MAGNESIUM OXIDE

The following information refers to contact allergens as a group and may not be specific to this product.

Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

MAGNESIUM OXIDE

Exposure to the material may result in a possible risk of irreversible effects. The material may produce mutagenic effects in man. This concern is raised, generally, on the basis of

appropriate studies with similar materials using mammalian somatic cells in vivo. Such findings are often supported by positive results from in vitro mutagenicity studies.

DL-ALPHA-TOCOPHEROL ACETATE

alpha-Tocopherol was non-mutagenic and non-carcinogenic, and the results of reproduction/ teratology studies did not indicate that alpha-tocopherol had adverse effects on reproductive function. However, in a long-term study in rats, a no-effect level could not be established with respect to effects on blood clotting and liver histology, and there was evidence from human studies that excessive intakes of alpha-tocopherol could cause haemorrhage. Other adverse effects noted in clinical studies at doses of > 720 mg alpha-tocopherol/day included weakness, fatigue, creatinuria and effects on steroid hormone metabolism.

Clinical studies indicate that, generally, intakes of below about 720 mg/day are without adverse effects in man, but one investigation in elderly patients showed an increase in serum cholesterol at doses of 300 mg alpha-tocopherol daily. Incidences of allergic reactions seem to be very rare.

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alpha-Tocopherol may be an essential nutrient. The U.S. National Academy of Sciences/National Research Council has recommended a dietary allowance of 0.15 mg/kg b.w./day. However, excessive intakes of alpha-tocopherol produce adverse clinical and biochemical effects, and self-medication with large doses of vitamin E preparations could present a hazard.

The previously-allocated ADI was amended to include a lower value, which reflects the fact that alpha-tocopherol may be an essential nutrient. The upper value, which represents the maximum value for the AID, is based on clinical experience in man. IPCS Inchem: http://www.inchem.org/documents/iecfa/iecmono/v21ie05.htm

NOTE: Substance has been shown to be mutagenic in at least one assay, or belongs to a family of chemicals producing damage or change to cellular DNA.

May cause skin and eye irritation * Reproductive and mutagenic effects have been observed in tests with laboratory animals * * Alfa Aeser MSDS

RIBOFLAVIN Hamster cell mutagen. * BASF MSDS

MAGNESIUM OXIDE & RIBOFLAVIN

Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.

Acute Toxicity	×	Carcinogenicity	×
Skin Irritation/Corrosion	✓	Reproductivity	×
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	✓
Respiratory or Skin sensitisation	✓	STOT - Repeated Exposure	×
Mutagenicity	✓	Aspiration Hazard	×

Leaend:

— Data either not available or does not fill the criteria for classification

Data available to make classification

SECTION 12 Ecological information

Toxicity

Ranvet's Settle'Em Plus	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
magnesium oxide	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	96h	Fish	11mg/l	2
DL-alpha-tocopherol acetate	EC50	72h	Algae or other aquatic plants	>27.8mg/l	2
	EC50	48h	Crustacea	>20.6mg/l	2
	LC50	96h	Fish	>11mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Source
21 11	EC10(ECx)	48h	Algae or other aquatic plants	3.3-9mg/l	4
riboflavin					

for magnesium compounds in general: Fish LC50: 100-400 mg/l

Speciation of arsenic is an important consideration in the fate, movement, and action of this substance. Chemical and biochemical transformations of arsenic include oxidation, reduction and methylation which affects its volatilisation, adsorption, dissolution and biological disposition. The transport of arsenic in the environment is largely controlled by absorption/desorption processes in soils and sediments. Sediment movement is responsible for transport of arsenic soil residues to their ultimate sinks in deep ocean sediments. The clay fraction, plus ferrous and aluminium oxides which coat clay particles, adsorb arsenicals which then undergo transformation as discussed earlier. Conversions of arsenic to volatile alkylarsines leads to air transport losses from soil. Inorganic arsenic occurs in water in different oxidation states depending on the pH and Eh of the water. Arsenate is apparently reduced by bacteria to arsenite in marine environments because the ratio of total arsenate to total arsenic is much lower than that predicted thermodynamically. Methylation of arsenic

Bioaccumulation occurs in some aquatic species such as seaweeds, freshwater algae and crustaceans. Some arsenic in water flea (Daphnia Magna) and algae occurs as arsenoanalogues of phospholipids leading to the mistaken impression that accumulation and utilisation of arsenic takes place at the expense of phosphate. Crabs, lobsters and other marine organisms accumulate organo-arsenicals in the food chain. Although human activity may alter the local picture of environmental arsenic there is little evidence that this affects the global scale arsenic cycle.

occurs in both freshwater and marine systems where arsenate occurs as arsenate, arsenite, methanearsonic acid and dimethylarsinic acid. Arsenate predominates because this is the

Airborne concentrations of arsenic in urban areas may range from a few nanograms to a few tenths of a microgram per cubic meter; airborne arsenic is generally inorganic. In oxygenated soils inorganic arsenic is present in pentavalent form; under reducing conditions it occurs as the trivalent form.

arsenic: 50 ug/1 (UK max.) 0.01mg/L (WHO provisional guideline)

Drinking Water Standards

Soil Guideline:

most stable form

chloride:400 mg/l (UK max.) 250 mg/l (WHO guideline)

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Dutch Criteria: 29 mg/kg (target)

55 mg/kg (intervention)

Air Quality Standard:

No safe levels recommended due to carcinogenic properties (WHO guideline)

Microbial methylation plays important roles in the biogeochemical cycling of the metalloids and possibly in their detoxification. Many microorganisms (bacteria, fungi, and yeasts) and animals are now known to biomethylate arsenic, forming both volatile (e.g., methylarsines) and nonvolatile (e.g., methylarsonic acid and dimethylarsinic acid) compounds. Antimony and bismuth, also undergo biomethylation to some extent. Trimethylstibine formation by microorganisms is now well established, but this process apparently does not occur in animals. Formation of trimethylbismuth by microorganisms has been reported in a few cases.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
DL-alpha-tocopherol acetate	HIGH	HIGH
riboflavin	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation	
DL-alpha-tocopherol acetate	LOW (LogKOW = 11.9136)	
riboflavin	LOW (LogKOW = -1.46)	

Mobility in soil

Ingredient	Mobility	
DL-alpha-tocopherol acetate	LOW (KOC = 13870000)	
riboflavin	LOW (KOC = 325.8)	

SECTION 13 Disposal considerations

Waste treatment methods

- 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.

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

• Reduction

- Product / Packaging disposal
- Reuse
- ► Recycling
- Disposal (if all else fails)

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate. In most instances the supplier of the material should be consulted.

- DO NOT allow wash water from cleaning or process equipment to enter drains.
- It may be necessary to collect all wash water for treatment before disposal.
- In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- ▶ Where in doubt contact the responsible authority.

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

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
magnesium oxide	Not Available
DL-alpha-tocopherol acetate	Not Available
riboflavin	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
magnesium oxide	Not Available

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Product name	Ship Type
DL-alpha-tocopherol acetate	Not Available
riboflavin	Not Available

SECTION 15 Regulatory information

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

magnesium oxide is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

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DL-alpha-tocopherol acetate is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

riboflavin is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (magnesium oxide; DL-alpha-tocopherol acetate; riboflavin)
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 - FBEPH	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. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	09/06/2022
Initial Date	09/05/2022

SDS Version Summary

Version	Date of Update	Sections Updated
3.1	09/06/2022	Acute Health (inhaled), Acute Health (swallowed), Advice to Doctor, Appearance, Chronic Health, Classification, Environmental, First Aid (swallowed), Ingredients, Spills (minor), Storage (storage incompatibility), Storage (suitable container)

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.

Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average

PC-STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit。 IDLH: Immediately Dangerous to Life or Health Concentrations

ES: Exposure Standard

OSF: Odour Safety Factor

NOAEL :No Observed Adverse Effect Level

LOAEL: Lowest Observed Adverse Effect Level

TLV: Threshold Limit Value

LOD: Limit Of Detection OTV: Odour Threshold Value

BCF: BioConcentration Factors

Continued...

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BEI: Biological Exposure Index

AIIC: Australian Inventory of Industrial Chemicals

DSL: Domestic Substances List

NDSL: Non-Domestic Substances List

IECSC: Inventory of Existing Chemical Substance in China

EINECS: European INventory of Existing Commercial chemical Substances

ELINCS: European List of Notified Chemical Substances

NLP: No-Longer Polymers

ENCS: Existing and New Chemical Substances Inventory

KECI: Korea Existing Chemicals Inventory

NZIoC: New Zealand Inventory of Chemicals PICCS: Philippine Inventory of Chemicals and Chemical Substances

TSCA: Toxic Substances Control Act

TCSI: Taiwan Chemical Substance Inventory

INSQ: Inventario Nacional de Sustancias Químicas

NCI: National Chemical Inventory FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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