



SAFETY DATA SHEET

Section 1.	Identification of the material and the supplier
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Product:	Rose Colortone
Product Use:	Supplemental embalming dye
Restriction of Use in NZ:	Refer to Section 15
New Zealand Supplier:	Thirty SixPlus Embalmers
Address:	18 Norman Spencer Drive Manukau City Auckland 2104
Telephone:	0800 362 256
Fax:	+64 9 262 3705
Emergency No:	0800 764 766 (National Poison Centre)
Australia Supplier:	XXX XXX XXX
Tel:	+61 XXX
Australian Emergency No	13 11 26 (National Poison Centre)
Date of SDS Preparation:	11 December 2019

Section 2.	Hazards Identification
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Australia:
Classified as Hazardous according to the Globally Harmonised System of Classification and labelling of Chemicals (GHS) including Work, Health and Safety regulations, Australia

New Zealand:
This substance is hazardous according to the EPA Hazardous Substances (Classification) Notice 2017

EPA Approval No: Embalming Products (Flammable) – HSR002563

Pictograms



Flammable Toxic/Irritant Chronic

Signal Word: **DANGER**

NZ HSNO Classification	Hazard Code	Hazard Statement	GHS Category
3.1C	H226	Flammable liquid and vapour.	Flam. Liq. 3

6.1D (oral)	H302	Harmful if swallowed.	Acute Tox. 4
6.1D (inh)	H332	Harmful if inhaled.	Acute Tox. 4
6.3B	H316	Causes mild skin irritation.	Skin Irrit. 3
6.4A	H319	Causes serious eye irritation.	Eye Irrit. 2A
6.8B	H361	Suspected of damaging fertility or the unborn child.	Repr. 2
6.9A	H372	Causes damage to organs through prolonged or repeated exposure.	STOT RE 1
9.2D	H423	Harmful to the soil environment.	

Prevention Code	Prevention Statement
P102	Keep out of reach of children.
P103	Read label before use.
P201	Obtain special instructions before use.
P202	Do not handle until all safety precautions have been read and understood.
P210	Keep away from heat, sparks, open flames or hot surfaces. No smoking.
P233	Keep container tightly closed.
P240	Ground/bond container and receiving equipment.
P241	Use explosion-proof electrical/ventilating/lighting.
P242	Use only non-sparking tools.
P243	Take precautionary measures against static discharge.
P260	Do not breathe fumes, vapours or spray.
P264	Wash hands thoroughly after handling.
P270	Do not eat, drink or smoke when using this product.
P271	Use only outdoors or in a well-ventilated area.
P273	Avoid release to the environment.
P280	Wear protective clothing as detailed in Section 8.
P281	Use personal protective equipment as required.

Response Code	Response Statement
P101	If medical advice is needed, have product container or label at hand.
P312	Call a POISON CENTER or doctor/physician if you feel unwell.
P301 + P312	IF SWALLOWED: Call a POISON CENTER or doctor/physician.
P303 + P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.
P304 + P340	IF INHALED: Remove to fresh air and keep at rest in a position 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.
P308 + P313	IF exposed or concerned: Get medical advice/ attention.
P332 + P313	If skin irritation occurs: Get medical advice/attention.
P370 + P378	In case of fire: Use foam, dry chemical powder, BCF or Carbon Dioxide for extinction.

Storage Code	Storage Statement
P405	Store locked up.
P403 + P235	Store in a well-ventilated place. Keep cool.

Disposal Code	Disposal Statement
P501	Dispose of according to Local Regulations or Authorities

Section 3. Composition / Information on Hazardous Ingredients

Ingredients	Wt%	CAS NUMBER.
Triethanolamine	25-35	102-71-6
Methanol	5-15	67-56-1
Non Hazardous	To bal	

Section 4. First Aid Measures

Routes of Exposure:

If in Eyes	Rinse cautiously with water for 15 minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Immediately call a POISON CENTER or doctor/physician.
If on Skin	Immediately flush body and clothes with large amounts of water, using safety shower if available. Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower. If skin irritation occurs: Get medical advice/attention.
If Swallowed	<p>IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. Urgent hospital treatment is likely to be needed. In the meantime, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition.</p> <p>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 SDS should be provided. Further action will be the responsibility of the medical specialist.</p> <p>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.</p> <p>If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus. For amines:</p> <p>If liquid amine are ingested, have the affected person drink several glasses of water or milk. Do not induce vomiting. Immediately transport to a medical facility and inform medical personnel about the nature of the exposure. The decision of whether to induce vomiting should be made by an attending physician.</p>
If Inhaled	Remove person to fresh air. Remove contaminated clothing and loosen remaining clothing. Allow person to assume most comfortable position and keep warm. Keep at rest until fully recovered. Apply artificial respiration if not breathing. Get medical advice if breathing becomes difficult.

Most important symptoms and effects, both acute and delayed

Symptoms:

Ingestion:	Harmful if swallowed. Ref to Section 11
Inhalation:	Harmful if inhaled. Ref to Section 11
Skin:	Causes skin irritation. Ref to Section 11
Eye:	Causes serious eye irritation. Ref to Section 11
Chronic:	Suspected of damaging fertility or the unborn child. Causes damage to organs through prolonged or repeated exposure.

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 acute or short-term repeated exposures to highly alkaline materials:

- Respiratory stress is uncommon but present occasionally because of soft tissue edema.
- Unless endotracheal intubation can be accomplished under direct vision, cricothyroidotomy or tracheotomy may be necessary.
- Oxygen is given as indicated.
- The presence of shock suggests perforation and mandates an intravenous line and fluid administration.
- Damage due to alkaline corrosives occurs by liquefaction necrosis whereby the saponification of fats and solubilisation of proteins allow deep penetration into the tissue. Alkalis continue to cause damage after exposure.

INGESTION:

- Milk and water are the preferred diluents
- No more than 2 glasses of water should be given to an adult.
- Neutralising agents should never be given since exothermic heat reaction may compound injury.
 - Catharsis and emesis are absolutely contra-indicated.
 - Activated charcoal does not absorb alkali.
 - Gastric lavage should not be used.
- Supportive care involves the following:
- Withhold oral feedings initially.
- If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

SKIN AND EYE:

- Injury should be irrigated for 20-30 minutes.
- Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

For amines:

- Certain amines may cause injury to the respiratory tract and lungs if aspirated. Also, such products may cause tissue destruction leading to stricture. If lavage is performed, endotracheal and/or esophagoscopy control is suggested.
- No specific antidote is known.
- Care should be supportive and treatment based on the judgment of the physician in response to the reaction of the patient.
- Laboratory animal studies have shown that a few amines are suspected of causing depletion of certain white blood cells and their precursors in lymphoid tissue. These effects may be due to an immunosuppressive mechanism.
- Some persons with hyperreactive airways (e.g., asthmatic persons) may experience wheezing attacks (bronchospasm) when exposed to airway irritants.
- Lung injury may result following a single massive overexposure to high vapour concentrations or multiple exposures to lower concentrations of any pulmonary irritant material.
- Health effects of amines, such as skin irritation and transient corneal edema ("blue haze," "halo effect," "glauropsia"), are best prevented by means of formal worker education, industrial hygiene monitoring, and exposure control methods. Persons who are highly sensitive to the triggering effect of non-specific irritants should not be assigned to jobs in which such agents are used, handled, or manufactured.

Medical surveillance programs should consist of a pre-placement evaluation to determine if workers or applicants have any impairments (e.g., hyperreactive airways or bronchial asthma) that would limit their fitness for work in jobs with potential for exposure to amines. A clinical baseline can be established at the time of this evaluation.

Periodic medical evaluations can have significant value in the early detection of disease and in providing an opportunity for health counseling.

Medical personnel conducting medical surveillance of individuals potentially exposed to polyurethane amine catalysts should consider the following:

- Health history, with emphasis on the respiratory system and history of infections
- Physical examination, with emphasis on the respiratory system and the lymphoreticular organs (lymph nodes, spleen, etc.)

- Lung function tests, pre- and post-bronchodilator if indicated
- Total and differential white blood cell count
- Serum protein electrophoresis
- Persons who are concurrently exposed to isocyanates also should be kept under medical surveillance.
- Pre-existing medical conditions generally aggravated by exposure include skin disorders and allergies, chronic respiratory disease (e.g. bronchitis, asthma, emphysema), liver disorders, kidney disease, and eye disease.
- Broadly speaking, exposure to amines, as characterised by amine catalysts, may cause effects similar to those caused by exposure to ammonia. As such, amines should be considered potentially injurious to any tissue that is directly contacted.
- Inhalation of aerosol mists or vapors, especially of heated product, can result in chemical pneumonitis, pulmonary edema, laryngeal edema, and delayed scarring of the airway or other affected organs. There is no specific treatment.
- Clinical management is based upon supportive treatment, similar to that for thermal burns.
- Persons with major skin contact should be maintained under medical observation for at least 24 hours due to the possibility of delayed reactions.

Polyurethane Amine Catalysts: Guidelines for Safe Handling and Disposal Technical Bulletin June 2000. Alliance for Polyurethanes Industry

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 seizure.

Section 5. Fire Fighting Measures

Hazard Type	Liquid and vapour are flammable. Moderate fire hazard when exposed to heat or flame. Vapour forms an explosive mixture with air. Moderate explosion hazard when exposed to heat or flame. Vapour may travel a considerable distance to source of ignition. Heating may cause expansion or decomposition leading to violent rupture of containers.
Hazards from products	Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result.
Suitable Extinguishing media	Water spray or fog. Foam. Dry chemical powder. BCF (where regulations permit). Carbon dioxide.
Precautions for firefighters and special protective clothing	For amines: For firefighting, cleaning up large spills, and other emergency operations, workers must wear a self-contained breathing apparatus with full face-piece, operated in a pressure-demand mode. Airline and air purifying respirators should not be worn for firefighting or other emergency or upset conditions.

	Respirators should be used in conjunction with a respiratory protection program, which would include suitable fit testing and medical evaluation of the user. 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.
HAZCHEM CODE	3Y

Section 6. Accidental Release Measures

Personal precautions:

Use protective clothing as detailed in Section 8. Avoid breathing vapours and contact with skin and eyes. Clear area of personnel and move upwind. Remove sources of ignition. Slippery when wet.

Environmental precautions:

Do not discharge into drains/surface waters/groundwater. Do not discharge into the subsoil/soil.

Spill and Disposal procedures:

Contain and absorb small quantities with vermiculite or other absorbent material. Wipe up. Dispose of waste safely, according to local Council regulations detailed in Section 13.

Section 7. Handling and Storage

Precautions for Handling:

- Read label before use.
- Obtain special instructions before use.
- Do not handle until all safety precautions have been read and understood.
- Keep away from heat, sparks, open flames or hot surfaces. No smoking.
- Keep container tightly closed.
- Ground/bond container and receiving equipment.
- Use explosion-proof electrical/ventilating/lighting.
- Use only non-sparking tools.
- Take precautionary measures against static discharge.
- Containers, even those that have been emptied, may contain explosive vapours.
- Do NOT cut, drill, grind, weld or perform similar operations on or near containers.
- Avoid all personal contact with skin and eyes.
- Prevent concentration in hollows and sumps.
- Do not breathe fumes, vapours or spray.
- Wash hands thoroughly after handling.
- Do not eat, drink or smoke when using this product.
- Use only outdoors or in a well-ventilated area.
- Contaminated work clothing should not be allowed out of the workplace.
- Avoid release to the environment.
- Wear protective clothing as detailed in Section 8.
- Use personal protective equipment as required.
- Alkanolamines and iron may produce unstable complexes. Monoethanolamine (MEA) and iron form a trisethanolamino-iron complex. This material may spontaneously decompose at temperatures between 130 and 160 degrees C. and is suspected of causing a fire in a nearly empty storage tank containing a "heel" of MEA in contact with carbon steel coils. If steam coil heating is used, low pressure steam in stainless steel coils should be considered. Drum heating should also be reviewed and, where possible, temperatures should be maintained below 130 degrees C.
- DO NOT USE brass or copper containers / stirrers.
- DO NOT allow clothing wet with material to stay in contact with skin.
- Avoid all personal contact, including inhalation.

Precautions for Storage:

- Store away from incompatible materials listed in Section 10 such as oxidizing agents, strong bases and strong acids.

- Violent reaction and fire may result when amine catalysts are exposed to, or mixed with, oxidizing agents such as perchlorates, nitrates, permanganates, chromates, nitric acid, halogens, peroxides, and some cleaning solutions containing acids.
- The large amount of heat generated by the reaction of the catalyst with the oxidizing agent may be sufficient to cause vigorous boiling, which can cause the hot material to splash or splatter.
- Keep out of reach of children.
- Store locked up.
- Store in a cool, well-ventilated place.
- Keep container tightly closed.

Suitable Containers:

- Metal can or drum.
- Packaging recommended by the manufacturer.
- Check all containers are clearly labelled and free from leaks.

Section 8 Exposure Controls / Personal Protection

WORKPLACE EXPOSURE STANDARDS (provided for guidance only)

Substance	TWA		STEL	
	ppm	mg/m ³	ppm	mg/m ³
Methanol [67-56-1]	200	262	250	328
Triethanolamine [102-71-6]	1000	6090	-	-

Workplace Exposure Standard – Time Weighted Average (WES-TWA). The time-weighted average exposure standard designed to protect the worker from the effects of long-term exposure. Workplace Exposure Standard – Short-Term Exposure Limit (WESSTEL). The 15-minute average exposure standard. Applies to any 15- Minute period in the working day and is designed to protect the worker against adverse effects of irritation, chronic or irreversible tissue change, or narcosis that may increase the likelihood of accidents. The WES-STEL is not an alternative to the WES-TWA; both the short-term and time-weighted average exposures apply. Workplace Exposure Standards and Biological Exposure Indices NOV 2017 9TH EDITION.

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 Equipment



Eyes	<p>For amines: SPECIAL PRECAUTION: Because amines are alkaline materials that can cause rapid and severe tissue damage, wearing of contact lenses while working with amines is strongly discouraged. Wearing such lenses can prolong contact of the eye tissue with the amine, thereby causing more severe damage. Appropriate eye protection should be worn whenever amines are handled or whenever there is any possibility of direct contact with liquid products, vapors, or aerosol mists. CAUTION: Ordinary safety glasses or face-shields will not prevent eye irritation from</p>
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	<p>high concentrations of vapour.</p> <p>In operations where positive-pressure, air-supplied breathing apparatus is not required, all persons handling liquid amine catalysts or other polyurethane components in open containers should wear chemical workers safety goggles.</p> <p>Eyewash fountains should be installed, and kept in good working order, wherever amines are used.</p>
Hands	<p>Wear chemical protective gloves, e.g. PVC.</p> <p>Wear safety footwear or safety gumboots, e.g. Rubber</p> <p>NOTE:</p> <p>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.</p> <p>Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.</p> <p>The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.</p>
Skin	<p>Overalls.</p> <p>P.V.C. apron.</p> <p>Barrier cream.</p> <p>Skin cleansing cream.</p>
Respiratory	Type EKAX-P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)
General	Make sure there is an eyewash unit.

Section 9 Physical and Chemical Properties

Appearance	Flammable liquid; mixes with water.
Colour	Rose coloured
Odour	mild odour
Odour Threshold	Not available
pH	Not available
Boiling Point	64°C
Melting Point	Not available
Freezing Point	Not available
Flash Point	46°C (TCC)
Flammability	Flammable
Upper and Lower Explosive Limits	6% - 73%
Vapour Pressure(kPa)	Not available
Vapour Density (Air=1)	Not available
Relative Density (Water=1)	0.98
Water Solubility	Miscible
Partition Coefficient:	Not available
Auto-ignition Temperature	Not available
Decomposition Temperature	Not available
Kinematic Viscosity	Not available
Particle Characteristics	Not available
Volatile Component (%vol)	>60

Section 10. Stability and Reactivity

Stability of Substance	This product is stable under normal conditions.
Possibility of hazardous reactions	Not available
Conditions to Avoid	Keep away from heat, sparks, open flames or hot surfaces. No smoking.
Incompatible Materials	Oxidizing agents, strong bases and strong acids
Hazardous Decomposition Products	Refer to Section 5.

Section 11 Toxicological Information

Acute Effects:

Swallowed	Harmful if swallowed. Animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. 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) Ingestion of triethanolamine may cause gastro-intestinal irritation with bleeding, burning or painful sensations in the mouth, throat, chest and abdomen, vomiting and diarrhoea. Animal testing has also shown sluggishness, excessive tear secretion, hairs standing up, unsteady gait, and red/brown discharge on hair around the nose and genitals. Lethal dose in 70 kg man is 560gms.
Dermal	Not applicable.
Inhalation	Harmful if inhaled. The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. There is strong evidence to suggest that this material can cause, if inhaled once, serious, irreversible damage of organs. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo. Minor but regular methanol exposures may affect the central nervous system, optic nerves and retinae.
Eye	Causes severe eye irritation.
Skin	Causes mild skin irritation.

Chronic Effects:

Carcinogenicity	Not applicable.
Reproductive Toxicity	Suspected of damaging fertility or the unborn child.
Germ Cell Mutagenicity	Not applicable.
Aspiration	Not applicable.
STOT/SE	Not applicable.
STOT/RE	Causes damage to organs through prolonged or repeated exposure.
Chronic	Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. 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 injury may also result.

Individual component information:

Acute Toxicity:

Chemical Name	Oral – LD50	Dermal – LD50	Inhalation – LC50
triethanolamine	5559 mg/kg (female rat)	18080mg/kg (rat)	250 ppm/4H (rat)
Methanol	>11872769mg/kg (rat)	15800 mg/kg mg/kg (rabbit)	64000 ppm/4h (rat)

METHANOL	The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.
TRIETHANOLAMINE	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. Lachrymation, diarrhoea, convulsions, urinary tract changes, changes in bladder weight, changes in testicular weight, changes in thymus weight, changes in liver weight, dermatitis after systemic exposure, kidney, ureter, bladder tumours recorded. Equivocal tumourigen by RTECS criteria. Dermal rabbit value quoted above is for occluded patch in male or female animals * Union Carbide

Section 12. Ecotoxicological Information

New Zealand:

HSNO Classes: 9.2D = May be harmful to the soil environment.

Persistence and degradability	No data available
Bioaccumulation	No data available
Mobility in Soil	No data available
Other adverse effects	No data available

Individual component information:

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
triethanolamine	LOW	LOW
methanol	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
triethanolamine	LOW (BCF = 4)
methanol	LOW (BCF = 10)

Mobility in soil

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

Do not allow to enter waterways.

Section 13. Disposal Considerations

Disposal Method:

Spent media that has removed toxic chemicals should be examined for specific hazards. Spilled product may be recovered for use if it has not come in contact with liquids or been exposed to significant amounts of gaseous contaminants. Dispose of according to Local Regulations.

Ensure any container holding waste product or contaminated spill media is labelled "Hazardous Waste – Flammable, Chronic" and that the label also has the Flammable, Chronic Pictograms, waste type identifier, and the business name, address, and phone number.

Precautions or methods to avoid: Avoid release to the environment.

Section 14 Transport Information

This product is classified as Dangerous Goods according to the Australian Code for the Transport of Dangerous Goods by Road and Rail (ADG Code) (7th edition).

This product is classified as a Dangerous Good for transport in NZ ; NZS 5433:2012



Road, Rail, Sea and Air Transport

UN No	1993
Class - Primary	3
Packing Group	III
Proper Shipping Name	FLAMMABLE LIQUID,N.O.S. (contains methanol)
Marine Pollutant	No
Special Provisions	If the product's individual container is below 5L, it can be transported as a non-DG as long as the product packaging is still labelled as per DG requirements and the driver is given safety information in accordance with Chapter 3.4 of the UNRTDG.

Section 15 Regulatory Information

Australia:

Classified as Hazardous according to the Globally Harmonised System of Classification and labelling of Chemicals (GHS) including Work, Health and Safety regulations, Australia.

Classified as a Schedule 6 Poison according to the Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP).

New Zealand:

This substance is classified hazardous according to the EPA Hazardous Substances (Classification) Notice 2017

EPA Approval Code: Embalming Products (Flammable) – HSR002563

HSNO Classification: 3.1C, 6.1D(oral, inh), 6.3B, 6.4A, 6.8B, 6.9A, 9.2D

HSW (HS) Regulations 2017 and EPA Notices	Trigger Quantity
Certified Handler	Not triggered
Location Certificate	500L(>5L), 1500L(<5L), 250L open
Tracking Trigger Quantities	Not triggered
Signage Trigger Quantities	1000L (3.1C)
Emergency Response Plan	1000L (6.1D)
Secondary Containment	1000L (6.1D)
Restriction of Use	Only use for the intended purpose.

Section 16 Other Information

Glossary

EC₅₀

Median effective concentration.

EEL	Environmental Exposure Limit.
EPA	Environmental Protection Authority
HSNO	Hazardous Substances and New Organisms.
HSW	Health and Safety at Work.
LC ₅₀	Lethal concentration that will kill 50% of the test organisms inhaling or ingesting it.
LD ₅₀	Lethal dose to kill 50% of test animals/organisms.
LEL	Lower explosive level.
OSHA	American Occupational Safety and Health Administration.
TEL	Tolerable Exposure Limit.
TLV	Threshold Limit Value-an exposure limit set by responsible authority.
UEL	Upper Explosive Level
WES	Workplace Exposure Limit

References:

Australia:

1. Preparation of Safety Data Sheets for Hazardous Chemicals Code of Practice.
2. Standard for the Uniform Scheduling of Medicines and Poisons.
3. Australian Code for the Transport of Dangerous Goods by Road & Rail.
4. Model Work Health and Safety Regulations, Schedule 10: Prohibited carcinogens, restricted carcinogens and restricted hazardous chemicals.
5. Workplace exposure standards for airborne contaminants, Safe work Australia.
6. American Conference of Industrial Hygienists (ACGIH).
7. Globally Harmonised System of classification and labelling of chemicals.

New Zealand:

1. EPA Hazardous Substances (Safety Data Sheets) Notice 2017
2. Workplace Exposure Standards and Biological Exposure Indices Nov 2017 edition.
3. Assigning a hazardous substance to a HSNO Approval (Aug 2013).
4. Transport of Dangerous goods on land NZS 5433:2012
5. HSW (Hazardous Substances) Regulations 2017

Disclaimer

This document has been prepared by TCC (NZ) Ltd and serves as the suppliers Safety Data Sheet ('SDS'). It is based on information concerning the product which has been provided to TCC (NZ) Ltd or obtained from third party sources and is believed to represent the current state of knowledge as to the appropriate safety and handling precautions for the product at the time of issue. Further clarification regarding any aspect of the product should be obtained directly from the manufacturer. While TCC (NZ) have taken all due care to include accurate and up-to-date information in this SDS, it does not provide any warranty as to accuracy or completeness. As far as lawfully possible, TCC (NZ) Ltd accept no liability for any loss, injury or damage (including consequential loss) which may be suffered or incurred by any person as a consequence of their reliance on the information contained in this SDS

The information herein is given in good faith, but no warranty, express or implied is made.

Please contact the Australian Manufacturer or New Zealand distributor, if further information is required.

Issue Date: 11 December 2019 Review Date: 11 December 2024