

# Septone Dishbrite

ITW AAMTech

Chemwatch: 6018-02

Version No: 5.1.1.1

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 3

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S.GHS.AUS.EN

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

### Product Identifier

Product name	Septone Dishbrite
Chemical Name	Not Applicable
Synonyms	Auto Dishwashing Powder Mancode: JKDP4, JKDP10, Product code: HKD4, HKD10, HKD20BX.
Proper shipping name	Not Applicable
Chemical formula	Not Applicable
Other means of identification	Not Available
CAS number	Not Applicable

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

Relevant identified uses	Machine dishwashing powder.
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### Details of the supplier of the safety data sheet

Registered company name	ITW AAMTech
Address	100 Hassall Street Wetherill Park 2164 NSW Australia
Telephone	+61 2 9828 0900
Fax	+61 2 9725 4698
Website	Not Available
Email	general@septone.com.au

### Emergency telephone number

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

## SECTION 2 HAZARDS IDENTIFICATION

### Classification of the substance or mixture

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

Poisons Schedule	S5
GHS Classification <sup>[1]</sup>	Skin Corrosion/Irritation Category 1B, Serious Eye Damage Category 1, Acute Aquatic Hazard Category 2, Chronic Aquatic Hazard Category 2
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

### Label elements

GHS label elements	
SIGNAL WORD	<b>DANGER</b>

### Hazard statement(s)

H314	Causes severe skin burns and eye damage
H318	Causes serious eye damage
H401	Toxic to aquatic life
H411	Toxic to aquatic life with long lasting effects

### Precautionary statement(s): Prevention

P260	Do not breathe dust/fume/gas/mist/vapours/spray.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P273	Avoid release to the environment.

**Precautionary statement(s): Response**

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER/doctor/physician/first aider
P321	Specific treatment (see advice on this label).
P363	Wash contaminated clothing before reuse.
P391	Collect spillage.

**Precautionary statement(s): Storage**

P405	Store locked up.
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**Precautionary statement(s): Disposal**

P501	Dispose of contents/container to authorised chemical landfill or if organic to high temperature incineration
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**SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS****Substances**

See section below for composition of Mixtures

**Mixtures**

CAS No	%[weight]	Name
497-19-8	30-60	<a href="#">sodium carbonate</a>
6834-92-0	10-30	<a href="#">sodium metasilicate, anhydrous</a>
2893-78-9	0-10	<a href="#">sodium dichloroisocyanurate</a>
Not Available	30-60	ingredients determined not to be hazardous

**SECTION 4 FIRST AID MEASURES****Description of first aid measures**

<b>Eye Contact</b>	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> <li>▶ Wash out immediately with fresh running water.</li> <li>▶ Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.</li> <li>▶ Seek medical attention without delay; if pain persists or recurs seek medical attention.</li> <li>▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
<b>Skin Contact</b>	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Immediately remove all contaminated clothing, including footwear.</li> <li>▶ Flush skin and hair with running water (and soap if available).</li> <li>▶ Seek medical attention in event of irritation.</li> </ul>
<b>Inhalation</b>	<ul style="list-style-type: none"> <li>▶ If fumes or combustion products are inhaled remove from contaminated area.</li> <li>▶ Lay patient down. Keep warm and rested.</li> <li>▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>▶ Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.</li> <li>▶ Transport to hospital, or doctor.</li> </ul>
<b>Ingestion</b>	<ul style="list-style-type: none"> <li>▶ <b>If swallowed do NOT induce vomiting.</b></li> <li>▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>▶ Observe the patient carefully.</li> <li>▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>▶ Seek medical advice.</li> </ul>

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

	<p>Excellent warning properties force rapid escape of personnel from chlorine vapour thus most inhalations are mild to moderate. If escape is not possible, exposure to high concentrations for a very short time can result in dyspnea, haemophysis and cyanosis with later complications being tracheobroncho-pneumonitis and pulmonary oedema. Oxygen, intermittent positive pressure breathing apparatus and aerosolised bronchodilators are of therapeutic value where chlorine inhalation has been light to moderate. Severe inhalation should result in hospitalisation and treatment for a respiratory emergency.</p> <p>Any chlorine inhalation in an individual with compromised pulmonary function (COPD) should be regarded as a severe inhalation and a respiratory emergency. [CCINFO, Dow 1988]</p> <p>Effects from exposure to chlorine gas include pulmonary oedema which may be delayed. Observation in hospital for 48 hours is recommended</p> <p>Diagnosed asthmatics and those people suffering from certain types of chronic bronchitis should receive medical approval before being employed in occupations involving chlorine exposure.</p> <p>If burn is present, treat as any thermal burn, after decontamination.</p>
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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]

Depending on the degree of exposure, periodic medical examination is indicated. The symptoms of lung oedema often do not manifest until a few hours have passed and they are aggravated by physical effort. Rest and medical observation is therefore essential. Immediate administration of an appropriate spray, by a doctor or a person authorised by him/her should be considered.

(ICSC24419/24421)

## SECTION 5 FIREFIGHTING MEASURES

### Extinguishing media

- ▶ There is no restriction on the type of extinguisher which may be used.
- ▶ Use extinguishing media suitable for surrounding area.

### Special hazards arising from the substrate or mixture

#### Fire Incompatibility

None known

### Advice for firefighters

#### Fire Fighting

- ▶ Alert Fire Brigade and tell them location and nature of hazard.
- ▶ Wear breathing apparatus plus protective gloves in the event of a fire.
- ▶ Prevent, by any means available, spillage from entering drains or water courses.
- ▶ Use fire fighting procedures suitable for surrounding area.
- ▶ **DO NOT** approach containers suspected to be hot.
- ▶ Cool fire exposed containers with water spray from a protected location.
- ▶ If safe to do so, remove containers from path of fire.

#### Fire/Explosion Hazard

- ▶ Non combustible.
- ▶ Not considered a significant fire risk, however containers may burn.

Decomposes on heating and produces toxic fumes of:

, carbon monoxide (CO)

, carbon dioxide (CO2)

, chlorides

## SECTION 6 ACCIDENTAL RELEASE MEASURES

### Personal precautions, protective equipment and emergency procedures

#### Minor Spills

- ▶ Clean up all spills immediately.
- ▶ Avoid contact with skin and eyes.
- ▶ Wear impervious gloves and safety glasses.
- ▶ Use dry clean up procedures and avoid generating dust.
- ▶ Vacuum up (consider explosion-proof machines designed to be grounded during storage and use).
- ▶ Do NOT use air hoses for cleaning
- ▶ Place spilled material in clean, dry, sealable, labelled container.

#### Major Spills

- ▶ Clear area of personnel and move upwind.
- ▶ Alert Fire Brigade and tell them location and nature of hazard.
- ▶ Control personal contact with the substance, by using protective equipment and dust respirator.
- ▶ Prevent spillage from entering drains, sewers or water courses.
- ▶ Recover product wherever possible. Avoid generating dust.
- ▶ Sweep / shovel up.

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

## SECTION 7 HANDLING AND STORAGE

### Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> <li>▶ Limit all unnecessary personal contact.</li> <li>▶ Wear protective clothing when risk of exposure occurs.</li> <li>▶ Use in a well-ventilated area.</li> <li>▶ <b>When handling DO NOT eat, drink or smoke.</b></li> <li>▶ Always wash hands with soap and water after handling.</li> <li>▶ Avoid physical damage to containers.</li> <li>▶ Use good occupational work practice.</li> </ul>
Other information	<ul style="list-style-type: none"> <li>▶ Store in original containers.</li> <li>▶ Keep containers securely sealed.</li> <li>▶ Store in a cool, dry, well-ventilated area.</li> <li>▶ Store away from incompatible materials and foodstuff containers.</li> <li>▶ Protect containers against physical damage and check regularly for leaks.</li> <li>▶ Observe manufacturer's storage and handling recommendations contained within this MSDS.</li> </ul>

### Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> <li>▶ <b>DO NOT use aluminium or galvanised containers</b></li> <li>▶ Polyethylene or polypropylene container.</li> <li>▶ Check all containers are clearly labelled and free from leaks.</li> </ul>
Storage incompatibility	<ul style="list-style-type: none"> <li>▶ In presence of moisture, the material is corrosive to aluminium, zinc and tin producing highly flammable hydrogen gas.</li> <li>▶ Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.</li> <li>▶ Avoid storage with reducing agents.</li> </ul>

### PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

## SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

### Control parameters

#### OCCUPATIONAL EXPOSURE LIMITS (OEL)

#### INGREDIENT DATA


Not Available

#### EMERGENCY LIMITS

Ingredient	TEEL-0	TEEL-1	TEEL-2	TEEL-3
sodium carbonate	10(ppm)	30(ppm)	50(ppm)	500(ppm)
sodium metasilicate, anhydrous	4 / 49.9(ppm)	150 / 12.5(ppm)	250 / 75(ppm)	500(ppm)

Ingredient	Original IDLH	Revised IDLH
Septone Dishbrite	Not Available	Not Available

### Exposure controls

Appropriate engineering controls	General exhaust is adequate under normal operating conditions.
Personal protection	
Eye and face protection	<p>No special equipment for minor exposure i.e. when handling small quantities.</p> <p><b>OTHERWISE:</b> Safety glasses with side shields.</p> <p>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.</p>
Skin protection	See Hand protection below
Hand protection	<p>No special equipment needed when handling small quantities.</p> <p><b>OTHERWISE:</b> Wear chemical protective gloves, e.g. PVC.</p>
Body protection	See Other protection below
Other protection	<p>No special equipment needed when handling small quantities.</p> <p><b>OTHERWISE:</b></p> <ul style="list-style-type: none"> <li>▶ Overalls.</li> <li>▶ Barrier cream.</li> <li>▶ Eyewash unit.</li> </ul>
Thermal hazards	Not Available

**Recommended material(s)****GLOVE SELECTION INDEX**

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the **computer-generated** selection:

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Material	CPI
NATURAL RUBBER	A
NITRILE	A

\* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion

**NOTE:** As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

\* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

**Respiratory protection**

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	AB-AUS P2	-	AB-PAPR-AUS / Class 1 P2
up to 50 x ES	-	AB-AUS / Class 1 P2	-
up to 100 x ES	-	AB-2 P2	AB-PAPR-2 P2 ^

^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO<sub>2</sub>), G = Agricultural chemicals, K = Ammonia(NH<sub>3</sub>), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

**SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES****Information on basic physical and chemical properties**

<b>Appearance</b>	White free-flowing alkaline powder with a chlorine odour; mixes with water.		
<b>Physical state</b>	Divided Solid	<b>Relative density (Water = 1)</b>	1.22 bulk
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol / water</b>	Not Available
<b>Odour threshold</b>	Not Available	<b>Auto-ignition temperature (°C)</b>	Not Applicable
<b>pH (as supplied)</b>	Not Applicable	<b>Decomposition temperature</b>	Not Available
<b>Melting point / freezing point (°C)</b>	Not Available	<b>Viscosity (cSt)</b>	Not Applicable
<b>Initial boiling point and boiling range (°C)</b>	Not Applicable	<b>Molecular weight (g/mol)</b>	Not Applicable
<b>Flash point (°C)</b>	Not Applicable	<b>Taste</b>	Not Available
<b>Evaporation rate</b>	Not Applicable	<b>Explosive properties</b>	Not Available
<b>Flammability</b>	Not Applicable	<b>Oxidising properties</b>	Not Available
<b>Upper Explosive Limit (%)</b>	Not Applicable	<b>Surface Tension (dyn/cm or mN/m)</b>	Not Available
<b>Lower Explosive Limit (%)</b>	Not applicable	<b>Volatile Component (%vol)</b>	7 w/w
<b>Vapour pressure (kPa)</b>	Not Applicable	<b>Gas group</b>	Not Available
<b>Solubility in water (g/L)</b>	Miscible	<b>pH as a solution(1%)</b>	11.8
<b>Vapour density (Air = 1)</b>	Not Applicable	<b>VOC g/L</b>	Not Available

**SECTION 10 STABILITY AND REACTIVITY**

<b>Reactivity</b>	See section 7
<b>Chemical stability</b>	<ul style="list-style-type: none"> <li>▶ Presence of incompatible materials.</li> <li>▶ Product is considered stable.</li> <li>▶ Hazardous polymerisation will not occur.</li> </ul>
<b>Possibility of hazardous reactions</b>	See section 7
<b>Conditions to avoid</b>	See section 7
<b>Incompatible materials</b>	See section 7
<b>Hazardous decomposition products</b>	See section 5

**SECTION 11 TOXICOLOGICAL INFORMATION****Information on toxicological effects**

<b>Inhaled</b>	Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of
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	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.
<b>Ingestion</b>	The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.
<b>Skin Contact</b>	The material can produce chemical burns following direct contact with the skin.
<b>Eye</b>	The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating.
<b>Chronic</b>	Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis.  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.

Septone Dishbrite	TOXICITY	IRRITATION
	Not Available	Not Available

sodium carbonate	TOXICITY	IRRITATION
	Dermal (Rat) LD50: >2000 mg/kg *	Eye (rabbit): 100 mg/24h moderate
	Inhalation (Guinea pig) LC50: 800 mg/m <sup>3</sup> /2h	Eye (rabbit): 100 mg/30s mild
	Inhalation (Mouse) LC50: 1200 mg/m <sup>3</sup> /2h	Eye (rabbit): 50 mg SEVERE
	Inhalation (rat) LC50: 2300 mg/m <sup>3</sup> /2h	Skin (rabbit): 500 mg/24h mild
	Intraperitoneal (Mouse) LD50: 117 mg/kg	
	Oral (Mouse) LD50: 6600 mg/kg	
	Oral (Rat) LD50: 2800 mg/kg *	
	Oral (rat) LD50: 4090 mg/kg	
	Subcutaneous (Mouse) LD50: 2210 mg/kg	
Not Available	Not Available	

sodium metasilicate, anhydrous	TOXICITY	IRRITATION
	Oral (rat) LD50: 1153 mg/kg	Skin (human): 250 mg/24h SEVERE
	Not Available	Skin (rabbit): 250 mg/24h SEVERE
Not Available	Not Available	

sodium dichloroisocyanurate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 6000 mg/kg	Eye (rabbit): 10 mg/24hr-moderate
	Inhalation (rat) LC50: 293 ppm/1 hour	Skin (rabbit) : Severe *
	Oral (Rat) LD50: 1420 mg/kg	
	Oral (Rat) LD50: 700 mg/kg *	
Not Available	Not Available	

Not available. Refer to individual constituents.

<b>SODIUM METASILICATE, ANHYDROUS</b>	<p>The material may produce severe skin irritation after prolonged or repeated exposure, and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) thickening of the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.</p> <p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant.</p>
<b>SODIUM DICHLOROISOCYANURATE</b>	Dermal (rabbit) LD50: 3160-5100 mg/kg * Manufacturer
<b>SODIUM CARBONATE, SODIUM DICHLOROISOCYANURATE</b>	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. 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. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus</p>

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	⊗

**CMR STATUS**

Not Applicable

**SECTION 12 ECOLOGICAL INFORMATION****Toxicity****DO NOT discharge into sewer or waterways.**

Toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

[This product is a highly alkaline, corrosive material and may present a hazard to aquatic and terrestrial flora and fauna. Its immediate effect in water is to raise the pH, and it may precipitate many naturally occurring cations in the water. Alkalinity may be neutralised by natural acidity in the environment, mostly by CO<sub>2</sub> absorbed into water from the atmosphere. The surfactants contained in this product are readily biodegradable. Sodium dichloroisocyanurate is not stable in water or in soil in the presence of organic material, and is rapidly decomposed by heat and light. This product contains 7% w/w P. Detergents containing phosphorus contribute together with other sources of phosphorus to the eutrophication of many fresh waters. Algae are the first step in the food chain and a number of factors are needed to promote their growth. These factors are sunlight for photosynthesis, temperature, certain water conditions (turbulence) and nutrients like carbon, nitrogen and phosphorus. The use of phosphorus in complexing agents is still an environmental concern wherever sewage effluent is released untreated into freshwater recipients.]

**Persistence and degradability**

Ingredient	Persistence: Water/Soil	Persistence: Air
Not Available	Not Available	Not Available

**Bioaccumulative potential**

Ingredient	Bioaccumulation
Not Available	Not Available


**Mobility in soil**

Ingredient	Mobility
Not Available	Not Available

**SECTION 13 DISPOSAL CONSIDERATIONS****Waste treatment methods**

<b>Product / Packaging disposal</b>	<ul style="list-style-type: none"> <li>▶ Recycle wherever possible.</li> <li>▶ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.</li> <li>▶ Dispose of by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or Incineration in a licenced apparatus (after admixture with suitable combustible material)</li> <li>▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.</li> </ul>
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**SECTION 14 TRANSPORT INFORMATION****Labels Required**

<b>Marine Pollutant</b>	
<b>HAZCHEM</b>	Not Applicable

Land transport (IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

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

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

**SECTION 15 REGULATORY INFORMATION****Safety, health and environmental regulations / legislation specific for the substance or mixture**

<b>sodium carbonate(497-19-8) is found on the following regulatory lists</b>	"Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix F (Part 3)", "International Council of Chemical Associations (ICCA) - High Production Volume List", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5", "FisherTransport Information", "OECD List of High Production Volume (HPV) Chemicals", "Australia Inventory of Chemical Substances (AICS)", "International Numbering System for Food Additives", "Sigma-AldrichTransport Information", "Australia High Volume
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	Industrial Chemical List (HVICL)", "OECD Existing Chemicals Database", "GESAMP/EHS Composite List - GESAMP Hazard Profiles", "Australia Hazardous Substances Information System - Consolidated Lists", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)", "CODEX General Standard for Food Additives (GSFA) - Additives Permitted for Use in Food in General, Unless Otherwise Specified, in Accordance with GMP", "IMO IBC Code Chapter 17: Summary of minimum requirements", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6"
<p style="text-align: center;"><b>sodium metasilicate, anhydrous(6834-92-0) is found on the following regulatory lists</b></p>	<p>"Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix F (Part 3)", "International Maritime Dangerous Goods Requirements (IMDG Code)", "International Council of Chemical Associations (ICCA) - High Production Volume List", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5", "International Maritime Dangerous Goods Requirements (IMDG Code) - Substance Index", "FisherTransport Information", "United Nations Recommendations on the Transport of Dangerous Goods Model Regulations (English)", "Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes", "OECD List of High Production Volume (HPV) Chemicals", "Australia Inventory of Chemical Substances (AICS)", "Belgium Federal Public Service Mobility and Transport, Regulations concerning the International Carriage of Dangerous Goods by Rail - Table A: Dangerous Goods List - RID 2013 (Dutch)", "International Numbering System for Food Additives", "Sigma-AldrichTransport Information", "United Nations Recommendations on the Transport of Dangerous Goods Model Regulations (Spanish)", "OECD Existing Chemicals Database", "Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List", "Australia Hazardous Substances Information System - Consolidated Lists", "International Air Transport Association (IATA) Dangerous Goods Regulations", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6"</p>
<p style="text-align: center;"><b>sodium dichloroisocyanurate(2893-78-9) is found on the following regulatory lists</b></p>	<p>"Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix F (Part 3)", "International Maritime Dangerous Goods Requirements (IMDG Code)", "International Council of Chemical Associations (ICCA) - High Production Volume List", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5", "WHO Model List of Essential Medicines - Adults", "International Maritime Dangerous Goods Requirements (IMDG Code) - Substance Index", "FisherTransport Information", "Australia FAISD Handbook - First Aid Instructions, Warning Statements, and General Safety Precautions", "United Nations Recommendations on the Transport of Dangerous Goods Model Regulations (English)", "Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes", "Australia Inventory of Chemical Substances (AICS)", "OECD List of High Production Volume (HPV) Chemicals", "Belgium Federal Public Service Mobility and Transport, Regulations concerning the International Carriage of Dangerous Goods by Rail - Table A: Dangerous Goods List - RID 2013 (Dutch)", "Australia National Pollutant Inventory", "Sigma-AldrichTransport Information", "United Nations Recommendations on the Transport of Dangerous Goods Model Regulations (Spanish)", "WHO Guidelines for Drinking-water Quality - Guideline values for chemicals that are of health significance in drinking-water", "Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List", "Australia Hazardous Substances Information System - Consolidated Lists", "International Air Transport Association (IATA) Dangerous Goods Regulations", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6"</p>

## SECTION 16 OTHER INFORMATION

### Other information

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

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

[www.chemwatch.net/references](http://www.chemwatch.net/references)

The (M)SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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