

METAPHOSPHORIC ACID STICKS

GHS Safety Data Sheet

Version No:4

Page 1 of 17

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

METAPHOSPHORIC ACID STICKS

OTHER NAMES

HPO₃, "vitreous sodium acid metaphosphate"

PROPER SHIPPING NAME

CORROSIVE SOLID, ACIDIC, INORGANIC, N.O.S.
 (contains metaphosphoric acid)

PRODUCT USE

In dentistry for making zinc oxyphosphate cement.
 Laboratory reagent, source of phosphoric acid in commercial formulations.

SUPPLIER

Company: S D FINE- CHEM LIMITED

Address:

315- 317, T.V. INDUSTRIAL ESTATE,
 248, WORLI,
 MUMBAI- 400030.INDIA.

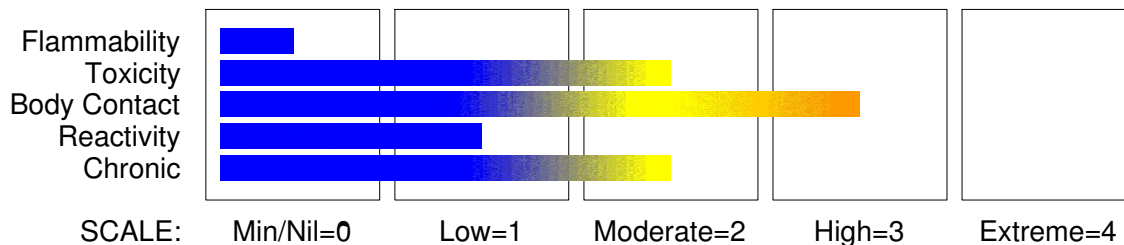
technical@sdfine.com

Telephone: 91- 22- 24959898

Telephone: 91- 22- 24959899

Fax: 91- 22- 24937232

HAZARD RATINGS



Section 2 - HAZARDS IDENTIFICATION

GHS Classification

Chronic Aquatic Hazard Category 4

Metal Corrosion Category 1

Skin Corrosion/Irritation Category 1C

continued...

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 2 of 17

Section 2 - HAZARDS IDENTIFICATION



EMERGENCY OVERVIEW

HAZARD

DANGER

Determined by using GHS criteria:

H290 H314 H413

May be corrosive to metals

Causes severe skin burns and eye damage

May cause long lasting harmful effects to aquatic life.

PRECAUTIONARY STATEMENTS

Prevention

Do not breathe dust or mist.

Wash thoroughly after handling.

Wear protective gloves/clothing and eye/face protection.

Response

IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.

IF INHALED: Remove to fresh air and keep at rest in a position comfortable for breathing.

Wash contaminated clothing before reuse.

IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

Immediately call a POISON CENTER or doctor/physician.

Absorb spillage to prevent material damage.

If on skin or hair: remove/take off immediately all contaminated clothing. Rinse with water/shower.

Specific treatment: refer to Label or MSDS.

Storage

Store locked up.

Store in a corrosive resistant container with a resistant liner.

Disposal

Dispose of contents and container in accordance with relevant legislation.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
metaphosphoric acid	37267-86-0	35-40
stabilised with		
sodium metaphosphate	10361-03-2	55-65
reacts with water to give		
phosphoric acid	7664-38-2	

continued...

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 3 of 17

Section 4 - FIRST AID MEASURES

SWALLOWED

- For advice, contact a Poisons Information Centre or a doctor at once.
- Urgent hospital treatment is likely to be needed.
- If swallowed do NOT induce vomiting.
- If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
- Observe the patient carefully.
- Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.
- Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.
- Transport to hospital or doctor without delay.

EYE

If this product comes in contact with the eyes:

- Immediately hold eyelids apart and flush the eye continuously with running water.
- Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
- Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.
- Transport to hospital or doctor without delay.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

SKIN

If skin or hair contact occurs:

- Immediately flush body and clothes with large amounts of water, using safety shower if available.
- Quickly remove all contaminated clothing, including footwear.
- Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.
- Transport to hospital, or doctor.

INHALED

- 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.

NOTES TO PHYSICIAN

Treat symptomatically.

For acute or short term repeated exposures to strong acids:

- Airway problems may arise from laryngeal edema and inhalation exposure. Treat with 100% oxygen initially.
- Respiratory distress may require cricothyroidotomy if endotracheal intubation is contraindicated by excessive swelling
- Intravenous lines should be established immediately in all cases where there is evidence of circulatory compromise.
- Strong acids produce a coagulation necrosis characterised by formation of a coagulum (eschar) as a result of the dessicating action of the acid on proteins in specific tissues.

continued...

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 4 of 17

Section 4 - FIRST AID MEASURES

INGESTION:

- Immediate dilution (milk or water) within 30 minutes post ingestion is recommended.
- DO NOT attempt to neutralise the acid since exothermic reaction may extend the corrosive injury.
- Be careful to avoid further vomit since re-exposure of the mucosa to the acid is harmful. Limit fluids to one or two glasses in an adult.
- Charcoal has no place in acid management.
- Some authors suggest the use of lavage within 1 hour of ingestion.

SKIN:

- Skin lesions require copious saline irrigation. Treat chemical burns as thermal burns with non-adherent gauze and wrapping.
- Deep second-degree burns may benefit from topical silver sulfadiazine.

EYE:

- Eye injuries require retraction of the eyelids to ensure thorough irrigation of the conjunctival cul-de-sacs. Irrigation should last at least 20-30 minutes. DO NOT use neutralising agents or any other additives. Several litres of saline are required.
- Cycloplegic drops, (1% cyclopentolate for short-term use or 5% homatropine for longer term use) antibiotic drops, vasoconstrictive agents or artificial tears may be indicated dependent on the severity of the injury.
- Steroid eye drops should only be administered with the approval of a consulting ophthalmologist).

[Ellenhorn and Barceloux: Medical Toxicology].

Section 5 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA

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

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.
- Use fire fighting procedures suitable for surrounding area.
- Do not approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.
- Equipment should be thoroughly decontaminated after use.

FIRE/EXPLOSION HAZARD

- Non combustible.
 - Not considered to be a significant fire risk.
 - Acids may react with metals to produce hydrogen, a highly flammable and explosive gas.
 - Heating may cause expansion or decomposition leading to violent rupture of containers.
 - May emit corrosive, poisonous fumes. May emit acrid smoke.
- Decomposition may produce toxic fumes of: phosphorus oxides (PO_x).

FIRE INCOMPATIBILITY

None known.

Personal Protective Equipment

Gas tight chemical resistant suit.

continued...

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 5 of 17

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid contact with skin and eyes.
- Control personal contact by using protective equipment.
- Use dry clean up procedures and avoid generating dust.
- Place in a suitable labelled container for waste disposal.

MAJOR SPILLS

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.
- Consider evacuation (or protect in place).
- Stop leak if safe to do so.
- Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labelled containers for recycling.
- Neutralise/decontaminate residue.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- If contamination of drains or waterways occurs, advise emergency services.

EMERGENCY RESPONSE PLANNING GUIDELINES (ERPG)

The maximum airborne concentration below which it is believed that nearly all individuals could be exposed for up to one hour WITHOUT experiencing or developing

life-threatening health effects is:

sodium metaphosphate 350 mg/m³

irreversible or other serious effects or symptoms which could impair an individual's ability to take protective action is:

sodium metaphosphate 75 mg/m³

other than mild, transient adverse effects without perceiving a clearly defined odour is:

sodium metaphosphate 10 mg/m³

The threshold concentration below which most people will experience no appreciable risk of health effects:

sodium metaphosphate 3.5 mg/m³

American Industrial Hygiene Association (AIHA)

Ingredients considered according to the following cutoffs

Very Toxic (T+)	>= 0.1%	Toxic (T)	>= 3.0%
R50	>= 0.25%	Corrosive (C)	>= 5.0%
R51	>= 2.5%		
else	>= 10%		

where percentage is percentage of ingredient found in the mixture

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

continued...

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 6 of 17

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Avoid contact with moisture.
- 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 storing and handling recommendations.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.

SUITABLE CONTAINER

- DO NOT use aluminium or galvanised containers.
Check regularly for spills and leaks.
Glass container.
- Lined metal can, lined metal pail/ can.
 - Plastic pail.
 - Polyliner drum.
 - Packing as recommended by manufacturer.
 - Check all containers are clearly labelled and free from leaks.

STORAGE INCOMPATIBILITY

- Reacts with metals producing flammable / explosive hydrogen gas.
Avoid strong bases.
- Inorganic acids are generally soluble in water with the release of hydrogen ions. The resulting solutions have pH's of less than 7.0.
 - Inorganic acids neutralise chemical bases (for example: amines and inorganic hydroxides) to form salts.
 - Neutralisation can generate dangerously large amounts of heat in small spaces.
 - The dissolution of inorganic acids in water or the dilution of their concentrated solutions with additional water may generate significant heat.
 - The addition of water to inorganic acids often generates sufficient heat in the small region of mixing to cause some of the water to boil explosively. The resulting "bumping" can spatter the acid.
 - Inorganic acids react with active metals, including such structural metals as aluminum and iron, to release hydrogen, a flammable gas.
 - Inorganic acids can initiate the polymerisation of certain classes of organic compounds.
 - Inorganic acids react with cyanide compounds to release gaseous hydrogen cyanide.
 - Inorganic acids generate flammable and/or toxic gases in contact with dithiocarbamates, isocyanates, mercaptans, nitrides, nitriles, sulfides, and strong reducing agents.
- Additional gas-generating reactions occur with sulfites, nitrites, thiosulfates (to give H₂S and SO₃), dithionites (SO₂), and even carbonates.
- Acids often catalyse (increase the rate of) chemical reactions.
- Segregate from alcohol, water.
- Phosphates are incompatible with oxidising and reducing agents.
 - Phosphates are susceptible to formation of highly toxic and flammable phosphine gas in the presence of strong reducing agents such as hydrides.

continued...

METAPHOSPHORIC ACID STICK

Section 7 - HANDLING AND STORAGE

- Partial oxidation of phosphates by oxidizing agents may result in the release of toxic phosphorus oxides.
Keep dry.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry, well-ventilated area.
- Store away from incompatible materials and foodstuff containers.
- Protect containers against physical damage and check regularly for leaks.
- Observe manufacturer's storing and handling recommendations.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



- +: May be stored together
O: May be stored together with specific precautions
X: Must not be stored together

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

- | | |
|-------------------------|-----------------------------------|
| • metaphosphoric acid: | CAS:37267- 86- 0 |
| • sodium metaphosphate: | CAS:10361- 03- 2 CAS:50813- 16- 6 |
| • phosphoric acid: | CAS:7664- 38- 2 |

EMERGENCY EXPOSURE LIMITS

Material	Revised IDLH Value (mg/m3)	Revised IDLH Value (ppm)
phosphoric acid	1, 000	

MATERIAL DATA

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

METAPHOSPHORIC ACID STICK

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

- 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.

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.

INGREDIENT DATA

SODIUM METAPHOSPHATE:

These "dusts" have little adverse effect on the lungs and do not produce toxic effects or organic disease. Although there is no dust which does not evoke some cellular response at sufficiently high concentrations, the cellular response caused by P.N.O.C.s has the following characteristics:

- the architecture of the air spaces remain intact,
- scar tissue (collagen) is not synthesised to any degree,
- tissue reaction is potentially reversible.

Extensive concentrations of P.N.O.C.s may:

- seriously reduce visibility,
- cause unpleasant deposits in the eyes, ears and nasal passages,
- contribute to skin or mucous membrane injury by chemical or mechanical action, per se, or by the rigorous skin cleansing procedures necessary for their removal. [ACGIH]

This limit does not apply:

- to brief exposures to higher concentrations
- nor does it apply to those substances that may cause physiological impairment at lower concentrations but for which a TLV has as yet to be determined.

This exposure standard applies to particles which

- are insoluble or poorly soluble* in water or, preferably, in aqueous lung fluid (if data is available) and
- have a low toxicity (i.e.. are not cytotoxic, genotoxic, or otherwise chemically reactive with lung tissue, and do not emit ionizing radiation, cause immune sensitization, or cause toxic effects other than by inflammation or by a mechanism of lung overload).

PHOSPHORIC ACID:

The saturated vapour concentration of phosphoric acid exceeds the TLV.

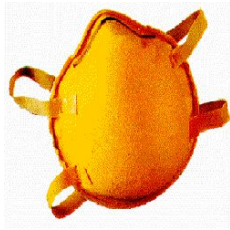
The TLV-TWA is based by analogy from comparable experience and data for sulfuric acid. Exposure at or below this limit is thought to prevent throat irritation amongst unacclimatised workers.

Fumes of phosphorus pentoxide at concentrations between 0.8 and 5.4 mg/m³ were reported to be noticeable but not uncomfortable whilst concentrations between 3.6 and 11.3 mg/m³ produced coughing in unacclimatised workers but were tolerable. Concentrations of 100 mg/m³ were unbearable except in inured workers.

PERSONAL PROTECTION

METAPHOSPHORIC ACID STICK

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION



EYE

- Chemical goggles.
- Full face shield may be required for supplementary but never for primary protection of eyes
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens 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].

HANDS/FEET

Suitability and durability of glove type is dependent on usage. Factors such as:

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

are important in the selection of gloves.

Wear chemical protective gloves, eg. PVC.

Wear safety footwear or safety gumboots, eg. Rubber.

OTHER

- Overalls.
- PVC Apron.
- PVC protective suit may be required if exposure severe.
- Eyewash unit.
- Ensure there is ready access to a safety shower.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required.

For further information consult your

Occupational Health and Safety Advisor.

ENGINEERING CONTROLS

- 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.
- 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.

continued...

METAPHOSPHORIC ACID STICK

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:

direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).

Air Speed:

1- 2.5 m/s (200- 500 f/min.)

2.5- 10 m/s (500- 2000 f/min.)

Within each range the appropriate value depends on:

Lower end of the range

- 1: Room air currents minimal or favourable to capture
- 2: Contaminants of low toxicity or of nuisance value only.
- 3: Intermittent, low production.
- 4: Large hood or large air mass in motion

Upper end of the range

- 1: Disturbing room air currents
- 2: Contaminants of high toxicity
- 3: High production, heavy use
- 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 f/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.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

Transparent glass-like solid or soft silky mass; mixes slowly with cold water changing to phosphoric acid.
Hygroscopic. Volatilises at red heat. Soluble in alcohol.
Commercial product is marketed in form of rods made with the addition of sodium phosphates.

PHYSICAL PROPERTIES

Corrosive.
Acid.

Molecular Weight: 79.98

Melting Range (°C): 21

Solubility in water (g/L): Reacts

pH (1% solution): 1.5 (1 M soltn)

Volatile Component (%vol): Not available.

Relative Vapour Density (air=1): 3.4

Lower Explosive Limit (%): Not applicable

Autoignition Temp (°C): Not applicable

State: DIVIDED SOLID

Boiling Range (°C): Not applicable

Specific Gravity (water=1): 1.7

pH (as supplied): Not applicable

Vapour Pressure (kPa): 0.0040

Evaporation Rate: Not available

Flash Point (°C): Not applicable

Upper Explosive Limit (%): Not applicable

Decomposition Temp (°C): Not Available

Viscosity: Not Applicable

continued...

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 11 of 17

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

Contact with alkaline material liberates heat.

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Ingestion of acidic corrosives may produce circumoral burns with a distinct discolouration of the mucous membranes of the mouth, throat and oesophagus. Immediate pain and difficulties in swallowing and speaking may also be evident. Oedema of the epiglottis may produce respiratory distress and possibly, asphyxia. Nausea, vomiting, diarrhoea and a pronounced thirst may occur. More severe exposures may produce a vomitus containing fresh or dark blood and large shreds of mucosa. Shock, with marked hypotension, weak and rapid pulse, shallow respiration and clammy skin may be symptomatic of the exposure. Circulatory collapse may, if left untreated, result in renal failure. Severe cases may show gastric and oesophageal perforation with peritonitis, fever and abdominal rigidity. Stricture of the oesophageal, gastric and pyloric sphincter may occur as within several weeks or may be delayed for years. Death may be rapid and often results from asphyxia, circulatory collapse or aspiration of even minute amounts. Delayed deaths may be due to peritonitis, severe nephritis or pneumonia. Coma and convulsions may be terminal.

Phosphates are slowly and incompletely absorbed from the gastrointestinal tract and are unlikely (other than in abuse) to produce the systemic effects which occur when introduced by other routes. Such effects include vomiting, lethargy, fever, diarrhoea, falls in blood pressure, slow pulse, cyanosis, carpal spasm, coma and tetany. These effects result following sequestration of blood calcium.

Ingestion of large amounts of phosphate salts (over 1 gm for an adult) may produce osmotic catharsis resulting in diarrhoea and probably, abdominal cramp. Large doses (4-8 gm) will almost certainly produce these effects in most individuals. Most of the ingested salt will be excreted in the faeces of healthy individuals without producing systemic toxicity. Doses in excess of 10 gm may produce systemic toxicity.

Inorganic polyphosphates are used extensively in domestic and industrial products. Rats fed 10% sodium trimetaphosphate for a month exhibited transient tubular necrosis; those given 10% sodium metaphosphate exhibited growth retardation; 10% sodium hexametaphosphate produced pale and swollen kidneys.

Salts of this type appear to be hydrolysed in the bowel to produce phosphoric acid and systemic acidosis may result following absorption. Higher molecular weight species, absorbed from the alimentary canal, may produce hypocalcaemic tetany due to binding of ionised calcium by the absorbed phosphate. This is reported in at least one case following ingestion of sodium tripolyphosphate.

Accidental ingestion of the material may be damaging to the health of the individual.

The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.

EYE

Direct eye contact with acid corrosives may produce pain, lachrymation, photophobia and burns. Mild burns of the epithelia generally recover rapidly and completely. Severe burns produce long-lasting and possible irreversible damage. The appearance of the burn may not be apparent for several weeks after the initial contact. The cornea may ultimately become deeply vascularised and opaque resulting in blindness.

continued...

METAPHOSPHORIC ACID STICK

Section 11 - TOXICOLOGICAL INFORMATION

The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating.
When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.
Inorganic phosphates can produce severe eye irritation. The severity of the response is concentration dependent.

SKIN

Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue.

Solution of material in moisture on the skin, or perspiration, may markedly increase skin corrosion and accelerate tissue destruction.

The material can produce chemical burns following direct contact with the skin.

Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.

Undiluted inorganic phosphates may be severely irritating to the skin but in typical cosmetic formulations (where they act as chelators) they are only mildly irritating.

In clinical testing, irritation is seen as a function of concentration; concentrations as high as 1% produced no irritation in contact allergy patients.

INHALED

Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system in a substantial number of individuals following inhalation.
Acidic corrosives produce respiratory tract irritation with coughing, choking and mucous membrane damage. Symptoms of exposure may include dizziness, headache, nausea and weakness. In more severe exposures, pulmonary oedema may be evident either immediately or after a latent period of 5-72 hours. Symptoms of pulmonary oedema include a tightness in the chest, dyspnoea, frothy sputum and cyanosis. Examination may reveal hypotension, a weak and rapid pulse and moist rates. Death, due to anoxia, may occur several hours after onset of the pulmonary oedema.

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.

The material is not thought to produce adverse health effects following inhalation (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

CHRONIC HEALTH EFFECTS

Dogs given daily doses of sodium phosphate dibasic for 9-22 weeks showed calcium deposits in the kidneys (nephrocalcinosis) with disseminated atrophy of the proximal tubule.

Animals fed on sodium phosphate dibasic and potassium dihydrogen phosphate, in both short - and long-term studies, showed increased bone porosity; hyperparathyroidism and soft tissue calcification were also evident.

In chronic animal studies inorganic polyphosphates produced growth inhibition, increased kidney weights (with calcium deposition and desquamation), bone decalcification, parathyroid hypertrophy and hyperplasia, inorganic phosphaturia, hepatic focal necrosis and alterations to the size of muscle fibres.

Inorganic phosphates are not genotoxic in bacterial systems nor are they carcinogenic in rats. No reproductive or developmental toxicity was seen in studies using rats exposed to sodium hexametaphosphate or sodium trimetaphosphate.

Repeated or prolonged exposure to acids 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.

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 13 of 17

Section 11 - TOXICOLOGICAL INFORMATION

Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis.

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

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.

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.

The substance when added to the diet of hamsters was found to reduce the incidence of dental caries.

TOXICITY AND IRRITATION

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

The material may be irritating to the eye, with prolonged contact causing inflammation.

Repeated or prolonged exposure to irritants may produce conjunctivitis.

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 production.

The material may produce respiratory tract irritation. Symptoms of pulmonary irritation may include coughing, wheezing, laryngitis, shortness of breath, headache, nausea, and a burning sensation.

Unlike most organs, the lung can respond to a chemical insult or a chemical agent, by first removing or neutralising the irritant and then repairing the damage (inflammation of the lungs may be a consequence).

The repair process (which initially developed to protect mammalian lungs from foreign matter and antigens) may, however, cause further damage to the lungs (fibrosis for example) when activated by hazardous chemicals. Often, this results in an impairment of gas exchange, the primary function of the lungs. Therefore prolonged exposure to respiratory irritants may cause sustained breathing difficulties.

The material may cause 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) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

No significant acute toxicological data identified in literature search.

SODIUM METAPHOSPHATE:

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

TOXICITY

Oral (rat) LD50: 6600 mg/kg

Dermal (rabbit) LD50: >7940 mg/kg [Manufacturer

CCOH]

IRRITATION

Nil Reported

No data available for 10361-03-2. Data for 10124-56-8 is

continued...

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 14 of 17

Section 11 - TOXICOLOGICAL INFORMATION

PHOSPHORIC ACID:

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

TOXICITY

Unreported (human) LDLo: 220 mg/kg

Oral (rat) LD50: 1530 mg/kg

Oral (rat) LD50: 3500 mg/kg* [Monsanto]*

Dermal (rabbit) LD50: >1260 mg/kg*

IRRITATION

Skin (rabbit):595 mg/24h - SEVERE

Eye (rabbit): 119 mg - SEVERE

The material may produce severe irritation to the eye causing pronounced inflammation.

Repeated or prolonged exposure to irritants may produce conjunctivitis.

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.

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 production.

phosphoric acid (85%)

Section 12 - ECOLOGICAL INFORMATION

Marine Pollutant:Not Determined

Prevent, by any means available, spillage from entering drains or water courses.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

DO NOT discharge into sewer or waterways.

The principal problems of phosphate contamination of the environment relates to eutrophication processes in lakes and ponds. Phosphorus is an essential plant nutrient and is usually the limiting nutrient for blue-green algae. A lake undergoing eutrophication shows a rapid growth of algae in surface waters. Planktonic algae cause turbidity and flotation films. Shore algae cause ugly muddying, films and damage to reeds. Decay of these algae causes oxygen depletion in the deep water and shallow water near the shore. The process is self-perpetuating because anoxic conditions at the sediment/water interface causes the release of more adsorbed phosphates from the sediment. The growth of algae produces undesirable effects on the treatment of water for drinking purposes, on fisheries, and on the use of lakes for recreational purposes.

Refer to data for ingredients, which follows:

SODIUM METAPHOSPHATE:

continued...

METAPHOSPHORIC ACID STICK

Section 12 - ECOLOGICAL INFORMATION

The principal problems of phosphate contamination of the environment relates to eutrophication processes in lakes and ponds. Phosphorus is an essential plant nutrient and is usually the limiting nutrient for blue-green algae. A lake undergoing eutrophication shows a rapid growth of algae in surface waters. Planktonic algae cause turbidity and flotation films. Shore algae cause ugly muddying, films and damage to reeds. Decay of these algae causes oxygen depletion in the deep water and shallow water near the shore. The process is self-perpetuating because anoxic conditions at the sediment/water interface causes the release of more adsorbed phosphates from the sediment. The growth of algae produces undesirable effects on the treatment of water for drinking purposes, on fisheries, and on the use of lakes for recreational purposes. On the basis of available evidence concerning either toxicity, persistence, potential to accumulate and or observed environmental fate and behaviour, the material may present a danger, immediate or long-term and /or delayed, to the structure and/ or functioning of natural ecosystems.
DO NOT discharge into sewer or waterways.

PHOSPHORIC ACID:

Fish LC50 (96hr.) (mg/l): 138

The principal problems of phosphate contamination of the environment relates to eutrophication processes in lakes and ponds. Phosphorus is an essential plant nutrient and is usually the limiting nutrient for blue-green algae. A lake undergoing eutrophication shows a rapid growth of algae in surface waters. Planktonic algae cause turbidity and flotation films. Shore algae cause ugly muddying, films and damage to reeds. Decay of these algae causes oxygen depletion in the deep water and shallow water near the shore. The process is self-perpetuating because anoxic conditions at the sediment/water interface causes the release of more adsorbed phosphates from the sediment. The growth of algae produces undesirable effects on the treatment of water for drinking purposes, on fisheries, and on the use of lakes for recreational purposes. On the basis of available evidence concerning either toxicity, persistence, potential to accumulate and or observed environmental fate and behaviour, the material may present a danger, immediate or long-term and /or delayed, to the structure and/ or functioning of natural ecosystems.
Prevent, by any means available, spillage from entering drains or water courses.
Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.
Wastes resulting from use of the product must be disposed of on site or at approved waste sites.
DO NOT discharge into sewer or waterways.

Section 13 - DISPOSAL CONSIDERATIONS

Recycle wherever possible.

- 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.
- Treat and neutralise at an approved treatment plant. Treatment should involve : Mixing or slurring in water; Neutralisation with soda-lime or soda-ash followed by: Burial in a licenced land-fill or Incineration in a licenced apparatus (after admixture with suitable combustible material)
- Decontaminate empty containers with 5% aqueous sodium hydroxide or soda ash, followed by water. Observe all label safeguards until containers are cleaned and destroyed.

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 16 of 17

Section 14 - TRANSPORTATION INFORMATION



Labels Required: CORROSIVE
HAZCHEM: 2X

UNDG:

Dangerous Goods Class:	8	Subrisk:	None
UN Number:	3260	Packing Group:	III
Shipping Name: CORROSIVE SOLID, ACIDIC, INORGANIC, N.O.S. (contains metaphosphoric acid)			

Air Transport IATA:

ICAO/IATA Class:	8	ICAO/IATA Subrisk:	None
UN/ID Number:	3260	Packing Group:	III
Special provisions:	A3		
Shipping Name: CORROSIVE SOLID, ACIDIC, INORGANIC N.O.S.			

Maritime Transport IMDG:

IMDG Class:	8	IMDG Subrisk:	None
UN Number:	3260	Packing Group:	III
EMS Number:	F- A, S- B	Special provisions:	274 944
Marine Pollutant:	Not Determined		
Shipping Name: CORROSIVE SOLID, ACIDIC, INORGANIC, N.O.S.			

Section 15 - REGULATORY INFORMATION

REGULATIONS

No regulations applicable
No data available for metaphosphoric acid as CAS: 37267-86-0.

Section 16 - OTHER INFORMATION

INGREDIENTS WITH MULTIPLE CAS NUMBERS

Ingredient Name	CAS
sodium metaphosphate	10361- 03- 2, 50813- 16- 6

MSDS SECTION CHANGES

The following table displays the version number of and date on which each section was last changed.

Section Name	Version	Date	Section Name	Version	Date	Section Name	Version	Date
Advice to Doctor	4	9- Mar- 2007	Engineering Control	4	9- Mar- 2007	Acute Health (inhaled)	4	9- Mar- 2007
Fire Fighter (fire incompatibility)	4	9- Mar- 2007	Exposure Standard	4	9- Mar- 2007	Acute Health (skin)	4	9- Mar- 2007

continued...

METAPHOSPHORIC ACID STICK

GHS Safety Data Sheet

Version No:4

Page 17 of 17

Section 16 - OTHER INFORMATION

Fire Fighter (fire/explosion hazard)	4	9- Mar- 2007	Personal Protection (eye)	4	9- Mar- 2007	Acute Health (swallowed)	4	9- Mar- 2007
Spills (major)	4	9- Mar- 2007	Personal Protection (hands/feet)	4	9- Mar- 2007	Chronic Health	4	9- Mar- 2007
Spills (minor)	4	9- Mar- 2007	Physical Properties	4	9- Mar- 2007	Toxicity and Irritation (Other)	4	9- Mar- 2007
Handling Procedure	4	9- Mar- 2007	Instability Condition	4	9- Mar- 2007	Environmental	4	9- Mar- 2007
Storage (storage incompatibility)	4	9- Mar- 2007	Acute Health (eye)	4	9- Mar- 2007	Disposal	4	9- Mar- 2007
Storage (suitable container)	4	9- Mar- 2007						

The above information is believed to be accurate and represent the best information currently available to us, but does not represent any warranty expressed or implied of the properties of the product. User should make their own investigation to determine the suitability of the information for their particular purpose.

Issue Date: 9-Mar-2018