## Rowe Scientific Multi and single element metal standards in 0.1-0.5% NaOH + 0.1-0.5% NaCN matrix

#### **ROWE SCIENTIFIC**

Chemwatch: 5239-26 Version No: 10.1 Chemwatch Hazard Alert Code: 2

Issue Date: 20/03/2024 Print Date: 20/03/2024 L.GHS.AUS.EN.E

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

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

#### **Product Identifier**

Product name	Rowe Scientific Multi and single element metal standards in 0.1-0.5% NaOH + 0.1-0.5% NaCN matrix	
Chemical Name	Not Applicable	
Synonyms	CC0730, CC0731, CC5110, CC5111, CC5112, CC5113, CC5114, CC5171, CC5175, CC5176, CC5177, CC5178, CC5179, CC5185, CG0026, CG0027, CG0028, CG0029, CG0032, CG0033, CG0034, CG0035, CG0039, CG0040, CG0041, CG0277, CG0278, CG0279, CG1178, CG1180, CG1183, CG1188, Cl0024, Cl0029, Cl0030, Cl0028, CL0361, CL0362, CN0024, CN0025, CN0026, CS1287, CS1454, CS1456, CS1462, CL0839, CL0840, CL0841, CL0842, CS8583	
Chemical formula	Not Applicable	
Other means of identification	Not Available	

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

Relevant identified uses	Laboratory chemical. Use according to manufacturer's directions.
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#### Details of the manufacturer or supplier of the safety data sheet

Registered company name	ROWE SCIENTIFIC	
Address	11 Challenge Boulevard Wangara WA 6065 Australia	
Telephone	+61 8 9302 1911	
Fax	+61 8 9302 1905	
Website	http://rowe.com.au/	
Email	rowewa@rowe.com.au	

#### Emergency telephone number

Emergency telephone number		
Association / Organisation	ROWE SCIENTIFIC	
Emergency telephone numbers	+61 8 9302 1911 (24 Hrs)	
Other emergency telephone numbers	Not Available	

#### **SECTION 2 Hazards identification**

#### Classification of the substance or mixture

Poisons Schedule	S7	
Classification <sup>[1]</sup>	Acute Toxicity (Oral) Category 4, Acute Toxicity (Dermal) Category 4, Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2A, Acute Toxicity (Inhalation) Category 4, Hazardous to the Aquatic Environment Long-Term Hazard Category 3	
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI	

#### Label elements

Hazard pictogram(s)	

Signal word Warning

Hazard statement(s)	
H302	Harmful if swallowed.
H312	Harmful in contact with skin.
H315	Causes skin irritation.
H319	Causes serious eye irritation.
H332	Harmful if inhaled.
H412	Harmful to aquatic life with long lasting effects.

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AUH032 Contact with acid liberates very toxic gas.

#### Precautionary statement(s) Prevention

P271	Use only outdoors or in a well-ventilated area.
P261	Avoid breathing mist/vapours/spray.
P264	Wash all exposed external body areas thoroughly after handling.
P270	Do not eat, drink or smoke when using this product.
P273	Avoid release to the environment.
P280	Wear protective gloves, protective clothing, eye protection and face protection.

#### Precautionary statement(s) Response

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P337+P313	If eye irritation persists: Get medical advice/attention.	
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider if you feel unwell.	
P302+P352	IF ON SKIN: Wash with plenty of water.	
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.	
P330	Rinse mouth.	
P332+P313	If skin irritation occurs: Get medical advice/attention.	
P362+P364	Take off contaminated clothing and wash it before reuse.	

#### Precautionary statement(s) Storage

Not Applicable

#### Precautionary statement(s) Disposal

P501 Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

#### **SECTION 3 Composition / information on ingredients**

#### Substances

See section below for composition of Mixtures

#### Mixtures

CAS No	%[weight]	Name
143-33-9	0.1-0.5	sodium cyanide
1310-73-2	0.1-0.5	sodium hydroxide
Not Available	<0.1	one or more metals from
Not Available		copper, gold, iron, lead, nickel and silver
7732-18-5	>60	water
Legend:	1. Classified by Chemwatch; 2. Clas Classification drawn from C&L * EL	ssification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. I IOELVs available

#### **SECTION 4 First aid measures**

#### Description of first aid measures

Eye Contact	<ul> <li>If this product comes in contact with the eyes:</li> <li>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>
Skin Contact	<ul> <li>If skin or hair contact occurs:</li> <li>Immediately flush body and clothes with large amounts of water, using safety shower if available.</li> <li>Quickly remove all contaminated clothing, including footwear.</li> <li>Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.</li> <li>Transport to hospital, or doctor.</li> </ul>
Inhalation	<ul> <li>If fumes or combustion products are inhaled remove from contaminated area.</li> <li>Lay patient down. Keep warm and rested.</li> <li>Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.</li> <li>Transport to hospital, or doctor, without delay.</li> </ul>
Ingestion	<ul> <li>IMPORTANT: ESTABLISH A FIRST AID PLAN BEFORE WORKING WITH CYANIDES.</li> <li>ANTIDOTES SHOULD BE AVAILABLE ON SITE.</li> <li>Prompt response in an emergency is vital.</li> <li>All workers are to be trained and refresher trained in procedures.</li> <li>Rescuers might need the protection of breathing apparatus where there is the potential of exposure to airborne cyanide.</li> <li>Use the buddy system and avoid becoming a casualty.</li> </ul>

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For cyanide poisonings by any route:
<ul> <li>Contact Poisons Advisory Centre or a doctor.</li> <li>Data issue lists as lists as lists at a doctor.</li> </ul>
Seek immediate medical attention.
Place casualty in coma position.
Give oxygen when available.
Consider external cardiac compression, mechanical resuscitation and use of antidote kit.
If breathing stops mouth-to-mouth resuscitation (also called expired air resuscitation - EAR) may be given only as a last resort. Should such
resort prove necessary, first wash the casualty's mouth and lips. A first aid attendant giving EAR must not inhale the expired air of the casualty.
US Practice as employed by DuPont:-
FIRST AID Swallowed/ Inhaled /Skin Contact
If no symptoms, no treatment is necessary; decontaminate patient.
If conscious but with symptoms present (nausea, shortness of breath, dizziness) give oxygen.
If consciousness is impaired (slurred speech, drowsiness) give oxygen and amyl nitrite.
If unconscious but breathing, give oxygen and amyl nitrite by means of a respirator. To give amyl nitrite, break an ampoule in a cloth and
insert into lip of mask for 15 seconds, then take away for 15 seconds. Repeat 5-6 times.
First Aid Supplies for cyanide poisoning should be conveniently placed throughout cyanide areas and should be IMMEDIATELY accessible at all
times. They should be routinely inspected (typically daily) by people who would use them in an emergency. The total numbers of any item listed
below should be adequate to handle the largest number of exposure cases that can reasonably be anticipated, taking into account that some
supplies may be wasted, destroyed or inaccessible during an emergency.
Oxygen Resuscitators - The Flyn Series III Model Time Or O-Two Systems has been found satisfactory, being lightweight, rugged and easy to use.
Amyl Nitrite Ampoules - One box of one dozen ampoules per station is usually satisfactory. Stations should be located throughout the cvaride
Ainjoinine Ainpoines - One box of one dozen anipoures per station is usually satisfactory. Stations should be located throughout the cyanide area.
CAUTION: Amyl nitrite is not stable and must be replaced every 1 to 2 years. Store in the original dated box away from heat. (can be stored with
the resuscitator).
Avoid storage on vehicles where cabin temperatures can reach 60 deg. C. Storage in high temperature climates may require replacement before
the expiry date on the box. Also avoid excessive cold storage which may limit the vapour pressure and reduce its evaporating property. Kits and
amyl nitrite should be accessible, but secured against tampering or theft (an increase in the use of nitrite "poppers", as aphrodisiacs, introduces
substance abuse concerns).
A set of cyanide first ad instructions should be located at each anyl initite storage location. Workers should be fully trained since in real
emergency situations there will be insufficient time to "read the book".
Notes on the use of amyl nitrite:-
AN is highly volatile and flammable - do not smoke or use around a source of ignition.
If treating patient in a windy or draughty area provide some shelter or protection (shirt, wall, drum, cupped hand etc.) to prevent amyl nitrite
vapour from being blown away. Keep ampoule upwind from the nose, the objective is to get amyl nitrite into the patient's lungs.
Rescuers should avoid AN inhalation to avoid becoming dizzy and losing competence.
Lay the patient down. Since AN dilates blood vessels and lowers blood pressure, lying down will help keep the patient conscious.
DO NOT overuse - excessive use might put the patient into shock.
Vasodilatory effects of amyl nitrate may promote fatal cardiac arrhythmias (particularly if the patient is not really poisoned by cyanide).
+ the role of amyl nitrate as a competitive inducer of methaemoglobin in the blood stream is highly variable and, alone, may produce levels of
methaemoglobin as a low as 5% only.
Experience at DuPont plants has not shown any serious after-effects from treatment with amyl nitrite.

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

For cyanide intoxication (and for certain nitriles which produce cyanide ion)

- ▶ Signs symptoms of acute cyanide poisoning reflect cellular hypoxia and are often non-specific.
- Cyanosis may be a late finding.
- A bradycardic, hypertensive and tachypneic patient suggests poisoning especially if CNS and cardiovascular depression subsequently occurs.
- Immediate attention should be directed towards assisted ventilation, administration of 100% oxygen, insertion of intravenous lines and institution of cardiac monitoring.
- Obtain an arterial blood gas immediately and correct any severe metabolic acidosis (pH below 7.15).
- Mildly symptomatic patients generally require supportive care alone. Nitrites should not be given indiscriminately in all cases of moderate to severe poisoning, they should be given in conjunction with thiosulfate. As a temporizing measure supply anyl nitrite perles (0.2ml inhaled 30 seconds every minute) until intravenous lines for sodium nitrite are established. 10 ml of a 3% solution is administered over 4 minutes to produce 20% methaemoglobin in adults. Follow directly with 50 ml of 25% sodium thiosulfate, at the same rate, IV. If symptoms reappear or persist within 1/2-1 hour, repeat nitrite and thiosulfate at 50% of initial dose. As the mode of action involves the metabolic conversion of the thiosulfate to thiocyanate, renal failure may enhance thiocyanate toxicity.
- Methylene blue is not an antidote. [Ellenhorn and Barceloux: Medical Toxicology]

#### If amyl nitrite intervention is employed then Medical Treatment Kits should contain the following:

- One box containing one dozen amyl nitrite ampoules
- Two sterile ampoules of sodium nitrite solution (10 mL of a 3% solution in each)
- Two sterile ampoules of sodium thiosulfate solution (50 mL of a 25% solution in each)
- One 10 mL sterile syringe. One 50 mL sterile syringe. Two sterile intravenous needles. One tourniquet.
- One dozen gauze pads.
- Latex gloves
- A "Biohazard" bag for disposal of bloody/contaminated equipment.
- A set of cyanide instructions on first aid and medical treatment.

- Notes on the use of amyl nitrite:-

- AN is highly volatile and flammable do not smoke or use around a source of ignition.
- If treating patient in a windy or draughty area provide some shelter or protection (shirt, wall, drum, cupped hand etc.) to prevent amyl nitrite vapour from being blown away. Keep ampoule upwind from the nose, the objective is to get amyl nitrite into the patients lungs.
- Rescuers should avoid AN inhalation to avoid becoming dizzy and losing competence.
- Lay the patient down. Since AN dilates blood vessels and lowers blood pressure, lying down will help keep patient conscious.
- DO NOT overuse excessive use might put the patient into shock. Experience at DuPont plants has not shown any serious after-effects from treatment with amyl nitrite.

#### ADDITIONAL NOTES:

Major medical treatment procedures may vary e.g. US (FDA method as recommended by DuPont) uses amyl nitrite as a methaemoglobin generator, followed by treatment with sodium nitrite and then sodium thiosulfate.

**MODES OF ACTION:** Amyl nitrite (AN) reacts with haemoglobin (HB) to form about 5% methaemoglobin (MHB). Sodium nitrite (NaNO2) reacts with haemoglobin to form approximately 20-30% methaemoglobin. Methaemoglobin attracts cyanide ions (CN) from tissue and binds with them to become cyanmethaemoglobin (CNMHB). Sodium thiosulfate (Na2S2O3) converts cyanmethaemoglobin to thiocyanate (HSCN) which is excreted by the kidneys. i.e. AN + HB = MHB NaNO2 + HB = MHB CN + MHB = CNMHB Na2S2O3 + CNMHB + O2 = HSCN

- The administration of the antidote salts is intravenous in normal saline, Ringers lactate or other available IV fluid.
- European practice may use 4-dimethylaminophenol (DMAP) as a methaemoglobin generator. Also hydroxycobalamin (Vitamin B12a) is used. Hydroxycobalamin works by reacting with cyanide to form cyanocobalamin (Vitamin B12) which is excreted in the urine.
- European and Australian NOHSC (ASCC) propose dicobalt edetate (Kelocyanor) as antidote. This acts by chelating cyanide to form stable cobalticyanide, which is excreted in the urine. In all cases hyperbaric therapy may increase the efficiency of a cyanide antidote kit.

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#### **SECTION 5 Firefighting measures**

#### Extinguishing media

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

#### Special hazards arising from the substrate or mixture

Special hazards arising from the	e substrate or mixture
Fire Incompatibility	None known.
Advice for firefighters	
Fire Fighting	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear full body protective clothing with breathing apparatus.</li> <li>Prevent, by any means available, spillage from entering drains or water course.</li> <li>Use fire fighting procedures suitable for surrounding area.</li> <li>Do not approach containers suspected to be hot.</li> <li>Cool fire exposed containers with water spray from a protected location.</li> <li>If safe to do so, remove containers from path of fire.</li> <li>Equipment should be thoroughly decontaminated after use.</li> </ul>
Fire/Explosion Hazard	<ul> <li>Non combustible.</li> <li>Not considered to be a significant fire risk.</li> <li>Expansion or decomposition on heating may lead to violent rupture of containers.</li> <li>Decomposes on heating and may produce toxic/ irritating fumes.</li> <li>May emit acrid smoke.</li> <li>Decomposition may produce toxic fumes of: nitrogen oxides (NOx)</li> </ul>
HAZCHEM	Not Applicable

#### **SECTION 6 Accidental release measures**

Personal precautions, protective equipment and emergency procedures

See section 8

#### **Environmental precautions**

See section 12

#### Methods and material for containment and cleaning up

Minor Spills	<ul> <li>Clean up all spills immediately.</li> <li>Avoid breathing vapours and contact with skin and eyes.</li> <li>Control personal contact with the substance, by using protective equipment.</li> <li>Contain and absorb spill with sand, earth, inert material or vermiculite.</li> <li>Wipe up.</li> <li>Place in a suitable, labelled container for waste disposal.</li> </ul>
Major Spills	<ul> <li>Clear area of personnel and move upwind.</li> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear full body protective clothing with breathing apparatus.</li> <li>Prevent, by any means available, spillage from entering drains or water course.</li> <li>Stop leak if safe to do so.</li> <li>Contain spill with sand, earth or vermiculite.</li> <li>Collect recoverable product into labelled containers for recycling.</li> <li>Neutralise/decontaminate residue (see Section 13 for specific agent).</li> <li>Collect solid residues and seal in labelled drums for disposal.</li> <li>Wash area and prevent runoff into drains.</li> <li>After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.</li> <li>If contamination of drains or waterways occurs, advise emergency services.</li> </ul>

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

#### **SECTION 7 Handling and storage**

Precautions for safe handling	
Safe handling	<ul> <li>Avoid all personal contact, including inhalation.</li> <li>Wear protective clothing when risk of exposure occurs.</li> <li>Use in a well-ventilated area.</li> <li>Prevent concentration in hollows and sumps.</li> <li>DO NOT enter confined spaces until atmosphere has been checked.</li> <li>DO NOT allow material to contact humans, exposed food or food utensils.</li> <li>Avoid contact with incompatible materials.</li> <li>When handling, DO NOT eat, drink or smoke.</li> <li>Keep containers securely sealed when not in use.</li> <li>Avoid physical damage to containers.</li> <li>Always wash hands with soap and water after handling.</li> <li>Work clothes should be laundered separately. Launder contaminated clothing before re-use.</li> <li>Use good occupational work practice.</li> <li>Observe manufacturer's storage and handling recommendations contained within this SDS.</li> <li>Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.</li> </ul>

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Other information	<ul> <li>Store in original containers.</li> <li>Keep containers securely sealed.</li> <li>Store in a cool, dry, well-ventilated area.</li> <li>Store away from incompatible materials and foodstuff containers.</li> <li>Protect containers against physical damage and check regularly for leaks.</li> <li>Observe manufacturer's storage and handling recommendations contained within this SDS.</li> </ul>	
conditions for sale storage, in	Close container is suitable for laboratory quantities	 

Suitable container	<ul> <li>Glass container is suitable for laboratory quantities</li> <li>Lined metal can, lined metal pail/ can.</li> <li>Plastic pail.</li> <li>Polyliner drum.</li> <li>Packing as recommended by manufacturer.</li> <li>Check all containers are clearly labelled and free from leaks.</li> </ul>
Storage incompatibility	<ul> <li>Avoid strong acids, bases.</li> <li>Contact with acids produces toxic fumes</li> </ul>

#### SECTION 8 Exposure controls / personal protection

#### **Control parameters**

Occupational Exposure Limits (OEL)

#### INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	sodium cyanide	Cyanides (as CN)	5 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	sodium hydroxide	Sodium hydroxide	Not Available	Not Available	2 mg/m3	Not Available

Emergency Limits					
Ingredient	TEEL-1	TEEL-2		TEEL-3	
sodium cyanide	Not Available	Not Available		Not Available	
sodium hydroxide	Not Available	Not Available		Not Available	
Ingredient	Original IDLH		Revised IDLH		
sodium cyanide	25 mg/m3		Not Available		
sodium hydroxide	10 mg/m3		Not Available		
	Not Available		Not Available		

#### MATERIAL DATA

None assigned. Refer to individual constituents.

#### Exposure controls

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	Engineering controls are used to remove a hazard or place a be highly effective in protecting workers and will typically be The basic types of engineering controls are: Process controls which involve changing the way a job activi Enclosure and/or isolation of emission source which keeps a "adds" and "removes" air in the work environment. Ventilation ventilation system must match the particular process and che Employers may need to use multiple types of controls to prev Local exhaust ventilation usually required. If risk of overexpo protection. Supplied-air type respirator may be required in sp An approved self contained breathing apparatus (SCBA) may Provide adequate ventilation in warehouse or closed storage velocities which, in turn, determine the "capture velocities" of	independent of worker interactions to provide this high level ty or process is done to reduce the risk. selected hazard "physically" away from the worker and ven n can remove or dilute an air contaminant if designed prope emical or contaminant in use. vent employee overexposure. sure exists, wear approved respirator. Correct fit is essentia recial circumstances. Correct fit is essential to ensure adequ y be required in some situations. area. Air contaminants generated in the workplace possess	of protection. tilation that strategically rly. The design of a I to obtain adequate late protection. s varying "escape"
	Type of Contaminant:		Air Speed:
	solvent, vapours, degreasing etc., evaporating from tank (i	0.25-0.5 m/s (50-100 f/min.)	
Appropriate engineering controls	aerosols, fumes from pouring operations, intermittent conta drift, plating acid fumes, pickling (released at low velocity in	0.5-1 m/s (100-200 f/min.)	
	direct spray, spray painting in shallow booths, drum filling, generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)	
	grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).		2.5-10 m/s (500-2000 f/min.)
	Within each range the appropriate value depends on:		
	Lower end of the range	Upper end of the range	
	1: Room air currents minimal or favourable to capture	1: Disturbing room air currents	
	2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity	
	3: Intermittent, low production.	3: Intermittent, low production. 3: High production, heavy use	
	4: Large hood or large air mass in motion	4: Small hood-local control only	
	Simple theory shows that air velocity falls rapidly with distance with the square of distance from the extraction point (in simp accordingly, after reference to distance from the contamination	le cases). Therefore the air speed at the extraction point she	ould be adjusted,

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	1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters 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.
Individual protection measures, such as personal protective equipment	
Eye and face protection	<ul> <li>Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure.</li> <li>Chemical goggles. Whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted. [AS/NZS 1337.1, EN166 or national equivalent]</li> <li>Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection.</li> <li>Alternatively a gas mask may replace splash goggles and face shields.</li> <li>Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. 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 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].</li> </ul>
Skin protection	See Hand protection below
Hands/feet protection	Elbow length PVC gloves
Body protection	See Other protection below
Other protection	<ul> <li>Overalls.</li> <li>Eyewash unit.</li> <li>Barrier cream.</li> <li>Skin cleansing cream.</li> </ul>

#### 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
BUTYL	С
NAT+NEOPR+NITRILE	С
NATURAL RUBBER	С
IATURAL+NEOPRENE	С
IEOPRENE	С
EOPRENE/NATURAL	С
NITRILE	С
ITRILE+PVC	С
E	С
E/EVAL/PE	С
VA	С
VC	С
ARANEX-23	С
ARANEX-23 2-PLY	С
EFLON	С
TON	С
ITON/CHLOROBUTYL	С

\* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

#### Ansell Glove Selection

Glove — In order of recommendation	
AlphaTec 02-100	

#### **Respiratory protection**

Type -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	-AUS P2	-	-PAPR-AUS / Class 1 P2
up to 50 x ES	-	-AUS / Class 1 P2	-
up to 100 x ES	-	-2 P2	-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(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

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AlphaTec® Solvex® 37-185
AlphaTec® 38-612
AlphaTec® 58-008
AlphaTec® 58-530B
AlphaTec® 58-530W
AlphaTec® 58-735
AlphaTec® 79-700
AlphaTec® Solvex® 37-675
DermaShield™ 73-711

The suggested gloves for use should be confirmed with the glove supplier.

#### **SECTION 9** Physical and chemical properties

#### Information on basic physical and chemical properties

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

#### SECTION 10 Stability and reactivity

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

#### **SECTION 11 Toxicological information**

#### Information on toxicological effects

Inhaled	The material is not thought to produce respiratory irritation (as classified by EC Directives using animal models). Nevertheless inhalation of vapours, fumes or aerosols, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress.
Ingestion	Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. The toxic properties of cyanide depend on its ability to inhibit enzymes required for the respiration of cells within the body. Acute exposure can cause profuse ineffective breathing, irregular heartbeat, unconsciousness, coma and death by asphyxia. At very low dosages symptoms include weakness, headache, confusion, nausea and vomiting. Normal blood pressure with rapid pulse is usual in mild cases. The respiratory rate varies with the intensity of exposure: rapid with mild exposure, or slow and gasping with severe exposure. Symptoms of mild exposure are reversed when exposure ceases. Symptoms of poisoning may include salivation, nausea without vomiting, anxiety, confusion, vertigo, giddiness, lower jaw stiffness, convulsions, spasm (opisthotonos), paralysis, coma and cardiac arrhythmias Cyanide readily forms stable complexes with biologically active metal ions, notably the ferric ion of cytochrome oxidase, producing significant inhibition of enzyme activity with a consequent loss of a cell's ability to utilise oxygen. Cyanosis (blue-grey discolouration of the skin and lips) is often present in cyanide and nirile poisonings but may be a late finding. Non-lethal doses of cyanide are eventually released from the complex to be transformed to thiocyanate and excreted in the urine.

SODIUM CYANIDE & SODIUM

HYDROXIDE

Acute Toxicity Skin Irritation/Corrosion ~

~

Version No: 10.1 Rowe S	Scientific Multi and single element metal stan matrix	dards in 0.1-0.5% NaOH + 0.1-0.5% NaCN Print Date: 20/03/2024		
	Skin contact with the material may be harmful; systemic effect	ts may result following absorption.		
Skin Contact	Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such nflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. Skin contact may produce "cyanide rash" with itching, also macular, papular and vesicular eruptions. Secondary infections may follow. Contact irritation causes readily reversible change which disappears after exposure ends. Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.			
Eye	Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may oroduce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.			
Chronic	septum, throat irritation, muscular cramps, weight loss and en disorders are at significant risk. A wide range of symptoms are thought to be caused by long- persistent runny nose, weakness, dizziness, giddiness, head muscle cramps, weight loss, flushing of the face, itching and thyroid gland. These symptoms are not specific to cyanide ex Repeated minor contact with cyanides produces a characteri perforation of the nasal septum and possible sensitisation. Co damage to the nerves of the eye.	inical complaints, may cause dermatitis, itching, scarlet rash, perforation of nasal nlargement of the thyroid gland. Workers with pre-existing CNS, heart and lung term, low-level (often less than 10 ppm) exposure to cyanides. Symptoms include ache, nausea, vomiting, abdominal pain, throat irritation, changes in taste and smell, irritation of the upper respiratory tract, throat and eyes and enlargement of the coosure; therefore it has been difficult to prove that chronic cyanide toxicity exists. stic scarlet rash with itching, papules (small, superficial raised spots on the skin), oncerns have been expressed that low-level, long term exposures may result in in interference to iodine uptake by thyroid gland and its consequent enlargement. biety to the less toxic thiocyanate which is excreted in the urine. Thyroid insufficiency es to the corresponding thiocyanate		
Rowe Scientific Multi and				
single element metal standards in 0.1-0.5% NaOH + 0.1-0.5% NaCN matrix	Not Available	IRRITATION           Not Available		
sodium cyanide	TOXICITY           Dermal (rabbit) LD50: 2.34 mg/kg <sup>[1]</sup> Inhalation (Rat) LC50: 0.032 mg/L4h <sup>[1]</sup> Oral (Rat) LD50: 6.64 mg/kg <sup>[2]</sup>	IRRITATION Not Available		
	Dermal (rabbit) LD50: 1350 mg/kg <sup>[2]</sup>	Eye (rabbit): 0.05 mg/24h SEVERE		
	Oral (Rabbit) LD50; 325 mg/kg <sup>[1]</sup>	Eye (rabbit):1 mg/24h SEVERE		
sodium hydroxide		Eye (rabbit):1 mg/30s rinsed-SEVERE		
		Eye: adverse effect observed (irritating) <sup>[1]</sup> Skin (rabbit): 500 mg/24h SEVERE		
		Skin: adverse effect observed (corrosive) <sup>[1]</sup>		
	ΤΟΧΙΟΙΤΥ	IRRITATION		
water	Oral (Rat) LD50: >90000 mg/kg <sup>[2]</sup>	Not Available		
Legend:	1. Value obtained from Europe ECHA Registered Substance. specified data extracted from RTECS - Register of Toxic Effe	s - Acute toxicity 2. Value obtained from manufacturer's SDS. Unless otherwise ct of chemical Substances		
SODIUM HYDROXIDE WATER	produce conjunctivitis. The material may produce severe skin irritation after prolong form of dermatitis is often characterised by skin redness (ery Histologically there may be intercellular oedema of the spong unlikely, given the severity of response, but repeated exposu No significant acute toxicological data identified in literature s	y layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is res may produce severe ulceration.		
	known as reactive airways dysfunction syndrome (RADS) wh criteria for diagnosing RADS include the absence of previous	rs after exposure to the material ends. This may be due to a non-allergic condition ich can occur after exposure to high levels of highly irritating compound. Main a airways disease in a non-atopic individual, with sudden onset of persistent ted exposure to the irritant. Other criteria for diagnosis of RADS include a reversible		

asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible

airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal

disorder is characterized by difficulty breathing, cough and mucus production.

lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The

Carcinogenicity

Reproductivity

х

X

Continued...

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Rowe Scientific Multi and single element metal standards in 0.1-0.5% NaOH + 0.1-0.5% NaCN	
matrix	

Serious Eye Damage/Irritation	✓	STOT - Single Exposure	×	
Respiratory or Skin sensitisation	×	STOT - Repeated Exposure	×	
Mutagenicity	×	Aspiration Hazard	×	
		Legend: X – Data either not available or does not fill the criteria for classification – Data available to make classification		

#### **SECTION 12 Ecological information**

#### Toxicity

Rowe Scientific Multi and Endpoint		Test Duration (hr)	Species		Value	Source
single element metal tandards in 0.1-0.5% NaOH + 0.1-0.5% NaCN matrix	Not Available	Not Available	Not Available	Not Available Not Availab		Not Available
	Endpoint	Test Duration (hr)	Species	Va	lue	Source
	EC50	48h	Crustacea	0.2	7-0.59mg/l	4
sodium cyanide	EC50	72h	Algae or other aquatic plants	0.0	51-0.063mg/l	4
	NOEC(ECx)	168h	Algae or other aquatic plants	0.0	04mg/L	2
	LC50	96h	Fish	0.0	24mg/L	2
	Endpoint	Test Duration (hr)	Species	Va	lue	Source
	EC50	48h	Crustacea	34.	59-47.13mg/l	4
sodium hydroxide	EC50(ECx)	48h	Crustacea	34.	59-47.13mg/l	4
	LC50	96h	Fish	144	1-267mg/l	4
	Endpoint	Test Duration (hr)	Species		Value	Source
water	Not Available	Not Available	Not Available		Not Available	Not Available
Legend:	Ecotox databa		CHA Registered Substances - Ecotoxicological Inforr C Aquatic Hazard Assessment Data 6. NITE (Japan)			

Harmful to aquatic organisms, may cause long-term adverse effects in the aquatic environment. DO NOT discharge into sewer or waterways.

#### Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
sodium cyanide	LOW	LOW
sodium hydroxide	LOW	LOW
water	LOW	LOW

#### **Bioaccumulative potential**

Ingredient	Bioaccumulation
sodium cyanide	LOW (LogKOW = -1.6928)
sodium hydroxide	LOW (LogKOW = -3.8796)

#### Mobility in soil

Ingredient	Mobility
sodium cyanide	MEDIUM (Log KOC = 2.71)
sodium hydroxide	LOW (Log KOC = 14.3)

#### **SECTION 13 Disposal considerations** Waste treatment methods Containers may still present a chemical hazard/ danger when empty. Return to supplier for reuse/ recycling if possible. Otherwise: F If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill. ▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product. Care must be taken when using hypochlorite solution to destroy cyanide wastes by oxidation of cyanates because highly toxic cyanogen Product / Packaging disposal chloride may be formed. The reaction proceeds readily, even at high pH, but the secondary oxidation of cyanate to nitrogen and carbon dioxide is very pH dependent. At pH 11 it is slow but runs-away at pH 10-10.3. This procedure should avoid high pHs, excess of hypochlorite, and moderate or high concentrations of the hypochlorite. Addition of 0.5 ml of cyanide solution to 5 ml of stirred hypochlorite destroyed a gas meter with the violent evolution of gas. BRETHERICK L.: Handbook of Reactive Chemical Hazards CAUTION: Concentrated hypochlorite should not be mixed with concentrated cyanide solutions or solid cyanide because highly toxic cyanogen

Rowe Scientific Multi and single element metal standards in 0.1-0.5% NaOH + 0.1-0.5% NaCN matrix		
	matrix	-
	chloride das will be released	

Waste solutions may also be reacted with ferrous sulfate to form relatively non-toxic ferrocyanide.

#### SECTION 14 Transport information

# Labels Required Marine Pollutant NO HAZCHEM Not Applicable

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

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

Puncture containers to prevent re-use. Bury empty containers at an authorised landfill.

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

#### 14.7.1. Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

#### 14.7.2. Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group	
sodium cyanide	Not Available	
sodium hydroxide	Not Available	
water	Not Available	

#### 14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type	
sodium cyanide	Not Available	
sodium hydroxide	Not Available	
water	Not Available	

#### **SECTION 15 Regulatory information**

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

sodium cyanide is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 7

Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

sodium hydroxide is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 10 / Appendix C Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

Australian Inventory of Industrial Chemicals (AIIC)

#### water is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

#### Additional Regulatory Information

Not Applicable

#### National Inventory Status

National Inventory	Status		
Australia - AIIC / Australia Non-Industrial Use	Yes		
Canada - DSL	Yes		
Canada - NDSL	No (sodium cyanide; sodium hydroxide; water)		
China - IECSC	Yes		
Europe - EINEC / ELINCS / NLP	Yes		
Japan - ENCS	Yes		
Korea - KECI	Yes		
New Zealand - NZIoC	Yes		
Philippines - PICCS	Yes		
USA - TSCA	Yes		
Taiwan - TCSI	Yes		
Mexico - INSQ	Yes		
Vietnam - NCI	Yes		

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#### Rowe Scientific Multi and single element metal standards in 0.1-0.5% NaOH + 0.1-0.5% NaCN matrix

National Inventory	Status	
Russia - FBEPH	Yes	
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration	

#### SECTION 16 Other information

Revision Date 20/03/2024		
	Revision Date	20/03/2024
Initial Date 27/02/2017	Initial Date	27/02/2017

#### **SDS Version Summary**

Version	Date of Update	Sections Updated
9.1	10/12/2021	Classification change due to full database hazard calculation/update.
10.1	20/03/2024	Hazards identification - Classification, Identification of the substance / mixture and of the company / undertaking - Synonyms, Identification of the substance / mixture and of the company / undertaking - Use

#### Other information

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

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

#### Definitions and abbreviations

- PC TWA: Permissible Concentration-Time Weighted Average
- PC STEL: Permissible Concentration-Short Term Exposure Limit
- IARC: International Agency for Research on Cancer
- ACGIH: American Conference of Governmental Industrial Hygienists
- STEL: Short Term Exposure Limit
- TEEL: Temporary Emergency Exposure Limit.
- IDLH: Immediately Dangerous to Life or Health Concentrations
- ES: Exposure Standard
- OSF: Odour Safety Factor Þ
- NOAEL: No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level ÷.
- TLV: Threshold Limit Value LOD: Limit Of Detection ٠
- OTV: Odour Threshold Value ۶
- BCF: BioConcentration Factors BEI: Biological Exposure Index
- DNEL: Derived No-Effect Level ۲
- PNEC: Predicted no-effect concentration
- ٠ AIIC: Australian Inventory of Industrial Chemicals
- Þ DSL: Domestic Substances List
- NDSL: Non-Domestic Substances List ٠
- ۶ IECSC: Inventory of Existing Chemical Substance in China
- EINECS: European INventory of Existing Commercial chemical Substances
- ELINCS: European List of Notified Chemical Substances ٠
- NLP: No-Longer Polymers
- ۶ ENCS: Existing and New Chemical Substances Inventory
- KECI: Korea Existing Chemicals Inventory
- NZIoC: New Zealand Inventory of Chemicals ÷
- PICCS: Philippine Inventory of Chemicals and Chemical Substances ٠
- TSCA: Toxic Substances Control Act ٠
- TCSI: Taiwan Chemical Substance Inventory
- INSQ: Inventario Nacional de Sustancias Químicas
- NCI: National Chemical Inventory
- ▶ FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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