SODIUM HYDROXIDE FLAKES

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

SODIUM HYDROXIDE FLAKES

OTHER NAMES

NaOH, "soda lye", "white caustic soda", "caustic soda, anhydrous", lye, "sodium hydroxide solid", pellets, pearl, flakes, alkali, "caustic soda - pearl", "solid grades", 30167

PROPER SHIPPING NAME

SODIUM HYDROXIDE, SOLID

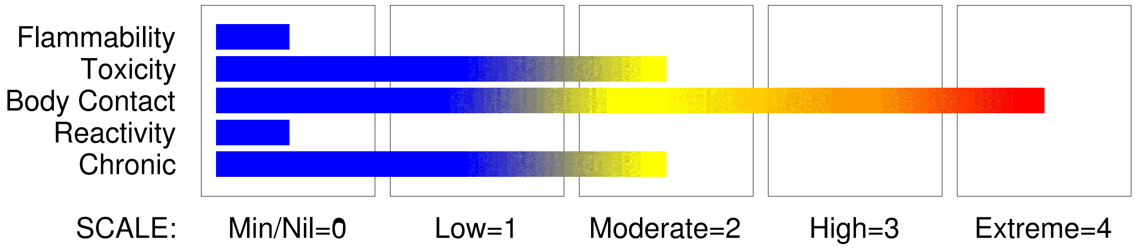
PRODUCT USE

Component of alkali cleaners. Manufacture of soap, pulp and paper; rayon. Chemical manufacture. Neutralising agent in petroleum refining; manufacture of aluminium, detergents, textile processing, refining of vegetable oils. Laboratory reagent, for organic fusion, etching of metal. Used for regenerating ion exchange resins, lye peeling of fruits and vegetables in the food industry.

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

Metal Corrosion Category 1

continued...

Skin Corrosion/Irritation Category 1B

EMERGENCY OVERVIEW

HAZARD

DANGER
Determined by using GHS criteria:
H290 H314
May be corrosive to metals
Causes severe skin burns and eye damage

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.
Specific treatment: refer to Label or MSDS.
Absorb spillage to prevent material damage.
Immediately call a POISON CENTER or doctor/physician.
If on skin or hair: remove/take off immediately all contaminated clothing. Rinse with water/shower.

Storage

Store locked up.
Store in a corrosive resistant container with a resistant inliner.

Disposal

Dispose of contents and container in accordance with relevant legislation.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
sodium hydroxide	1310-73-2	>98

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.

continued...

- 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, without delay.

NOTES TO PHYSICIAN

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

Alkalis continue to cause damage after exposure.

INGESTION:
- Milk and water are the preferred diluents

No more than 2 glasses of water should be given to an adult.
- Neutralising agents should never be given since exothermic heat reaction may compound injury.

* Catharsis and emesis are absolutely contra-indicated.
* Activated charcoal does not absorb alkali.

continued...

* Gastric lavage should not be used.

Supportive care involves the following:
- Withhold oral feedings initially.
- If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

SKIN AND EYE:
- Injury should be irrigated for 20-30 minutes.

Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology].

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 a significant fire risk, however containers may burn.

May emit corrosive fumes.

FIRE INCOMPATIBILITY

None known.

Personal Protective Equipment

Gas tight chemical resistant suit.

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.

continued...

- 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 hydroxide 50 mg/m^3

irreversible or other serious effects or symptoms which could impair an individual's ability to take protective action is:
sodium hydroxide 5 mg/m^3

other than mild, transient adverse effects without perceiving a clearly defined odour is:
sodium hydroxide 0.5 mg/m^3

The threshold concentration below which most people will experience no appreciable risk of health effects:
sodium hydroxide 0.5 mg/m^3

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.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

DO NOT use aluminium, galvanised or tin-plated containers.

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- WARNING: To avoid violent reaction, ALWAYS add material to water and NEVER water to material.
- Avoid smoking, naked lights or ignition sources.
- Avoid contact with incompatible materials.

continued...

- 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

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

In presence of moisture, the material is corrosive to aluminium, zinc and tin producing highly flammable hydrogen gas.
Avoid strong acids.
Avoid contact with copper, aluminium and their alloys.
Store away from nitro compounds and trichlorethylene.
Reacts with mineral acids to form corresponding salts; reacts with weak acids, gases such as hydrogen sulfide, sulfur dioxide and carbon dioxide; ignites when in contact with cinnamaldehyde or zinc and reacts explosively with a mixture of chloroform and methane.
Corrosive to metals such as aluminium, tin and zinc as well as to alloys such as steel - may form explosive hydrogen gas.

STORAGE REQUIREMENTS

Plastic bag
NOTE: Bags should be stacked, blocked, interlocked, and limited in height so that they are stable and secure against sliding or collapse.

- 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.

DO NOT store near acids, or oxidising agents.
No smoking, naked lights, heat or ignition sources.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS

\+ \+ \+ \+ \+ \+

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

continued...

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

- sodium hydroxide: CAS:1310- 73- 2

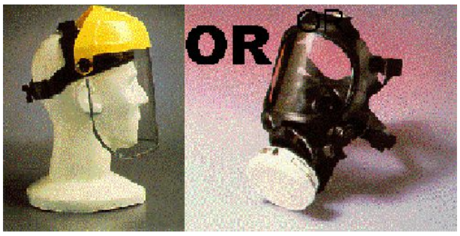
EMERGENCY EXPOSURE LIMITS

Material	Revised IDLH Value (mg/m3)	Revised IDLH Value (ppm)
sodium hydroxide	10	

MATERIAL DATA

The TLV-C is recommended based on concentrations that produce noticeable but not excessive, ocular and upper respiratory tract irritation.

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.

Elbow length PVC gloves.

OTHER

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

continued...

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: sodium hydroxide

Protective Material	
BUTYL	A
NAT+NEOPR+NITRILE	A
NATURAL+NEOPRENE	A
NEOPRENE	A
NEOPRENE/NATURAL	A
NITRILE+PVC	A
PE	A
PE/EVAL/PE	A
PVC	A
SARANEX- 23	A
SARANEX- 23 2- PLY	A
TEFLON	A
VITON/CHLOROBUTYL	A
NATURAL RUBBER	A
NITRILE	A

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.

RESPIRATOR

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

* - Negative pressure demand ** - Continuous flow.

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 usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection.
An approved self contained breathing apparatus (SCBA) may be required in some situations.
Provide adequate ventilation in warehouse or closed storage area. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine

continued...

the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Air Speed:
solvent, vapours, degreasing etc., evaporating from tank (in still air).	0.25- 0.5 m/s (50- 100 f/min.)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5- 1 m/s (100- 200 f/min.)
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active 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: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood- local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 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.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

White hygroscopic, odourless, pellets, flakes, sticks or solid cast mass.
Vigorously exotherms when mixed with water. Explosive boiling and spitting will occur if added to hot water. Reacts violently with acids.
CAUSTIC alkali. Soluble in water, alcohol, ether, glycerol.
In the presence of moisture, highly corrosive to aluminium, zinc and tin.
HIGHLY reactive: with ammonium salts evolves ammonia gas. Rapidly picks up moisture from the air and with carbon dioxide in air forms sodium carbonate.

PHYSICAL PROPERTIES

Solid.
Mixes with water.
Corrosive.

continued...

Alkaline.

Molecular Weight: 40
Melting Range (°C): 318.4
Solubility in water (g/L): Miscible
pH (1% solution): 12.7
Volatile Component (%vol): Not available
Relative Vapour Density (air=1): Not available
Lower Explosive Limit (%): Not applicable
Autoignition Temp (°C): Not applicable
State: Divided solid

Boiling Range (°C): 1390
Specific Gravity (water=1): 2.12 @ 20 C
pH (as supplied): Not applicable
Vapour Pressure (kPa): Negligible
Evaporation Rate: Not available
Flash Point (°C): Not applicable
Upper Explosive Limit (%): Not applicable
Decomposition Temp (°C): Not Applicable
Viscosity: Not Applicable

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

The material can produce severe chemical burns within the oral cavity and gastrointestinal tract following ingestion.
Accidental ingestion of the material may be damaging to the health of the individual.
Ingestion of alkaline corrosives may produce immediate pain, and circumoral burns. Mucous membrane corrosive damage is characterised by a white appearance and soapy feel; this may then become brown, oedematous and ulcerated. Profuse salivation with an inability to swallow or speak may also result. Even where there is limited or no evidence of chemical burns, both the oesophagus and stomach may experience a burning pain; vomiting and diarrhoea may follow. The vomitus may be thick and may be slimy (mucous) and may eventually contain blood and shreds of mucosa. Epiglottal oedema may result in respiratory distress and asphyxia. Marked hypotension is symptomatic of shock; a weak and rapid pulse, shallow respiration and clammy skin may also be evident. Circulatory collapse may occur and, if uncorrected, may produce renal failure. Severe exposures may result in oesophageal or gastric perforation accompanied by mediastinitis, substernal pain, peritonitis, abdominal rigidity and fever. Although oesophageal, gastric or pyloric stricture may be evident initially, these may occur after weeks or even months and years. Death may be quick and results from asphyxia, circulatory collapse or aspiration of even minute amounts. Death may also be delayed as a result of perforation, pneumonia or the effects of stricture formation.

EYE

The material can produce severe 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.
Direct contact with alkaline corrosives may produce pain and burns. Oedema, destruction of the epithelium, corneal opacification and iritis may occur. In less severe cases these symptoms tend to resolve. In severe injuries the full extent of the damage may not be immediately apparent with late complications comprising a persistent oedema,

continued...

vascularisation and corneal scarring, permanent opacity, staphyloma, cataract, symblepharon and loss of sight.

SKIN

The material can produce severe chemical burns following direct contact with the skin.
Skin contact with alkaline corrosives may produce severe pain and burns; brownish stains may develop. The corroded area may be soft, gelatinous and necrotic; tissue destruction may be deep.
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.
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.

INHALED

Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation.
In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.
Inhalation of alkaline corrosives may produce irritation of the respiratory tract with coughing, choking, pain and mucous membrane damage. Pulmonary oedema may develop in more severe cases; this may be immediate or in most cases following a latent period of 5-72 hours. Symptoms may include a tightness in the chest, dyspnoea, frothy sputum, cyanosis and dizziness. Findings may include hypotension, a weak and rapid pulse and moist rales.
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

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.
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.

TOXICITY AND IRRITATION

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

TOXICITY	IRRITATION
	Skin (rabbit): 500 mg/24h SEVERE
	Eye (rabbit): 0.05 mg/24h SEVERE
	Eye (rabbit):1 mg/24h SEVERE
	Eye (rabbit):1 mg/30s rinsed- SEVERE

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

continued...

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.

Section 12 - ECOLOGICAL INFORMATION

Prevent, by any means available, spillage from entering drains or water courses.
DO NOT discharge into sewer or waterways.
Ecotoxicity:
Fish LC50 (96h): 43mg/l

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 slurrying in water; Neutralisation followed by: Burial in a licenced land-fill or Incineration in a licenced apparatus (after admixture with suitable combustible material)
· Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

WASTE DISPOSAL PROCEDURES
• Wear eye protection, protective clothing and nitrile rubber gloves to control personal contact from sodium hydroxide. Add the compound to a large volume of ice water. Neutralise by adding 5% hydrochloric acid and empty into the drain [Armour 1996].

SPILLAGE DISPOSAL
• Wear eye protection, protective clothing and nitrile rubber gloves to control personal contact from sodium hydroxide. Scoop the contents into a container and add small portions into a large volume of ice water. Neutralise with 5% hydrochloric acid and empty into the drain. Wash the area of the spill with

continued...

water [Armour 1996].

Section 14 - TRANSPORTATION INFORMATION

Labels Required: CORROSIVE
HAZCHEM: 2X

UNDG:

Dangerous Goods Class:	8	Subrisk:	None
UN Number:	1823	Packing Group:	II

Shipping Name:SODIUM HYDROXIDE, SOLID

Air Transport IATA:

ICAO/IATA Class:	8	ICAO/IATA Subrisk:	None
UN/ID Number:	1823	Packing Group:	II
Special provisions:	None		

Shipping Name: SODIUM HYDROXIDE, SOLID

Maritime Transport IMDG:

IMDG Class:	8	IMDG Subrisk:	None
UN Number:	1823	Packing Group:	II
EMS Number:	F- A, S- B	Special provisions:	None

Shipping Name: SODIUM HYDROXIDE, SOLID

Section 15 - REGULATORY INFORMATION

REGULATIONS

sodium hydroxide (CAS: 1310-73-2) is found on the following regulatory lists;
CODEX General Standard for Food Additives (GSFA) - Additives Permitted for Use in Food in General, Unless Otherwise Specified, in Accordance with GMP
International Council of Chemical Associations (ICCA) - High Production Volume List
OECD Representative List of High Production Volume (HPV) Chemicals

Section 16 - OTHER INFORMATION

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
First Aid (eye)	5	12- Jan- 2006	Handling Procedure	5	12- Jan- 2006	Acute Health (eye)	6	9- Nov- 2006
First Aid (inhaled)	5	12- Jan- 2006	Storage (storage incompatibility)	7	25- May- 2007	Acute Health (inhaled)	6	9- Nov- 2006
First Aid (skin)	5	12- Jan- 2006	Storage (storage requirement)	6	9- Nov- 2006	Acute Health (skin)	6	9- Nov- 2006
First Aid (swallowed)	5	12- Jan- 2006	Storage (suitable container)	6	9- Nov- 2006	Acute Health (swallowed)	6	9- Nov- 2006
Fire Fighter (extinguishing media)	5	12- Jan- 2006	Engineering Control	5	12- Jan- 2006	Chronic Health	6	9- Nov- 2006
Fire Fighter (fire	5	12- Jan- 2006	Personal	5	12- Jan- 2006	Toxicity and	6	9- Nov- 2006

continued...

fighting)			Protection (eye)			Irritation (Other)		
Fire Fighter (fire incompatibility)	5	12- Jan- 2006	Personal Protection (hands/feet)	6	9- Nov- 2006	Environmental	6	9- Nov- 2006
Fire Fighter (fire/explosion hazard)	6	9- Nov- 2006	Appearance	6	9- Nov- 2006	Disposal	5	12- Jan- 2006
Spills (major)	5	12- Jan- 2006	Physical Properties	6	9- Nov- 2006	Transport	5	12- Jan- 2006
Spills (minor)	6	9- Nov- 2006	Instability Condition	5	12- Jan- 2006			

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: 25-May-2018