

# DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION

Hazard Alert Code:  
**MODERATE**

Chemwatch Material Safety Data Sheet (REVIEW)

Revision No: 2.0

Chemwatch 21-9356

Issue Date: 17-Nov-2009

CD 2009/3

## Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

### PRODUCT NAME

DC2700 Alcoless 4.8 Fountain Solution

### PRODUCT USE

■ Used according to manufacturer's directions. Printing industry use only.

### SUPPLIER

Company: Hurst Australia Pty Ltd

Address:

10 Bellona Avenue

Regents Park

NSW, 2143

AUS

Telephone: +61 2 9644 6888

Emergency Tel: +61 2 9644 6888

Fax: +61 2 9644 6534

Email: info@hurst.com.au

### HAZARD RATINGS

	Min	Max	
Flammability:	0		
Toxicity:	2		
Body Contact:	2		
Reactivity:	2		
Chronic:	2		

Min/Nil=0  
Low=1  
Moderate=2  
High=3  
Extreme=4



## Section 2 - HAZARDS IDENTIFICATION

### STATEMENT OF HAZARDOUS NATURE

**HAZARDOUS SUBSTANCE. NON-DANGEROUS GOODS. According to the Criteria of NOHSC, and the ADG Code.**

### POISONS SCHEDULE

S6

#### RISK

- Harmful by inhalation in contact with skin and if swallowed.
- Irritating to eyes and skin.
- May cause SENSITISATION by skin contact.
- Very toxic to aquatic organisms.
- Potentially explosive peroxides may form on standing\*.
- Cumulative effects may result following exposure\*.
- Limited evidence of a carcinogenic effect\*.
- May be harmful to the foetus/ embryo\*.
- May possibly affect fertility\*.

■ Vapours potentially cause drowsiness and dizziness\*.

\* (limited evidence).

#### SAFETY

- Do not breathe gas/ fumes/ vapour/ spray.
- Use only in well ventilated areas.
- Keep container in a well ventilated place.
- Avoid exposure - obtain special instructions before use.
- To clean the floor and all objects contaminated by this material use water.
- Keep container tightly closed.
- This material and its container must be disposed of in a safe way.
- Keep away from food drink and animal feeding stuffs.
- In case of contact with eyes rinse with plenty of water and contact Doctor or Poisons Information Centre.
- If swallowed IMMEDIATELY contact Doctor or Poisons Information Centre (show this container or label).
- Use appropriate container to avoid environment contamination.
- Avoid release to the environment. Refer to special instructions/ safety data sheets.

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## Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
ethylene glycol monobutyl ether	111-76-2	10-<30
isothiazolinones, mixed	55965-84-9	<0.2

## Section 4 - FIRST AID MEASURES

### SWALLOWED

- 
- IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.
- For advice, contact a Poisons Information Centre or a doctor.
- Urgent hospital treatment is likely to be needed.
- In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition.
- If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the MSDS should be provided. Further action will be the responsibility of the medical specialist.
- If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the MSDS.
- Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:
- INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.

NOTE: Wear a protective glove when inducing vomiting by mechanical means.

### EYE

- If this product comes in contact with the eyes:
- Wash out immediately with fresh 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.
- If pain persists or recurs seek medical attention.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

### SKIN

- If skin contact occurs:
- Immediately remove all contaminated clothing, including footwear.
- Flush skin and hair with running water (and soap if available).
- Seek medical attention in event of irritation.

### 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

- Followed acute or short term repeated exposures to ethylene glycol monoalkyl ethers and their acetates:
- Hepatic metabolism produces ethylene glycol as a metabolite.
- Clinical presentation, following severe intoxication, resembles that of ethylene glycol exposures.
- Monitoring the urinary excretion of the alkoxyacetic acid metabolites may be a useful indication of exposure. [Ellenhorn and Barceloux: Medical Toxicology]. For acute or short term repeated exposures to ethylene glycol:
- Early treatment of ingestion is important. Ensure emesis is satisfactory.
- Test and correct for metabolic acidosis and hypocalcaemia.
- Apply sustained diuresis when possible with hypertonic mannitol.
- Evaluate renal status and begin haemodialysis if indicated. [I.L.O]
- Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective.
- Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution.
- Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites.
- Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days.
- Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis. [Ellenhorn and Barceloux: Medical Toxicology] It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated

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with such exposures.

Laitinen J., et al: Occupational & Environmental Medicine 1996; 53, 595-600.

## Section 5 - FIRE FIGHTING MEASURES

### EXTINGUISHING MEDIA

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

### FIRE FIGHTING

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

### FIRE/EXPLOSION HAZARD

- other pyrolysis products typical of burning organic material.
- May emit poisonous fumes.
- May emit corrosive fumes.

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

### FIRE INCOMPATIBILITY

- 
- Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result

### HAZCHEM

None

### Personal Protective Equipment

Gas tight chemical resistant suit.

## Section 6 - ACCIDENTAL RELEASE MEASURES

### EMERGENCY PROCEDURES

#### MINOR SPILLS

- 
- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb spill with sand, earth, inert material or vermiculite.
- Wipe up.
- Place in a suitable, labelled container for waste disposal.

#### MAJOR SPILLS

- Chemical Class: ester and ethers

For release onto land: recommended sorbents listed in order of priority.

SORBENT TYPE	RANK	APPLICATION	COLLECTION	LIMITATIONS
<b>LAND SPILL - SMALL</b>				
cross-linked polymer - particulate	1	shovel	shovel	R, W, SS
cross-linked polymer - pillow	1	throw	pitchfork	R, DGC, RT
sorbent clay - particulate	2	shovel	shovel	R, I, P
wood fiber - particulate	3	shovel	shovel	R, W, P, DGC
wood fiber - pillow	3	throw	pitchfork	R, P, DGC, RT
treated wood fiber - pillow	3	throw	pitchfork	DGC, RT
<b>LAND SPILL - MEDIUM</b>				
cross-linked polymer - particulate	1	blower	skiploader	R, W, SS
cross-linked polymer - pillow	2	throw	skiploader	R, DGC, RT
sorbent clay - particulate	3	blower	skiploader	R, I, P

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polypropylene - particulate	3	blower	skiploader	W, SS, DGC
expanded mineral - particulate	4	blower	skiploader	R, I, W, P, DGC
wood fiber - particulate	4	blower	skiploader	R, W, P, DGC

## Legend

DGC: Not effective where ground cover is dense

R; Not reusable

I: Not incinerable

P: Effectiveness reduced when rainy

RT: Not effective where terrain is rugged

SS: Not for use within environmentally sensitive sites

W: Effectiveness reduced when windy

Reference: Sorbents for Liquid Hazardous Substance Cleanup and Control;

R.W Melvold et al: Pollution Technology Review No. 150: Noyes Data Corporation 1988.

- Absorb or contain isothiazolinone liquid spills with sand, earth, inert material or vermiculite.

- The absorbent (and surface soil to a depth sufficient to remove all of the biocide) should be shovelled into a drum and treated with an 11% solution of sodium metabisulfite (Na<sub>2</sub>S<sub>2</sub>O<sub>5</sub>) or sodium bisulfite (NaHSO<sub>3</sub>), or 12% sodium sulfite (Na<sub>2</sub>SO<sub>3</sub>) and 8% hydrochloric acid (HCl).

- Glutathione has also been used to inactivate the isothiazolinones.

- Use 20 volumes of decontaminating solution for each volume of biocide, and let containers stand for at least 30 minutes to deactivate microbicide before disposal.

- If contamination of drains or waterways occurs, advise emergency services.

- After clean up operations, decontaminate and launder all protective clothing

- and equipment before storing and re-using.

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

## Section 7 - HANDLING AND STORAGE

### PROCEDURE FOR HANDLING

■

- DO NOT allow clothing wet with material to stay in contact with skin

The tendency of many ethers to form explosive peroxides is well documented. Ethers lacking non-methyl hydrogen atoms adjacent to the ether link are thought to be relatively safe

- DO NOT concentrate by evaporation, or evaporate extracts to dryness, as residues may contain explosive peroxides with DETONATION potential.

- Any static discharge is also a source of hazard.

- Before any distillation process remove trace peroxides by shaking with excess 5% aqueous ferrous sulfate solution or by percolation through a column of activated alumina.

- Distillation results in uninhibited ether distillate with considerably increased hazard because of risk of peroxide formation on storage.

- Add inhibitor to any distillate as required.

- When solvents have been freed from peroxides by percolation through columns of activated alumina, the absorbed peroxides must promptly be desorbed by treatment with polar solvents such as methanol or water, which should then be disposed of safely.

The substance accumulates peroxides which may become hazardous only if it evaporates or is distilled or otherwise treated to concentrate the peroxides. The substance may concentrate around the container opening for example.

Purchases of peroxidisable chemicals should be restricted to ensure that the chemical is used completely before it can become peroxidised.

- A responsible person should maintain an inventory of peroxidisable chemicals or annotate the general chemical inventory to indicate which chemicals are subject to peroxidation. An expiration date should be determined. The chemical should either be treated to remove peroxides or disposed of before this date.

- The person or laboratory receiving the chemical should record a receipt date on the bottle. The individual opening the container should add an opening date.

- Unopened containers received from the supplier should be safe to store for 18 months.

- Opened containers should not be stored for more than 12 months.

- 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.

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- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.

## SUITABLE CONTAINER

- 
- Polyethylene or polypropylene container.
- Packing as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.

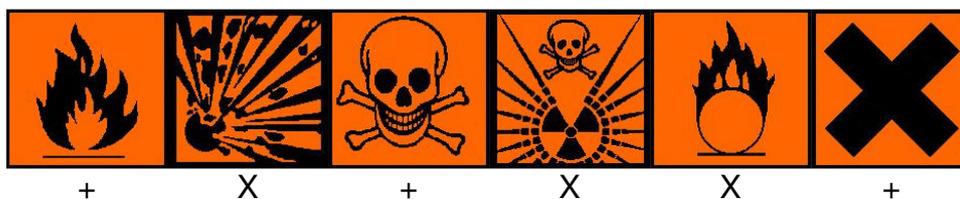
## STORAGE INCOMPATIBILITY

- 
- Avoid reaction with oxidising agents

## 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



*X: Must not be stored together*

*O: May be stored together with specific precautions*

*+: May be stored together*

## Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

### EXPOSURE CONTROLS

Source	Material	TWA ppm	TWA mg/m <sup>3</sup>	STEL ppm	STEL mg/m <sup>3</sup>	Peak ppm	Peak mg/m <sup>3</sup>	TWA F/CC	Notes
Australia Exposure Standards	ethylene glycol monobutyl ether (2-Butoxyethanol)	20	96.9	50	242				Sk

The following materials had no OELs on our records

- isothiazolinones, mixed: CAS:55965-84-9

### EMERGENCY EXPOSURE LIMITS

Material	Revised IDLH Value (mg/m <sup>3</sup> )	Revised IDLH Value (ppm)
ethylene glycol monobutyl ether		700 [Unch]

### MATERIAL DATA

DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION:

- GEL TWA: 0.1 mg/m<sup>3</sup>; STEL 0.3 mg/m<sup>3</sup> total isothiazolinones (Rohm and Haas).

For ethylene glycol monobutyl ether (2-butoxyethanol)

Odour Threshold Value: 0.10 ppm (detection), 0.35 ppm (recognition)

Although rats appear to be more susceptible than other animals anaemia is not uncommon amongst humans following exposure. The TLV reflects the need to maintain exposures below levels found to cause blood changes in experimental animals. It is concluded that this limit will reduce the significant risk of irritation, haematologic effects and other systemic effects observed in humans and animals exposed to higher vapour concentrations. The toxic effects typical of some other glycol ethers (pancytopenia, testis atrophy and teratogenic effects) are not found with this substance.

Odour Safety Factor (OSF)

OSF=2E2 (2-BUTOXYETHANOL).

ETHYLENE GLYCOL MONOBUTYL ETHER:

- For ethylene glycol monobutyl ether (2-butoxyethanol)

Odour Threshold Value: 0.10 ppm (detection), 0.35 ppm (recognition)

Although rats appear to be more susceptible than other animals anaemia is not uncommon amongst humans following exposure. The TLV reflects the need to maintain exposures below levels found to cause blood changes in experimental animals. It is concluded that this limit will reduce the significant risk of irritation, haematologic effects and other systemic effects observed in humans and animals exposed to higher vapour concentrations. The toxic effects typical of some other glycol ethers (pancytopenia, testis atrophy and teratogenic effects) are not found with this substance.

Odour Safety Factor (OSF)

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OSF=2E2 (2-BUTOXYETHANOL).

Exposed individuals are reasonably expected to be warned, by smell, that the Exposure Standard is being exceeded.

Odour Safety Factor (OSF) is determined to fall into either Class A or B.

The Odour Safety Factor (OSF) is defined as:

OSF= Exposure Standard (TWA) ppm/ Odour Threshold Value (OTV) ppm

Classification into classes follows:

Class	OSF	Description
A	550	Over 90% of exposed individuals are aware by smell that the Exposure Standard (TLV-TWA for example) is being reached, even when distracted by working activities
B	26-550	As "A" for 50-90% of persons being distracted
C	1-26	As "A" for less than 50% of persons being distracted
D	0.18-1	10-50% of persons aware of being tested perceive by smell that the Exposure Standard is being reached
E	<0.18	As "D" for less than 10% of persons aware of being tested

ISOTHIAZOLINONES, MIXED:

■ CEL TWA: 0.1 mg/m<sup>3</sup>; STEL 0.3 mg/m<sup>3</sup> total isothiazolinones (Rohm and Haas).

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
- 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.

Designated S in List of MAK values: Danger of sensitization.

MAK Group D: Classification as to the effect of the substance on the developing embryo/foetus is not yet possible because although data may indicate a trend, they are not sufficient for a final evaluation.

MAK values, and categories and groups are those recommended within the Federal Republic of Germany.

CEL TWA: 0.1 mg/m<sup>3</sup>; STEL: 0.3 mg/m<sup>3</sup> total isothiazolines [Manuf.]

MAK value: 0.05 mg/m<sup>3</sup>

## PERSONAL PROTECTION



## EYE

- 
- Safety glasses with side shields.
- Chemical goggles.
- 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

- 
- Wear chemical protective gloves, eg. PVC.

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- Wear safety footwear or safety gumboots, eg. Rubber

#### NOTE:

- The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.
- Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.

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.

- Butyl rubber gloves
- Nitrile rubber gloves

#### OTHER

- 
- Overalls.
- P.V.C. apron.
- Barrier cream.
- Skin cleansing cream.
- Eye wash unit.

#### RESPIRATOR

■ Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Breathing Zone Level ppm (volume)	Maximum Protection Factor	Half-face Respirator	Full-Face Respirator
1000	10	A-AUS	-
1000	50	-	A-AUS
5000	50	Airline *	-
5000	100	-	A-2
10000	100	-	A-3
	100+		Airline**

\* - Continuous Flow \*\* - Continuous-flow or positive pressure demand.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required. For further information consult site specific CHEMWATCH data (if available), or 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 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.

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## Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

### APPEARANCE

Slightly yellow liquid with a specific odour; miscible with water.

### PHYSICAL PROPERTIES

Liquid.

Mixes with water.

Molecular Weight: Not Available	Boiling Range (°C): >100	Melting Range (°C): Not Available
Specific Gravity (water=1): 1.02	Solubility in water (g/L): Miscible	pH (as supplied): 4.5-4.6
pH (1% solution): Not Available	Vapour Pressure (kPa): Not Available	Volatile Component (%vol): Not Available
Evaporation Rate: Not Available	Relative Vapour Density (air=1): Not Available	Flash Point (°C): Not Applicable
Lower Explosive Limit (%): Not Applicable	Upper Explosive Limit (%): Not Applicable	Autoignition Temp (°C): Not Applicable
Decomposition Temp (°C): Not Available	State: Liquid	Viscosity: Not Available

Material	Value
log Kow	0.76-0.83

## Section 10 - CHEMICAL STABILITY

### CONDITIONS CONTRIBUTING TO INSTABILITY

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

For incompatible materials - refer to Section 7 - Handling and Storage.

## Section 11 - TOXICOLOGICAL INFORMATION

### POTENTIAL HEALTH EFFECTS

#### ACUTE HEALTH EFFECTS

##### SWALLOWED

■ 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.

Taken by mouth, isothiazolinones have moderate to high toxicity. The major signs of toxicity are severe stomach irritation, lethargy, and inco-ordination.

Severe acute exposure to ethylene glycol monobutyl ether, by ingestion, may cause kidney damage, haemoglobinuria, (blood in urine) and is potentially fatal.

##### EYE

■ Solutions containing isothiazolinones may damage the mucous membranes and cornea. Animal testing showed very low concentrations (under 0.1%) did not cause irritation, while higher levels (3-5.5%) produced severe irritation and damage to the eye. Symptoms included clouding of the cornea and eye swelling.

When instilled in rabbit eyes ethylene glycol monobutyl ether produced pain, conjunctival irritation, and transient corneal injury.

There is evidence that material may produce eye irritation in some persons and produce eye damage 24 hours or more after instillation. Severe inflammation may be expected with pain. There may be damage to the cornea. Unless treatment is prompt and adequate there may be permanent loss of vision. Conjunctivitis can occur following repeated exposure.

##### SKIN

■ Skin contact with the material may be harmful; systemic effects may result following absorption.

The material may cause mild but significant inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering.

Solutions of isothiazolinones may be irritating or even damaging to the skin, depending on concentration. A concentration of over 0.1% can irritate, and over 0.5% can cause severe irritation.

Open cuts, abraded or irritated skin should not be exposed to this material.

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.

Ethylene glycol monobutyl ether (2-butoxyethanol) penetrates the skin easily and toxic effects via this route may be more likely than by inhalation. Percutaneous uptake rate in the guinea pig was estimated to be 0.25 umole/min/cm<sup>2</sup>.

##### INHALED

■ Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful.

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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.

Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo.

Ethylene glycol monobutyl ether (2-butoxyethanol) and its metabolite butoxyacetic acid are haemolytic agents, causing red blood cell destruction.

On the basis of industrial experience and volunteer short-term exposure humans are shown to be less susceptible than experimental animals to exposure. In 8-hour exposures at concentrations of 200 or 100 ppm no objective effects were seen other than raised urinary excretion of the metabolite butoxyacetic acid. No increased osmotic fragility of the red blood cell is observed. Subjectively these concentrations were uncomfortable with mild eye, nose and throat irritation occurring. No clinical signs of adverse effects nor subjective complaints were produced when male volunteers were exposed for 2 hours to 20 ppm during light physical exercise. Other studies have established that the most sensitive indicators of toxic effect observed from many of the glycol ethers is an increase in erythrocyte osmotic fragility in rats. This appears to be related to the development of haemoglobinuria at higher exposure levels.

## CHRONIC HEALTH EFFECTS

■ Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population.

Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.

There is some evidence from animal testing that exposure to this material may result in toxic effects to the unborn baby.

Based on experience with similar materials, there is a possibility that exposure to the material may reduce fertility in humans at levels which do not cause other toxic effects.

The isothiazolinones are known contact sensitizers. Sensitization is more likely with the chlorinated species as opposed to the non-chlorinated species. Risk of sensitization depends on how contact occurs – it is higher when the skin has been damaged. Skin specialist studies have shown sensitization has occurred with concentrations of 0.02% or less, and allergic reactions can occur in sensitized people with even lower concentrations. There is immune cross reaction between chlorinated isothiazolinones, but not between the non-chlorinated species or between non-chlorinated and chlorinated species. More experience is needed before conclusion of the safety of non-chlorinated species can be made.

There are conflicting reports in the literature, but isothiazolinones have been reported to cause mutations in certain bacteria. This effect has not been shown to occur in mammal cells. Animal testing showed no reproductive or tumour-inducing effects.

There has been concern that this material can cause cancer or mutations, but there is not enough data to make an assessment.

Ethylene glycol esters and their ethers cause wasting of the testicles, reproductive changes, infertility and changes to kidney function. Shorter chain compounds are more dangerous. They are also associated with the formation of stones in the urine.

## TOXICITY AND IRRITATION

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

■ Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

### For ethylene glycol monoalkyl ethers and their acetates (EGMAEs):

Typical members of this category are ethylene glycol propylene ether (EGPE), ethylene glycol butyl ether (EGBE) and ethylene glycol hexyl ether (EGHE) and their acetates

EGMAEs are substrates for alcohol dehydrogenase isozyme ADH-3, which catalyzes the conversion of their terminal alcohols to aldehydes (which are transient metabolites). Further, rapid conversion of the aldehydes by aldehyde dehydrogenase produces alkoxyacetic acids, which are the predominant urinary metabolites of mono substituted glycol ethers.

Acute Toxicity: Oral LD50 values in rats for all category members range from 739 (EGHE) to 3089 mg/kg bw (EGPE), with values increasing with decreasing molecular weight. Four to six hour acute inhalation toxicity studies were conducted for these chemicals in rats at the highest vapour concentrations practically achievable. Values range from LC0 > 85 ppm (508 mg/m<sup>3</sup>) for EGHE, LC50 > 400ppm (2620 mg/m<sup>3</sup>) for EGBEA to LC50 > 2132 ppm (9061 mg/m<sup>3</sup>) for EGPE. No lethality was observed for any of these materials under these conditions. Dermal LD50 values in rabbits range from 435 mg/kg bw (EGBE) to 1500 mg/kg bw (EGBEA). Overall these category members can be considered to be of low to moderate acute toxicity. All category members cause reversible irritation to skin and eyes, with EGBEA less irritating and EGHE more irritating than the other category members. EGPE and EGBE are not sensitizers in experimental animals or humans. Signs of acute toxicity in rats, mice and rabbits are consistent with haemolysis (with the exception of EGHE) and non-specific CNS depression typical of organic solvents in general. Alkoxyacetic acid metabolites, propoxyacetic acid (PAA) and butoxyacetic acid (BAA), are responsible for the red blood cell hemolysis. Signs of toxicity in humans deliberately ingesting cleaning fluids containing 9-22% EGBE are similar to those of rats, with the exception of haemolysis. Although decreased blood haemoglobin and/or haemoglobinuria were observed in some of the human cases, it is not clear if this was due to haemolysis or haemodilution as a result of administration of large volumes of fluid. Red blood cells of humans are many-fold more resistant to toxicity from EGPE and EGBE in vitro than those of rats.

Repeat dose toxicity: The fact that the NOAEL for repeated dose toxicity of EGBE is less than that of EGPE is consistent with red blood cells being more sensitive to EGBE than EGPE. Blood from mice, rats, hamsters, rabbits and baboons were sensitive to the effects of BAA in vitro and displayed similar responses, which included erythrocyte swelling (increased haematocrit and mean corpuscular hemoglobin), followed by hemolysis. Blood from humans, pigs, dogs, cats, and guinea pigs was less sensitive to haemolysis by BAA in vitro.

Mutagenicity: In the absence and presence of metabolic activation, EGBE tested negative for mutagenicity in Ames tests conducted in *S. typhimurium* strains TA97, TA98, TA100, TA1535 and TA1537 and EGHE tested negative in strains TA98, TA100, TA1535, TA1537 and TA1538. In vitro cytogenetic and sister chromatid exchange assays with EGBE and EGHE in Chinese

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Hamster Ovary Cells with and without metabolic activation and in vivo micronucleus tests with EGBE in rats and mice were negative, indicating that these glycol ethers are not genotoxic.

Carcinogenicity: In a 2-year inhalation chronic toxicity and carcinogenicity study with EGBE in rats and mice a significant increase in the incidence of liver haemangiosarcomas was seen in male mice and forestomach tumours in female mice. It was decided that based on the mode of action data available, there was no significant hazard for human carcinogenicity

Reproductive and developmental toxicity. The results of reproductive and developmental toxicity studies indicate that the glycol ethers in this category are not selectively toxic to the reproductive system or developing fetus, developmental toxicity is secondary to maternal toxicity. The repeated dose toxicity studies in which reproductive organs were examined indicate that the members of this category are not associated with toxicity to reproductive organs (including the testes).

Results of the developmental toxicity studies conducted via inhalation exposures during gestation periods on EGPE (rabbits - 125, 250, 500 ppm or 531, 1062, or 2125 mg/m<sup>3</sup> and rats - 100, 200, 300, 400 ppm or 425, 850, 1275, or 1700 mg/m<sup>3</sup>), EGBE (rat and rabbit - 25, 50, 100, 200 ppm or 121, 241, 483, or 966 mg/m<sup>3</sup>), and EGHE (rat and rabbit - 20.8, 41.4, 79.2 ppm or 124, 248, or 474 mg/m<sup>3</sup>) indicate that the members of the category are not teratogenic.

The NOAELs for developmental toxicity are greater than 500 ppm or 2125 mg/m<sup>3</sup> (rabbit-EGPE), 100 ppm or 425 mg/m<sup>3</sup> (rat-EGPE), 50 ppm or 241 mg/m<sup>3</sup> (rat EGBE) and 100 ppm or 483 mg/m<sup>3</sup> (rabbit EGBE) and greater than 79.2 ppm or 474 mg/m<sup>3</sup> (rat and rabbit-EGHE).

Exposure of pregnant rats to ethylene glycol monobutyl ether (2-butoxyethanol) at 100 ppm or rabbits at 200 ppm during organogenesis resulted in maternal toxicity and embryotoxicity including a decreased number of viable implantations per litter. Slight foetotoxicity in the form of poorly ossified or unossified skeletal elements was also apparent in rats. Teratogenic effects were not observed in other species.

At least one researcher has stated that the reproductive effects were less than that of other monoalkyl ethers of ethylene glycol.

Chronic exposure may cause anaemia, macrocytosis, abnormally large red cells and abnormal red cell fragility.

Exposure of male and female rats and mice for 14 weeks to 2 years produced a regenerative haemolytic anaemia and subsequent effects on the haemopoietic system in rats and mice. In addition, 2-butoxyethanol exposures caused increases in the incidence of neoplasms and nonneoplastic lesions (1). The occurrence of the anaemia was concentration-dependent and more pronounced in rats and females. In this study it was proposed that 2-butoxyethanol at concentrations of 500 ppm and greater produced an acute disseminated thrombosis and bone infarction in male and female rats as a result of severe acute haemolysis and reduced deformability of erythrocytes or through anoxic damage to endothelial cells that compromise blood flow. In two-year studies, 2-butoxyethanol continued to affect circulating erythroid mass, inducing a responsive anaemia. Rats showed a marginal increase in the incidence of benign or malignant pheochromocytomas (combined) of the adrenal gland. In mice, 2-butoxyethanol exposure resulted in a concentration dependent increase in the incidence of squamous cell papilloma or carcinoma of the forestomach. It was hypothesised that exposure-induced irritation produced inflammatory and hyperplastic effects in the forestomach and that the neoplasia were associated with a continuation of the injury/ degeneration process. Exposure also produced a concentration - dependent increase in the incidence of haemangiosarcoma of the liver of male mice and hepatocellular carcinoma.

1: NTP Toxicology Program Technical report Series 484, March 2000.

## ETHYLENE GLYCOL MONOBUTYL ETHER:

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

### TOXICITY

Oral (rat) LD50: 470 mg/kg

Dermal (rabbit) LD50: 220 mg/kg

Inhalation (human) TCLo: 100 ppm

Inhalation (human) TCLo: 195 ppm/8h

Inhalation (Rat) LC50: 450 ppm \*

### IRRITATION

Skin (rabbit): 500 mg, open; Mild

Eye (rabbit): 100 mg/24h-Moderate

Eye (rabbit): 100 mg SEVERE

\* [Union Carbide]

■ The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

For ethylene glycol:

Ethylene glycol is quickly and extensively absorbed through the gastrointestinal tract. Limited information suggests that it is also absorbed through the respiratory tract; dermal absorption is apparently slow. Following absorption, ethylene glycol is distributed throughout the body according to total body water. In most mammalian species, including humans, ethylene glycol is initially metabolised by alcohol.

dehydrogenase to form glycolaldehyde, which is rapidly converted to glycolic acid and glyoxal by aldehyde oxidase and aldehyde dehydrogenase. These metabolites are oxidised to glyoxylate; glyoxylate may be further metabolised to formic acid, oxalic acid, and glycine. Breakdown of both glycine and formic acid can generate CO<sub>2</sub>, which is one of the major elimination products of ethylene glycol. In addition to exhaled CO<sub>2</sub>, ethylene glycol is eliminated in the urine as both the parent compound and glycolic acid. Elimination of ethylene glycol from the plasma in both humans and laboratory animals is rapid after oral exposure; elimination half-lives are in the range of 1-4 hours in most species tested.

Respiratory Effects. Respiratory system involvement occurs 12-24 hours after ingestion of sufficient amounts of ethylene glycol and is considered to be part of a second stage in ethylene glycol poisoning

The symptoms include hyperventilation, shallow rapid breathing, and generalized pulmonary edema with calcium oxalate crystals occasionally present in the lung parenchyma. Respiratory system involvement appears to be dose-dependent and occurs concomitantly with cardiovascular changes. Pulmonary infiltrates and other changes compatible with adult respiratory distress syndrome (ARDS) may characterise the second stage of ethylene glycol poisoning. Pulmonary oedema can be secondary to cardiac failure, ARDS, or aspiration of gastric

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**Cardiovascular Effects.** Cardiovascular system involvement in humans occurs at the same time as respiratory system involvement, during the second phase of oral ethylene glycol poisoning, which is 12- 24 hours after acute exposure. The symptoms of cardiac involvement include tachycardia, ventricular gallop

Nevertheless, circulatory disturbances are a rare occurrence, having been reported in only 8 of 36 severely poisoned cases. Therefore, it appears that acute exposure to high levels of ethylene glycol can cause serious cardiovascular effects in humans. The effects of a long-term, low-dose exposure are unknown.

**Gastrointestinal Effects.** Nausea, vomiting with or without blood, pyrosis, and abdominal cramping and pain are common early effects of acute ethylene glycol ingestion. Acute effects of ethylene glycol ingestion in one patient included intermittent diarrhea and abdominal pain, which were attributed to mild colonic ischaemia; severe abdominal pain secondary to colonic stricture and perforation developed 3 months after ingestion, and histology of the resected colon showed birefringent crystals highly suggestive of oxalate deposition.

**Musculoskeletal Effects.** Reported musculoskeletal effects in cases of acute ethylene glycol poisoning have included diffuse muscle tenderness and myalgias associated with elevated serum creatinine phosphokinase levels, and myoclonic jerks and tetanic contractions associated with hypocalcaemia.

**Hepatic Effects.** Central hydropic or fatty degeneration, parenchymal necrosis, and calcium oxalate crystals in the liver have been observed at autopsy in cases of people who died following acute ingestion of ethylene glycol.

**Renal Effects.** Adverse renal effects after ethylene glycol ingestion in humans can be observed during the third stage of ethylene glycol toxicity 24-72 hours after acute exposure. The hallmark of renal toxicity is the presence of birefringent calcium oxalate monohydrate crystals deposited in renal tubules and their presence in urine after ingestion of relatively high amounts of ethylene glycol. Other signs of nephrotoxicity can include tubular cell degeneration and necrosis and tubular interstitial inflammation. If untreated, the degree of renal damage caused by high doses of ethylene glycol progresses and leads to haematuria, proteinuria, decreased renal function, oliguria, anuria, and ultimately renal failure. These changes in the kidney are linked to acute tubular necrosis

contents. Symptoms related to acidosis such as hyperpnea and tachypnea are frequently observed; however, major respiratory morbidities such as pulmonary edema and bronchopneumonia are relatively rare and usually only observed with extreme poisoning (e.g., in only 5 of 36 severely poisoned cases).

and cardiac enlargement. Ingestion of ethylene glycol may also cause hypertension or hypotension, which may progress to cardiogenic shock. Myocarditis has been observed at autopsy in cases of people who died following acute ingestion of ethylene glycol. As in the case of respiratory effects, cardiovascular involvement occurs with ingestion of relatively high doses of ethylene glycol.

but normal or near normal renal function can return with adequate supportive therapy.

**Metabolic Effects.** One of the major adverse effects following acute oral exposure of humans to ethylene glycol involves metabolic changes. These changes occur as early as 12 hours after ethylene glycol exposure. Ethylene glycol intoxication is accompanied by metabolic acidosis which is manifested by decreased pH and bicarbonate content of serum and other bodily fluids caused by accumulation of excess glycolic acid. Other characteristic metabolic effects of ethylene glycol poisoning are increased serum anion gap, increased osmolal gap, and hypocalcaemia. Serum anion gap is calculated from concentrations of sodium, chloride, and bicarbonate, is normally 12-16 mM, and is typically elevated after ethylene glycol ingestion due to increases in unmeasured metabolite anions (mainly glycolate).

**Neurological Effects:** Adverse neurological reactions are among the first symptoms to appear in humans after ethylene glycol ingestion. These early neurotoxic effects are also the only symptoms attributed to unmetabolised ethylene glycol. Together with metabolic changes, they occur during the period of 30 minutes to 12 hours after exposure and are considered to be part of the first stage in ethylene glycol intoxication. In cases of acute intoxication, in which a large amount of ethylene glycol is ingested over a very short time period, there is a progression of neurological manifestations which, if not treated, may lead to generalized seizures and coma. Ataxia, slurred speech, confusion, and somnolence are common during the initial phase of ethylene glycol intoxication as are irritation, restlessness, and disorientation. Cerebral edema and crystalline deposits of calcium oxalate in the walls of small blood vessels in the brain were found at autopsy in people who died after acute ethylene glycol ingestion.

Effects on cranial nerves appear late (generally 5-20 days post-ingestion), are relatively rare, and according to some investigators constitute a fourth, late cerebral phase in ethylene glycol intoxication. Clinical manifestations of the cranial neuropathy commonly involve lower motor neurons of the facial and bulbar nerves and are reversible over many months.

**Reproductive Effects:** Reproductive function after intermediate-duration oral exposure to ethylene glycol has been tested in three multi-generation studies (one in rats and two in mice) and several shorter studies (15-20 days in rats and mice). In these studies, effects on fertility, foetal viability, and male reproductive organs were observed in mice, while the only effect in rats was an increase in gestational duration.

**Developmental Effects:** The developmental toxicity of ethylene glycol has been assessed in several acute-duration studies using mice, rats, and rabbits. Available studies indicate that malformations, especially skeletal malformations occur in both mice and rats exposed during gestation; mice are apparently more sensitive to the developmental effects of ethylene glycol. Other evidence of embryotoxicity in laboratory animals exposed to ethylene glycol exposure includes reduction in foetal body weight.

**Cancer:** No studies were located regarding cancer effects in humans or animals after dermal exposure to ethylene glycol.

**Genotoxic Effects:** Studies in humans have not addressed the genotoxic effects of ethylene glycol. However, available in vivo and in vitro laboratory studies provide consistently negative genotoxicity results for ethylene glycol.

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For ethylene glycol monoalkyl ethers and their acetates (EGMAEs):

Typical members of this category are ethylene glycol propylene ether (EGPE), ethylene glycol butyl ether (EGBE) and ethylene glycol hexyl ether (EGHE) and their acetates

EGMAEs are substrates for alcohol dehydrogenase isozyme ADH-3, which catalyzes the conversion of their terminal alcohols to aldehydes (which are transient metabolites). Further, rapid conversion of the aldehydes by aldehyde dehydrogenase produces alkoxyacetic acids, which are the predominant urinary metabolites of mono substituted glycol ethers.

Acute Toxicity: Oral LD50 values in rats for all category members range from 739 (EGHE) to 3089 mg/kg bw (EGPE), with values increasing with decreasing molecular weight. Four to six hour acute inhalation toxicity studies were conducted for these chemicals in rats at the highest vapour concentrations practically achievable. Values range from LC0 > 85 ppm (508 mg/m<sup>3</sup>) for EGHE, LC50 > 400ppm (2620 mg/m<sup>3</sup>) for EGBEA to LC50 > 2132 ppm (9061 mg/m<sup>3</sup>) for EGPE. No lethality was observed for any of these materials under these conditions. Dermal LD50 values in rabbits range from 435 mg/kg bw (EGBE) to 1500 mg/kg bw (EGBEA). Overall these category members can be considered to be of low to moderate acute toxicity. All category members cause reversible irritation to skin and eyes, with EGBEA less irritating and EGHE more irritating than the other category members. EGPE and EGBE are not sensitizers in experimental animals or humans. Signs of acute toxicity in rats, mice and rabbits are consistent with haemolysis (with the exception of EGHE) and non-specific CNS depression typical of organic solvents in general. Alkoxyacetic acid metabolites, propoxyacetic acid (PAA) and butoxyacetic acid (BAA), are responsible for the red blood cell hemolysis. Signs of toxicity in humans deliberately ingesting cleaning fluids containing 9-22% EGBE are similar to those of rats, with the exception of haemolysis. Although decreased blood haemoglobin and/or haemoglobinuria were observed in some of the human cases, it is not clear if this was due to haemolysis or haemodilution as a result of administration of large volumes of fluid. Red blood cells of humans are many-fold more resistant to toxicity from EGPE and EGBE in vitro than those of rats.

Repeat dose toxicity: The fact that the NOAEL for repeated dose toxicity of EGBE is less than that of EGPE is consistent with red blood cells being more sensitive to EGBE than EGPE. Blood from mice, rats, hamsters, rabbits and baboons were sensitive to the effects of BAA in vitro and displayed similar responses, which included erythrocyte swelling (increased haematocrit and mean corpuscular hemoglobin), followed by hemolysis. Blood from humans, pigs, dogs, cats, and guinea pigs was less sensitive to haemolysis by BAA in vitro.

Mutagenicity: In the absence and presence of metabolic activation, EGBE tested negative for mutagenicity in Ames tests conducted in *S. typhimurium* strains TA97, TA98, TA100, TA1535 and TA1537 and EGHE tested negative in strains TA98, TA100, TA1535, TA1537 and TA1538. In vitro cytogenetic and sister chromatid exchange assays with EGBE and EGHE in Chinese Hamster Ovary Cells with and without metabolic activation and in vivo micronucleus tests with EGBE in rats and mice were negative, indicating that these glycol ethers are not genotoxic.

Carcinogenicity: In a 2-year inhalation chronic toxicity and carcinogenicity study with EGBE in rats and mice a significant increase in the incidence of liver haemangiosarcomas was seen in male mice and forestomach tumours in female mice. It was decided that based on the mode of action data available, there was no significant hazard for human carcinogenicity

Reproductive and developmental toxicity. The results of reproductive and developmental toxicity studies indicate that the glycol ethers in this category are not selectively toxic to the reproductive system or developing fetus, developmental toxicity is secondary to maternal toxicity. The repeated dose toxicity studies in which reproductive organs were examined indicate that the members of this category are not associated with toxicity to reproductive organs (including the testes).

Results of the developmental toxicity studies conducted via inhalation exposures during gestation periods on

EGPE (rabbits - 125, 250, 500 ppm or 531, 1062, or 2125 mg/m<sup>3</sup> and rats - 100, 200, 300, 400 ppm or 425, 850, 1275, or 1700 mg/m<sup>3</sup>), EGBE (rat and rabbit - 25, 50, 100, 200 ppm or 121, 241, 483, or 966 mg/m<sup>3</sup>), and EGHE (rat and rabbit - 20.8, 41.4, 79.2 ppm or 124, 248, or 474 mg/m<sup>3</sup>) indicate that the members of the category are not teratogenic.

The NOAELs for developmental toxicity are greater than 500 ppm or 2125 mg/m<sup>3</sup> (rabbit-EGPE), 100 ppm or 425 mg/m<sup>3</sup> (rat-EGPE), 50 ppm or 241 mg/m<sup>3</sup> (rat EGBE) and 100 ppm or 483 mg/m<sup>3</sup> (rabbit EGBE) and greater than 79.2 ppm or 474 mg/m<sup>3</sup> (rat and rabbit-EGHE).

Exposure of pregnant rats to ethylene glycol monobutyl ether (2-butoxyethanol) at 100 ppm or rabbits at 200 ppm during organogenesis resulted in maternal toxicity and embryotoxicity including a decreased number of viable implantations per litter. Slight foetotoxicity in the form of poorly ossified or unossified skeletal elements was also apparent in rats. Teratogenic effects were not observed in other species.

At least one researcher has stated that the reproductive effects were less than that of other monoalkyl ethers of ethylene glycol.

Chronic exposure may cause anaemia, macrocytosis, abnormally large red cells and abnormal red cell fragility.

Exposure of male and female rats and mice for 14 weeks to 2 years produced a regenerative haemolytic anaemia and subsequent effects on the haemopoietic system in rats and mice. In addition, 2-butoxyethanol exposures caused increases in the incidence of neoplasms and nonneoplastic lesions (1). The occurrence of the anaemia was concentration-dependent and more pronounced in rats and females. In this study it was proposed that 2-butoxyethanol at concentrations of 500 ppm and greater produced an acute disseminated thrombosis and bone infarction in male and female rats as a result of severe acute haemolysis and reduced deformability of erythrocytes or through anoxic damage to endothelial cells that compromise blood flow. In two-year studies, 2-butoxyethanol continued to affect circulating erythroid mass, inducing a responsive anaemia. Rats showed a marginal increase in the incidence of benign or malignant pheochromocytomas (combined) of the adrenal gland. In mice, 2-butoxyethanol exposure resulted in a concentration dependent increase in the incidence of squamous cell papilloma or carcinoma of the forestomach. It was hypothesised that exposure-induced irritation produced inflammatory and hyperplastic effects in the forestomach and that the neoplasia were associated with a continuation of the injury/ degeneration process. Exposure also produced a concentration -dependent increase in the incidence of haemangiosarcoma of the liver of male mice and hepatocellular carcinoma.

1: NTP Toxicology Program Technical report Series 484, March 2000.

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NOTE: Changes in kidney, liver, spleen and lungs are observed in animals exposed to high concentrations of this substance by all routes.

## ISOTHIAZOLINONES, MIXED:

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

Oral (rat) LD50: 53 mg/kg

Nil Reported

■ Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

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.

## CARCINOGEN

2-Butoxyethanol International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs Group 3

## SENSITISER

isothiazolinones,  
mixed

Australia Final Report on Hazard  
Classification of Common Skin Sensitisers

Recommended for Hazard  
Classification (R43)

Currently listed in Annex 1,  
Directive 67/548/EEC

## SKIN

ethylene glycol monobutyl ether

Australia Exposure Standards - Skin

Notes Sk

## Section 12 - ECOLOGICAL INFORMATION

Refer to data for ingredients, which follows:

DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION:

ISOTHIAZOLINONES, MIXED:

■ 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.

DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION:

ISOTHIAZOLINONES, MIXED:

■ The isothiazolinones are very toxic to marine organisms (fish, *Daphnia magna* and algae)

The high water solubility and low log Kow values of several chlorinated and non-chlorinated indicate a low potential for bioaccumulation.

Studies of 5-chloro-2-methyl-4-isothiazolin-3-one (CMI) in bluegill sunfish (*Lepomis macrochirus*) show BCF values of 102, 114 and 67 at nominal concentrations of 0.02, 0.12 and 0.8 mg/l. The BCF for 2-methyl-4-isothiazolin-3-one (MI) was determined at 2.3 at a nominal concentration of 0.12 mg/l

Primary biodegradation of MI and CMI occurred with half-lives of less than 24 hours in aerobic and anoxic sediments, and within a period of less than one week the parent compounds were depleted to very low levels that could not be clearly distinguished from analytical artifacts. The ultimate aerobic biodegradability of both MI and CMI attained levels of > 55% within 29 days. Furthermore, the proposed metabolites of MI and CMI are considered to have a low aquatic toxicity on the basis of QSAR estimates and the measured toxicity of the structurally related N-(n-octyl) malonic acid.

DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION:

ISOTHIAZOLINONES, MIXED:

ETHYLENE GLYCOL MONOBUTYL ETHER:

■ DO NOT discharge into sewer or waterways.

DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION:

ETHYLENE GLYCOL MONOBUTYL ETHER:

■ For ethylene glycol monoalkyl ethers and their acetates:

Members of this category include ethylene glycol propyl ether (EGPE), ethylene glycol butyl ether (EGBE) and ethylene glycol hexyl ether (EGHE)

Environmental fate:

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The ethers, like other simple glycol ethers possess no functional groups that are readily subject to hydrolysis in the presence of waters. The acetates possess an ester group that hydrolyses in neutral ambient water under abiotic conditions. Level III fugacity modeling indicates that category members, when released to air and water, will partition predominately to water and, to a lesser extent, to air and soil. Estimates of soil and sediment partition coefficients (Kocs ranging from 1- 10) suggest that category members would exhibit high soil mobility. Estimated bioconcentration factors (log BCF) range from 0.463 to 0.732. Biodegradation studies indicate that all category members are readily biodegradable. The physical chemistry and environmental fate properties indicate that category members will not persist or bioconcentrate in the environment.

#### Ecotoxicity:

Glycol ether acetates do not hydrolyse rapidly into their corresponding glycol ethers in water under environmental conditions. The LC50 or EC50 values for EGHE are lower than those for EGPE and EGBE (which have shorter chain lengths and lower log Kow values). Overall, the LC50 values for the glycol ethers in aquatic species range from 94 to > 5000 mg/L. For EGHE, the 96-hour LC50 for *Brachydanio rerio* (zebra fish) is between 94 and mg/L, the 48-hour EC50 for *Daphnia magna* was 145 mg/L and the 72-hour EC50 values for biomass and growth rate of algae (*Scenedesmus subspicatus*) were 98 and 198 mg/L, respectively. LC50/EC50 values for EGPE and EGBE in aquatic species are 835 mg/l or greater.

Aquatic toxicity data for EGBEA show a 96-hour LC50 of 28.3 mg/L for rainbow trout (*Oncorhynchus mykiss*), a 48-hour LC50 of 37-143 mg/L for *Daphnia magna*, a 72-hour EC50 of greater than 500 mg/L for biomass or growth rate of algae (*Scenedesmus subspicatus* and *Pseudokirchneriella subcapitata*, respectively), and a 7-day EC10 of 30.4 mg/L and a NOEC of 16.4 mg/L for reproduction in *Ceriodaphnia dubia*.

#### DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION:

##### ETHYLENE GLYCOL MONOBUTYL ETHER:

###### ■ For glycol ethers:

###### Environmental fate:

Ether groups are generally stable to hydrolysis in water under neutral conditions and ambient temperatures. OECD guideline studies indicate ready biodegradability for several glycol ethers although higher molecular weight species seem to biodegrade at a slower rate. No glycol ethers that have been tested demonstrate marked resistance to biodegradative processes. Upon release to the atmosphere by evaporation, high boiling glycol ethers are estimated to undergo photodegradation (atmospheric half lives = 2.4-2.5 hr). When released to water, glycol ethers undergo biodegradation (typically 47-92% after 8-21 days) and have a low potential for bioaccumulation (log Kow ranges from -1.73 to +0.51).

#### Ecotoxicity:

Aquatic toxicity data indicate that the tri- and tetra ethylene glycol ethers are "practically non-toxic" to aquatic species. No major differences are observed in the order of toxicity going from the methyl- to the butyl ethers.

Glycols exert a high oxygen demand for decomposition and once released to th environments cause the death of aquatic organisms if dissolved oxygen is depleted.

#### DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION:

##### ISOTHIAZOLINONES, MIXED:

###### ■ Very toxic to aquatic organisms.

#### DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION:

##### ETHYLENE GLYCOL MONOBUTYL ETHER:

■ Fish LC50 (96hr.) (mg/l):	1490
■ BCF<100:	0.4
■ log Kow (Prager 1995):	0.83
■ log Kow (Sangster 1997):	0.8
■ Half- life Soil - High (hours):	672
■ Half- life Soil - Low (hours):	168
■ Half- life Air - High (hours):	32.8
■ Half- life Air - Low (hours):	3.28
■ Half- life Surface water - High (hours):	672
■ Half- life Surface water - Low (hours):	168
■ Half- life Ground water - High (hours):	1344
■ Half- life Ground water - Low (hours):	336
■ Aqueous biodegradation - Aerobic - High (hours):	672
■ Aqueous biodegradation - Aerobic - Low (hours):	168
■ Aqueous biodegradation - Anaerobic - High (hours):	2688
■ Aqueous biodegradation - Anaerobic - Low (hours):	672
■ Photooxidation half- life air - High (hours):	32.8
■ Photooxidation half- life air - Low (hours):	3.28
■ Fish LC50 (96hr.) (mg/l):	1250- 1650
■ <i>Daphnia magna</i> EC50 (48hr.) (mg/l):	600- 1000

log Kow: 0.76-0.83

Koc: 67

Half-life (hr) air: 17

Henry's atm m<sup>3</sup>/mol: 2.08E-08

BOD 5 if unstated: 0.71

COD: 2.2

# DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION

Hazard Alert Code:  
MODERATE

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Log BCF: 0.4  
Fish LC50 (24 h): 983-1650 mg/L  
Fish LC50 (96 h): fathead minnow 1700 mg/L \*\*  
Invertebrate toxicity:  
cell mult. inhib.91-900mg/L  
(Daphnia) 48h LC50: >1000 mg/L \*\*  
Bioaccumulation: not sig  
Effects on algae and plankton: cell mult. inhib.35-900mg/L  
Degradation Biological: rapid  
processes Abiotic: no hydrol&photon, RxnOH\* \*\* [Union Carbide]  
ISOTHIAZOLINONES, MIXED:

Marine Pollutant: Not Determined  
/53#67t1

## Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
DC2700 Alcoless 4.8 Fountain Solution ethylene glycol monobutyl ether isothiazolinones, mixed	LOW	No data	LOW	HIGH

## Section 13 - DISPOSAL CONSIDERATIONS

- - Containers may still present a chemical hazard/ danger when empty.
  - Return to supplier for reuse/ recycling if possible.
- Otherwise:
- 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 MSDS and observe all notices pertaining to the product.
- Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.
- A Hierarchy of Controls seems to be common - the user should investigate:
- Reduction,
  - Reuse
  - Recycling
  - Disposal (if all else fails)
- This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.
- DO NOT allow wash water from cleaning or process equipment to enter drains.
  - It may be necessary to collect all wash water for treatment before disposal.
  - In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
  - Where in doubt contact the responsible authority.
  - 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.
  - Dispose of 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.

## Section 14 - TRANSPORTATION INFORMATION

HAZCHEM: None (ADG7)  
NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS: ADG7, UN, IATA, IMDG

## Section 15 - REGULATORY INFORMATION

# DC2700 ALCOLESS 4.8 FOUNTAIN SOLUTION

Hazard Alert Code:  
MODERATE

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Chemwatch 21-9356

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CD 2009/3

## POISONS SCHEDULE

S6

## REGULATIONS

Regulations for ingredients

**ethylene glycol monobutyl ether (CAS: 111-76-2) is found on the following regulatory lists;**

"Australia Exposure Standards", "Australia Hazardous Substances", "Australia High Volume Industrial Chemical List (HVICL)", "Australia Inventory of Chemical Substances (AICS)", "IMO MARPOL 73/78 (Annex II) - List of Other Liquid Substances", "International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs", "OECD Representative List of High Production Volume (HPV) Chemicals"

**isothiazolinones, mixed (CAS: 55965-84-9) is found on the following regulatory lists;**

"Australia Final Report on Hazard Classification of Common Skin Sensitisers", "Australia Hazardous Substances"

**No data for DC2700 Alcoless 4.8 Fountain Solution (CW: 21-9356)**

## Section 16 - OTHER INFORMATION

### REPRODUCTIVE HEALTH GUIDELINES

Ingredient	ORG	UF	Endpoint	CR	Adeq TLV
ethylene glycol monobutyl ether	3.6 mg/m3	100	D	NA	-

■ These exposure guidelines have been derived from a screening level of risk assessment and should not be construed as unequivocally safe limits. ORGS represent an 8-hour time-weighted average unless specified otherwise.

CR = Cancer Risk/10000; UF = Uncertainty factor:

TLV believed to be adequate to protect reproductive health:

LOD: Limit of detection

Toxic endpoints have also been identified as:

D = Developmental; R = Reproductive; TC = Transplacental carcinogen

Jankovic J., Drake F.: A Screening Method for Occupational Reproductive

American Industrial Hygiene Association Journal 57: 641-649 (1996).

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

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

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

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

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