



## Granular Chlorine

POPS Group (The POPS Group Pty Ltd as Trustee for The Pool Shops Trust)

Chemwatch Hazard Alert Code: 3

Chemwatch: 11-32154

Version No: 2.1.1.1

Safety Data Sheet according to WHS and ADG requirements

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S.GHS.AUS.EN

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

#### Product Identifier

Product name	Granular Chlorine
Synonyms	Not Available
Proper shipping name	CALCIUM HYPOCHLORITE, HYDRATED or CALCIUM HYPOCHLORITE, HYDRATED MIXTURE, with not less than 5.5% but not more than 16% water
Other means of identification	Not Available

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

Relevant identified uses	Use according to manufacturer's directions. Swimming pool chemical, algaecide, biocide and oxidant.
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#### Details of the supplier of the safety data sheet

Registered company name	POPS Group (The POPS Group Pty Ltd as Trustee for The Pool Shops Trust)
Address	10-12 Cairns Street Loganholme QLD 4129 Australia
Telephone	+61 7 3209 7884
Fax	+61 7 3209 8635
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Email	<a href="mailto:office@poolpro.com.au">office@poolpro.com.au</a>

#### Emergency telephone number

Association / Organisation	IXOM
Emergency telephone numbers	+61 3 9663 2130 (International) (24 hours)
Other emergency telephone numbers	+61 1800 033 111

### SECTION 2 HAZARDS IDENTIFICATION

#### Classification of the substance or mixture

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

Poisons Schedule	S6
Classification [1]	Oxidizing Solid Category 2, Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 1B, Serious Eye Damage Category 1, Acute Aquatic Hazard Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

#### Label elements

Hazard pictogram(s)	
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SIGNAL WORD **DANGER**

#### Hazard statement(s)

H272	May intensify fire; oxidiser.
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H302	Harmful if swallowed.
H314	Causes severe skin burns and eye damage.
H400	Very toxic to aquatic life.
AUH031	Contact with acid liberates toxic gas.

#### Precautionary statement(s) Prevention

P210	Keep away from heat/sparks/open flames/hot surfaces. - No smoking.
P221	Take any precaution to avoid mixing with combustibles/organic material.
P260	Do not breathe dust/fume/gas/mist/vapours/spray.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P220	Keep/Store away from clothing/organic material/combustible materials.
P270	Do not eat, drink or smoke when using this product.
P273	Avoid release to the environment.

#### Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER or doctor/physician.
P370+P378	In case of fire: Use water jets for extinction.
P363	Wash contaminated clothing before reuse.
P391	Collect spillage.
P301+P312	IF SWALLOWED: Call a POISON CENTER or doctor/physician if you feel unwell.
P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.

#### Precautionary statement(s) Storage

P405	Store locked up.
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#### Precautionary statement(s) Disposal

P501	Dispose of contents/container in accordance with local regulations.
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### SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

#### Substances

See section below for composition of Mixtures

#### Mixtures

CAS No	%[weight]	Name
7778-54-3	>70	calcium hypochlorite, hydrated

### SECTION 4 FIRST AID MEASURES

#### Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <p>Immediately hold eyelids apart and flush the eye continuously with running water.</p> <p>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.</p> <p>Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.</p> <p>Transport to hospital or doctor without delay.</p> <p>Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</p>
Skin Contact	<p>If skin or hair contact occurs:</p> <p>Immediately flush body and clothes with large amounts of water, using safety shower if available.</p> <p>Quickly remove all contaminated clothing, including footwear.</p> <p>Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.</p> <p>Transport to hospital, or doctor.</p>
Inhalation	<p>If fumes or combustion products are inhaled remove from contaminated area.</p> <p>Lay patient down. Keep warm and rested.</p> <p>Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</p> <p>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.</p> <p>Transport to hospital, or doctor.</p> <p>If dust is inhaled, remove from contaminated area.</p> <p>Encourage patient to blow nose to ensure clear breathing passages.</p> <p>Ask patient to rinse mouth with water but to not drink water.</p> <p>Seek immediate medical attention.</p> <p>Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema.</p> <p>Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs).</p> <p>As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested.</p> <p>Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered.</p> <p><b>This must definitely be left to a doctor or person authorised by him/her.</b> (ICSC13719)</p>
Ingestion	<p>For advice, contact a Poisons Information Centre or a doctor at once.</p> <p>Urgent hospital treatment is likely to be needed.</p> <p><b>If swallowed do NOT induce vomiting.</b></p>

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.

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

For acute or repeated exposures to hypochlorite solutions:

Release of small amounts of hypochlorous acid and acid gases from the stomach following ingestion, is usually too low to cause damage but may be irritating to mucous membranes. Buffering with antacid may be helpful if discomfort is evident.  
 Evaluate as potential caustic exposure.  
 Decontaminate skin and eyes with copious saline irrigation. Check exposed eyes for corneal abrasions with fluorescein staining.  
 Emesis or lavage and catharsis may be indicated for mild caustic exposure.  
 Chlorine exposures require evaluation of acid/base and respiratory status.  
 Inhalation of vapours or mists may result in pulmonary oedema.

ELLENHORN and BARCELOUX: Medical Toxicology.

Excellent warning properties force rapid escape of personnel from chlorine vapour thus most inhalations are mild to moderate. If escape is not possible, exposure to high concentrations for a very short time can result in dyspnea, haemophysis and cyanosis with later complications being tracheobroncho-pneumonitis and pulmonary oedema. Oxygen, intermittent positive pressure breathing apparatus and aerosolised bronchodilators are of therapeutic value where chlorine inhalation has been light to moderate. Severe inhalation should result in hospitalisation and treatment for a respiratory emergency.

Any chlorine inhalation in an individual with compromised pulmonary function (COPD) should be regarded as a severe inhalation and a respiratory emergency. [CCINFO, Dow 1988]

Effects from exposure to chlorine gas include pulmonary oedema which may be delayed. Observation in hospital for 48 hours is recommended

Diagnosed asthmatics and those people suffering from certain types of chronic bronchitis should receive medical approval before being employed in occupations involving chlorine exposure.

If burn is present, treat as any thermal burn, after decontamination.

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

(ICSC24419/24421

## SECTION 5 FIREFIGHTING MEASURES

### Extinguishing media

FOR SMALL FIRE:

USE FLOODING QUANTITIES OF WATER.

**DO NOT use dry chemical, CO2, foam or halogenated-type extinguishers.**

FOR LARGE FIRE

Flood fire area with water from a protected position

### Special hazards arising from the substrate or mixture

<b>Fire Incompatibility</b>	Avoid storage with reducing agents. Avoid any contamination of this material as it is very reactive and any contamination is potentially hazardous
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### Advice for firefighters

<b>Fire Fighting</b>	Alert Fire Brigade and tell them location and nature of hazard. May be violently or explosively reactive. Wear full body protective clothing with breathing apparatus. Prevent, by any means available, spillage from entering drains or water courses. Fight fire from a safe distance, with adequate cover. Extinguishers should be used only by trained personnel. Use water delivered as a fine spray to control fire and cool adjacent area. <b>DO NOT</b> 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.
<b>Fire/Explosion Hazard</b>	Will not burn but increases intensity of fire. Heating may cause expansion or decomposition leading to violent rupture of containers. Heat affected containers remain hazardous. Contact with combustibles such as wood, paper, oil or finely divided metal may produce spontaneous combustion or violent decomposition. May emit irritating, poisonous or corrosive fumes. Decomposition may produce toxic fumes of: , hydrogen chloride
<b>HAZCHEM</b>	1W

## SECTION 6 ACCIDENTAL RELEASE MEASURES

### Personal precautions, protective equipment and emergency procedures

See section 8

### Environmental precautions

See section 12

### Methods and material for containment and cleaning up

<b>Minor Spills</b>	Clean up all spills immediately. No smoking, naked lights, ignition sources. Avoid all contact with any organic matter including fuel, solvents, sawdust, paper or cloth and other incompatible materials, as ignition may result. Avoid breathing dust or vapours and all contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Contain and absorb spill with dry sand, earth, inert material or vermiculite. <b>DO NOT use sawdust as fire may result.</b> Scoop up solid residues and seal in labelled drums for disposal. Neutralise/decontaminate area.
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<b>Major Spills</b>	<p>Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. May be violently or explosively reactive. Wear full body protective clothing with breathing apparatus. Prevent, by any means available, spillage from entering drains or water courses. No smoking, flames or ignition sources. Increase ventilation. Contain spill with sand, earth or other clean, inert materials. <b>NEVER USE</b> organic absorbents such as sawdust, paper or cloth. Use spark-free and explosion-proof equipment.</p>
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Personal Protective Equipment advice is contained in Section 8 of the SDS.

## SECTION 7 HANDLING AND STORAGE

### Precautions for safe handling

<b>Safe handling</b>	<p>Avoid personal contact and inhalation of dust, mist or vapours. Provide adequate ventilation. Always wear protective equipment and wash off any spillage from clothing. Keep material away from light, heat, flammables or combustibles. Keep cool, dry and away from incompatible materials. Avoid physical damage to containers. <b>DO NOT</b> repack or return unused portions to original containers. Withdraw only sufficient amounts for immediate use. Use only minimum quantity required. Avoid using solutions of peroxides in volatile solvents.</p>
<b>Other information</b>	<p>Store in original containers. Keep containers securely sealed as supplied. Store in a cool, well ventilated area. Keep dry. Store under cover and away from sunlight. Store away from flammable or combustible materials, debris and waste. Contact may cause fire or violent reaction. Store away from incompatible materials and foodstuff containers. <b>DO NOT stack on wooden floors or pallets.</b> Protect containers from physical damage. In addition, Goods of Class 5.1, packing group II should be: stored in piles so that the height of the pile does not exceed 1 metre the maximum quantity in a pile or building does not exceed 1000 tonnes unless the area is provided with automatic fire extinguishers the maximum height of a pile does not exceed 3 metres where the room is provided with automatic fire extinguishers or 2 meters if not. the minimum distance between piles is not less than 2 metres where the room is provided with automatic fire extinguishers or 3 meters if not. the minimum distance to walls is not less than 1 metre. <b>DO NOT store near acids, or oxidising agents</b></p>

### Conditions for safe storage, including any incompatibilities

<b>Suitable container</b>	<p>Liquid inorganic hypochlorites shall not be transported in unlined metal drums. Inner packagings shall be fitted with vented closures and plastics drums and carboys shall have vented closures or be performance tested to a minimum of 250 kPa. All non-vented packagings shall be filled so that the ullage is at least 10% at 21-25 deg.C. Vented packagings may be filled to an ullage not less than 5% at 21-25 deg.C, provided that this ullage does not result in leakage from, nor distortion of, the packaging. Glass container is suitable for laboratory quantities <b>DO NOT repack.</b> Use containers supplied by manufacturer only. For low viscosity materials Drums and jerricans must be of the non-removable head type. Where a can is to be used as an inner package, the can must have a screwed enclosure. For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids: Removable head packaging and cans with friction closures may be used. - Where combination packages are used, and the inner packages are of glass, there must be sufficient inert cushioning material in contact with inner and outer packages *. - In addition, where inner packagings are glass and contain liquids of packing group I and II there must be sufficient inert absorbent to absorb any spillage *. - * unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.  1kg, 2kg, 4kg, 10kg, 20kg, 40kg.</p>
<b>Storage incompatibility</b>	<p>Contact with acids produces toxic fumes Incidents involving interaction of active oxidants and reducing agents, either by design or accident, are usually very energetic and examples of so-called redox reactions. Contact with acids produces toxic fumes of chlorine Avoid any contamination of this material as it is very reactive and any contamination is potentially hazardous Avoid storage with reducing agents.</p>

## SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

### Control parameters

#### OCCUPATIONAL EXPOSURE LIMITS (OEL)


#### INGREDIENT DATA

Not Available

#### EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
calcium hypochlorite, hydrated	Calcium hypochlorite; (Calcium oxychloride)	2.6 mg/m3	28 mg/m3	170 mg/m3
Ingredient	Original IDLH	Revised IDLH		
calcium hypochlorite, hydrated	Not Available	Not Available		

### Exposure controls

<b>Appropriate engineering controls</b>	<p>Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.</p> <p>Employers may need to use multiple types of controls to prevent employee overexposure.</p> <p>Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.</p> <p>If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered.</p> <p>Such protection might consist of:</p> <p>(a): particle dust respirators, if necessary, combined with an absorption cartridge;</p> <p>(b): filter respirators with absorption cartridge or canister of the right type;</p> <p>(c): fresh-air hoods or masks.</p>
<b>Personal protection</b>	
<b>Eye and face protection</b>	<p>Chemical goggles.</p> <p>Full face shield may be required for supplementary but never for primary protection of eyes.</p> <p>Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. 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], [AS/NZS 1336 or national equivalent]</p>
<b>Skin protection</b>	See Hand protection below
<b>Hands/feet protection</b>	<p>Wear chemical protective gloves, e.g. PVC.</p> <p>Wear safety footwear or safety gumboots, e.g. Rubber</p> <p><b>NOTE:</b></p> <p>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.</p> <p>Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.</p> <p>When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.</p> <p><b>DO NOT wear cotton or cotton-backed gloves.</b></p> <p><b>DO NOT wear leather gloves.</b></p> <p>Promptly hose all spills off leather shoes or boots or ensure that such footwear is protected with PVC over-shoes.</p>
<b>Body protection</b>	See Other protection below
<b>Other protection</b>	<p>Overalls.</p> <p>PVC Apron.</p> <p>PVC protective suit may be required if exposure severe.</p> <p>Eyewash unit.</p> <p>Ensure there is ready access to a safety shower.</p> <p>Some plastic personal protective equipment (PPE) (e.g. gloves, aprons, overshoes) are not recommended as they may produce static electricity.</p> <p>For large scale or continuous use wear tight-weave non-static clothing (no metallic fasteners, cuffs or pockets).</p> <p>Non sparking safety or conductive footwear should be considered. Conductive footwear describes a boot or shoe with a sole made from a conductive compound chemically bound to the bottom components, for permanent control to electrically ground the foot an shall dissipate static electricity from the body to reduce the possibility of ignition of volatile compounds. Electrical resistance must range between 0 to 500,000 ohms. Conductive shoes should be stored in lockers close to the room in which they are worn. Personnel who have been issued conductive footwear should not wear them from their place of work to their homes and return.</p>

## Respiratory protection

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

Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.

The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).

Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.

Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.

Use approved positive flow mask if significant quantities of dust becomes airborne.

Try to avoid creating dust conditions.

## SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

### Information on basic physical and chemical properties

<b>Appearance</b>	White granules with chlorine-like odour; miscible with water.		
<b>Physical state</b>	Divided Solid	<b>Relative density (Water = 1)</b>	2.1
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol / water</b>	Not Available
<b>Odour threshold</b>	Not Available	<b>Auto-ignition temperature (°C)</b>	Not Available
<b>pH (as supplied)</b>	Not Available	<b>Decomposition temperature</b>	Not Available
<b>Melting point / freezing point (°C)</b>	Not Available	<b>Viscosity (cSt)</b>	Not Available
<b>Initial boiling point and boiling range (°C)</b>	Not Available	<b>Molecular weight (g/mol)</b>	Not Applicable

Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution (1%)	11.5 (5% sol)
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

## SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	Unstable in the presence of incompatible materials. Product is considered stable under normal handling conditions. Prolonged exposure to heat. Hazardous polymerisation will not occur. Presence of elevated temperatures.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

## SECTION 11 TOXICOLOGICAL INFORMATION

### Information on toxicological effects

Inhaled	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. If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures.  Chlorine vapour is extremely irritating to the airways and lungs, causing coughing, choking, breathing difficulty, chest pain, headache, vomiting, fluid accumulation in the lungs, chest infection and loss of consciousness. Effects may be delayed. Long term exposure (at workplace) may lead to corrosion of the teeth, irritate the linings of the nose and may increase the likelihood of developing tuberculosis. Recent studies have not confirmed these findings. Very low concentrations may irritate the eyes, nose and throat and cause the above reactions.	
Ingestion	Swallowing hypochlorites may cause burning in the mouth and throat, abdominal cramps, nausea, vomiting, diarrhea, pain, inflammation of the mouth and stomach, low blood pressure, shock, confusion and delirium. Severe poisonings may lead to convulsion, coma and death. Hypochlorites irritate the mouth, throat and stomach; the hypochlorous acid liberated in the stomach can cause tearing of the stomach wall, with bleeding, and can be fatal.	
Skin Contact	The material can produce chemical burns following direct contact with the skin. Open cuts, abraded or irritated skin should not be exposed to this material Contact may cause severe itchiness, skin lesions and mild eczema. Exudation and sloughing may occur. Two patients were reported with chronic allergic dermatitis of the hand, related to sensitization to sodium hypochlorite as the active component of laundry bleach. Solution of material in moisture on the skin, or perspiration, may markedly increase skin corrosion and accelerate tissue destruction 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.	
Eye	Eye contact with a 5% hypochlorite solution may produce a temporary burning discomfort and slight irritation of the epithelium of the cornea, but without injury.	
Chronic	Reduced breathing capacity may result from chronic low level exposure to chlorine gas. Chronic poisoning may result in cough, severe chest pains, sore throat and blood in the phlegm. Moderate to severe exposures over 3 years produced decreased lung capacity in a number of workers. Delayed effects can include shortness of breath, violent headaches, lung swelling and pneumonia. Chloralkali workers exposed over many years showed fatigue, and a modest increase in anxiety and dizziness. There may be an increase in white blood cell and decrease in red blood cell count.	
Granular Chlorine	TOXICITY	IRRITATION
	Not Available	Not Available
calcium hypochlorite, hydrated	TOXICITY	IRRITATION
	Oral (rat) LD50: 850 mg/kg <sup>[2]</sup>	Not Available

**Legend:** 1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.\* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

### CALCIUM HYPOCHLORITE, HYDRATED

No significant acute toxicological data identified in literature search.  
Hypochlorite salts are classified by IARC as Group 3: **NOT** classifiable as to its carcinogenicity to humans.  
Evidence of carcinogenicity may be inadequate or limited in animal testing.  
Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.

Acute Toxicity	Carcinogenicity
Skin Irritation/Corrosion	Reproductivity
Serious Eye Damage/Irritation	STOT - Single Exposure
Respiratory or Skin sensitisation	STOT - Repeated Exposure
Mutagenicity	Aspiration Hazard

**Legend:**

- Data available but does not fill the criteria for classification
- Data available to make classification
- Data Not Available to make classification

## SECTION 12 ECOLOGICAL INFORMATION

### Toxicity

	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
Granular Chlorine	Not Available	Not Available	Not Available	Not Available	Not Available
calcium hypochlorite, hydrated	LC50	96	Fish	0.023mg/L	4
	EC50	48	Crustacea	0.073mg/L	4
	NOEC	24	Fish	<0.01mg/L	1

**Legend:** Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

Very toxic to aquatic organisms.

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.

For Chlorine:

Atmospheric Fate: Atmospheric chlorine forms hydrochloric or hypochlorous acid in the atmosphere, either through reactions with hydroxyl radicals or, other trace species, such as hydrocarbons. These acids are believed to be removed from the atmosphere primarily through precipitation washout/dry deposition. When chlorine, hypochlorous acid or hydrogen chloride mixes in the atmosphere with water vapor, dilute solutions of strong mineral acids form which fall to earth as ⚡ rain ⚡, snow, fog, or acidified dry particles. Terrestrial Fate: Soil - Chlorine may react with soil components to form chlorides; depending on their water solubility, these chlorides are easily washed out from the soil. Plants - Vegetation acts as an important artificial reservoir, (sink), for chlorine air pollution. Elevated levels of chlorine can cause plant injury; however chlorine tends to be rapidly converted to other less toxic forms. Chlorine is toxic to plant growth, however; it is also essential to plant growth - crops need around 2 kg or more of chlorine per acre. Acute toxicity is characterized by defoliation, with no leaf symptoms and, in higher plant forms, by spotting of the leaves.

Aquatic Fate: Water chlorination initially introduces chlorine into the water as chlorine gas, hypochlorite ion, or its salt. Chlorine in aqueous systems evaporates, or quickly decays, to residual forms, such as hypochlorous acid, chloramine and/or chlorinated organics.

**DO NOT discharge into sewer or waterways.**

### Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
calcium hypochlorite, hydrated	LOW	LOW

### Bioaccumulative potential

Ingredient	Bioaccumulation
calcium hypochlorite, hydrated	LOW (LogKOW = -0.8694)

### Mobility in soil

Ingredient	Mobility
calcium hypochlorite, hydrated	LOW (KOC = 14.3)

## SECTION 13 DISPOSAL CONSIDERATIONS



### Waste treatment methods

<b>Product / Packaging disposal</b>	<p>Containers may still present a chemical hazard/ danger when empty. Return to supplier for reuse/ recycling if possible.</p> <p>Otherwise:</p> <p>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.</p> <p>Where possible retain label warnings and SDS and observe all notices pertaining to the product.</p> <p><b>DO NOT allow wash water from cleaning or process equipment to enter drains.</b></p> <p>It may be necessary to collect all wash water for treatment before disposal.</p> <p>In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.</p> <p>Where in doubt contact the responsible authority.</p> <p>For small quantities of oxidising agent:</p> <p>Cautiously acidify a 3% solution to pH 2 with sulfuric acid.</p> <p>Gradually add a 50% excess of sodium bisulfite solution with stirring.</p> <p>Add a further 10% sodium bisulfite.</p> <p>If no further reaction occurs (as indicated by a rise in temperature) cautiously add more acid.</p> <p>Recycle wherever possible or consult manufacturer for recycling options.</p> <p>Consult State Land Waste Management Authority for disposal.</p> <p>Bury residue in an authorised landfill.</p> <p>Recycle containers if possible, or dispose of in an authorised landfill.</p>
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## SECTION 14 TRANSPORT INFORMATION



**Labels Required**

	
<b>Marine Pollutant</b>	
<b>HAZCHEM</b>	1W

**Land transport (DOT)**

<b>UN number</b>	2880
<b>UN proper shipping name</b>	CALCIUM HYPOCHLORITE, HYDRATED or CALCIUM HYPOCHLORITE, HYDRATED MIXTURE, with not less than 5.5% but not more than 16% water
<b>Transport hazard class(es)</b>	Class 5.1 Subrisk Not Applicable
<b>Packing group</b>	II
<b>Environmental hazard</b>	Environmentally hazardous
<b>Special precautions for user</b>	Special provisions 314 322 Limited quantity 1 kg

**Air transport (ICAO-IATA / DGR)**

<b>UN number</b>	2880
<b>UN proper shipping name</b>	Calcium hypochlorite, hydrated with $\geq 5.5\%$ but $\leq 16\%$ water; Calcium hypochlorite, hydrated mixture with $\geq 5.5\%$ but $\leq 16\%$ water
<b>Transport hazard class(es)</b>	ICAO/IATA Class 5.1 ICAO / IATA Subrisk Not Applicable ERG Code 5L
<b>Packing group</b>	II
<b>Environmental hazard</b>	Environmentally hazardous
<b>Special precautions for user</b>	Special provisions A3 A8 A136 Cargo Only Packing Instructions 562 Cargo Only Maximum Qty / Pack 25 kg Passenger and Cargo Packing Instructions 558 Passenger and Cargo Maximum Qty / Pack 5 kg Passenger and Cargo Limited Quantity Packing Instructions Y544 Passenger and Cargo Limited Maximum Qty / Pack 2.5 kg

**Sea transport (IMDG-Code / GGVSee)**

<b>UN number</b>	2880
<b>UN proper shipping name</b>	CALCIUM HYPOCHLORITE, HYDRATED or CALCIUM HYPOCHLORITE, HYDRATED MIXTURE with not less than 5.5% but not more than 16% water
<b>Transport hazard class(es)</b>	IMDG Class 5.1 IMDG Subrisk Not Applicable
<b>Packing group</b>	II
<b>Environmental hazard</b>	Marine Pollutant
<b>Special precautions for user</b>	EMS Number F-H , S-Q Special provisions 314 322 Limited Quantities 1 kg

**Transport in bulk according to Annex II of MARPOL and the IBC code**

Not Applicable

**SECTION 15 REGULATORY INFORMATION****Safety, health and environmental regulations / legislation specific for the substance or mixture****CALCIUM HYPOCHLORITE, HYDRATED(7778-54-3) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals  
 Australia Inventory of Chemical Substances (AICS)  
 Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)  
 Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix F (Part 3)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5  
 Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6  
 International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs



National Inventory	Status
Australia - AICS	Y
Canada - DSL	Y
Canada - NDSL	N (calcium hypochlorite, hydrated)
China - IECSC	Y
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	Y
Korea - KECI	Y
New Zealand - NZIoC	Y
Philippines - PICCS	Y
USA - TSCA	Y
<b>Legend:</b>	Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing (see specific ingredients in brackets)

## SECTION 16 OTHER INFORMATION

<b>Revision Date</b>	31/05/2018
<b>Initial Date</b>	31/05/2018

### Other information

#### Ingredients with multiple cas numbers

Name	CAS No
calcium hypochlorite, hydrated	22464-76-2, 7778-54-3

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

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

#### Definitions and abbreviations

PC – TWA: Permissible Concentration-Time Weighted Average  
PC – STEL: Permissible Concentration-Short Term Exposure Limit  
IARC: International Agency for Research on Cancer  
ACGIH: American Conference of Governmental Industrial Hygienists  
STEL: Short Term Exposure Limit  
TEEL: Temporary Emergency Exposure Limit.  
IDLH: Immediately Dangerous to Life or Health Concentrations  
OSF: Odour Safety Factor  
NOAEL :No Observed Adverse Effect Level  
LOAEL: Lowest Observed Adverse Effect Level  
TLV: Threshold Limit Value  
LOD: Limit Of Detection  
OTV: Odour Threshold Value  
BCF: BioConcentration Factors  
BEI: Biological Exposure Index

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