

Chemwatch: 5534-26 Version No: 2.1 Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements Chemwatch Hazard Alert Code: 3 Issue Date: 14/03/2022

Print Date: 16/06/2022 L.GHS.AUS.EN.E

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

Product Identifier

Product name	Ammunitions with Inert Projectile (Cartridges for Small Arms)
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	CARTRIDGES FOR WEAPONS, INERT PROJECTILE or CARTRIDGES, SMALL ARMS
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses	Cal.22 cartridges.

Details of the supplier of the safety data sheet

Registered company name	TSA OUTDOORS
Address	Unit 6/ 9 - 13 Winbourne Road Brookvale NSW 2100 Australia
Telephone	+61 2 9938 3244
Fax	+61 2 9939 2972
Website	Isaoutdoors.com.au
Email	sales@tasco.com.au

Emergency telephone number

Association / Organisation	Aaron Millard
Emergency telephone numbers	+61 450 086 593 (Mon-Fri, 9 am-6pm)
Other emergency telephone numbers	Not Available

SECTION 2 Hazards identification

Classification of the substance or mixture

Poisons Schedule	Not Applicable
Classification ^[1]	Explosives Division 1.4, Acute Toxicity (Oral) Category 4, Acute Toxicity (Dermal) Category 3, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 2A, Acute Toxicity (Inhalation) Category 2, Reproductive Toxicity Category 1A, Reproductive Toxicity Effects on or via Lactation, Hazardous to the Aquatic Environment Acute Hazard Category 3, Hazardous to the Aquatic Environment Long-Term Hazard Category 2
Legend:	1. Classified by Chernwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

|--|

Signal word Danger

Hazard statement(s)

()	
H204	Fire or projection hazard.
H302	Harmful if swallowed.
H311	Toxic in contact with skin.
H317	May cause an allergic skin reaction.
H319	Causes serious eye irritation.

H330	Fatal if inhaled.
H360Df	May damage the unborn child. Suspected of damaging fertility.
H362	May cause harm to breast-fed children.
H402	Harmful to aquatic life.
H411	Toxic to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

Frecautionary statement(s) Fre	
P201	Obtain special instructions before use.
P210	Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.
P234	Keep only in original packaging.
P250	Do not subject to grinding/shock/sources of friction.
P260	Do not breathe dust/fume.
P263	Avoid contact during pregnancy and while nursing.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection, face protection and hearing protection.
P240	Ground and bond container and receiving equipment.
P270	Do not eat, drink or smoke when using this product.
P264	Wash all exposed external body areas thoroughly after handling.
P273	Avoid release to the environment.
P284	[In case of inadequate ventilation] wear respiratory protection.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P308+P313	IF exposed or concerned: Get medical advice/ attention.
P310	Immediately call a POISON CENTER/doctor/physician/first aider.
P370+P372+P380+P373	In case of fire: Explosion risk. Evacuate area. DO NOT fight fire when fire reaches explosives.
P370+P380+P375	In case of fire: Evacuate area. Fight fire remotely due to the risk of explosion.
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P337+P313	If eye irritation persists: Get medical advice/attention.
P361+P364	Take off immediately all contaminated clothing and wash it before reuse.
P391	Collect spillage.
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider if you feel unwell.
P330	Rinse mouth.

Precautionary statement(s) Storage

P405 Store locked up.	P403+P233
	P405
P401 Store in accordance with local/regional/national/international regulations.	P401

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
P503	Refer to manufacturer or supplier for information on disposal/recovery/recycling.

Not Applicable

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
7439-92-1	50-75	lead
7440-50-8	10-20	copper
7440-66-6	5-10	zinc
9004-70-0	0-5	nitrocellulose
63918-97-8	0-1	lead styphnate
109-27-3	0-1	tetrazene

CAS No	%[weight]	Name
78-11-5	0-1	pentaerythritol tetranitrate
55-63-0	0-1	nitroglycerin
1309-60-0	0-1	lead dioxide
10022-31-8	0-1	barium nitrate
1345-04-6	0-1	antimony trisulfide
7727-43-7	0-1	barium sulfate
7429-90-5	0-1	aluminium
Legend: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L * EU IOELVs available		

SECTION 4 First aid measures

Description of first aid measures If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. • Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Eve Contact Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel. DO NOT attempt to remove particles attached to or embedded in eye Lay victim down, on stretcher if available and pad BOTH eyes, make sure dressing does not press on the injured eye by placing thick pads under dressing, above and below the eye Seek urgent medical assistance, or transport to hospital. If skin or hair contact occurs: Immediately flush body and clothes with large amounts of water, using safety shower if available. Quickly remove all contaminated clothing, including footwear. • Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. Transport to hospital, or doctor. Immediately wash contaminated skin with plenty of soap and water. Immediately seek medical advice. Wearing gloves, remove all contaminated clothing and loosen remaining clothing. Allow patient to assume comfortable position, keep warm. Keep at rest until fully recovered. If breathing has stopped or is shallow apply artificial respiration at once. In the event of cardiac arrest apply external cardiac massage. If breathing is laboured and patient cyanotic (blue), ensure airways are clear and have qualified person give oxygen through a face mask. For thermal burns: Decontaminate area around burn. Consider the use of cold packs and topical antibiotics. For first-degree burns (affecting top layer of skin) Hold burned skin under cool (not cold) running water or immerse in cool water until pain subsides. Use compresses if running water is not available. Cover with sterile non-adhesive bandage or clean cloth. Do NOT apply butter or ointments; this may cause infection. Give over-the counter pain relievers if pain increases or swelling, redness, fever occur. Skin Contact For second-degree burns (affecting top two layers of skin) Cool the burn by immerse in cold running water for 10-15 minutes. Use compresses if running water is not available. Do NOT apply ice as this may lower body temperature and cause further damage. Do NOT break blisters or apply butter or ointments; this may cause infection. Protect burn by cover loosely with sterile, nonstick bandage and secure in place with gauze or tape. To prevent shock: (unless the person has a head, neck, or leg injury, or it would cause discomfort): Lay the person flat. Elevate feet about 12 inches Elevate burn area above heart level, if possible. Cover the person with coat or blanket. Seek medical assistance. For third-degree burns Seek immediate medical or emergency assistance. In the mean time: Protect burn area cover loosely with sterile, nonstick bandage or, for large areas, a sheet or other material that will not leave lint in wound. Separate burned toes and fingers with dry, sterile dressings. Do not soak burn in water or apply ointments or butter; this may cause infection. To prevent shock see above. • For an airway burn, do not place pillow under the person's head when the person is lying down. This can close the airway. Have a person with a facial burn sit up. Check pulse and breathing to monitor for shock until emergency help arrives. 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. Inhalation Perform CPR if necessary. Transport to hospital, or doctor, without delay. Remove victim from exposure - avoid becoming a casualty. Seek immediate medical advice and treat as for skin absorption • Give a slurry of activated charcoal in water to drink. NEVER GIVE AN UNCONSCIOUS PATIENT WATER TO DRINK. At least 3 tablespoons in a glass of water should be given Ingestion Although induction of vomiting may be recommended (IN CONSCIOUS PERSONS ONLY), such a first aid measure is dissuaded due to the risk of aspiration of stomach contents. (i) It is better to take the patient to a doctor who can decide on the necessity and method of emptying

the stomach. (ii) Special circumstances may however exist; these include non-availability of charcoal and the ready availability of the doctor. NOTE: If vomiting is induced, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
NOTE: Wear protective gloves when inducing vomiting.
REFER FOR MEDICAL ATTENTION WITHOUT DELAY.
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 SDS
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 SDS.
(ICSC20305/20307)

Indication of any immediate medical attention and special treatment needed

Nitroglycerin is a sensitive explosive. If free Nitroglycerin or its analogues, are present, great care must be taken in carrying our first-aid procedures to ensure that it is not initiated through impact.

Treat symptomatically.

for copper intoxication:

- Unless extensive vomiting has occurred empty the stomach by lavage with water, milk, sodium bicarbonate solution or a 0.1% solution of potassium ferrocyanide (the resulting copper ferrocyanide is insoluble).
- Administer egg white and other demulcents
- Maintain electrolyte and fluid balances.
- Morphine or meperidine (Demerol) may be necessary for control of pain.
- If symptoms persist or intensify (especially circulatory collapse or cerebral disturbances, try BAL intramuscularly or penicillamine in accordance with the supplier's recommendations.
- Treat shock vigorously with blood transfusions and perhaps vasopressor amines.
- F If intravascular haemolysis becomes evident protect the kidneys by maintaining a diuresis with mannitol and perhaps by alkalinising the urine with sodium bicarbonate.
- F It is unlikely that methylene blue would be effective against the occassional methaemoglobinemia and it might exacerbate the subsequent haemolytic episode.
- Institute measures for impending renal and hepatic failure.

[GOSSELIN, SMITH & HODGE: Commercial Toxicology of Commercial Products]

A role for activated charcoals for emesis is, as yet, unproven.

In severe poisoning CaNa2EDTA has been proposed.

[ELLENHORN & BARCELOUX: Medical Toxicology]

for dinitrophenols:

Marked fatigue, tremendous thirst, profuse sweating, flushing of the face are all characteristics of intoxication by dinitrophenol derivatives. These may be followed by restlessness, anxiety, excitement which may occasionally lead to convulsions. Rises in body temperature (proportional to dose) may result in severe hyperpyexia. tachycardia, hyperpnoea, dyspnoea, cyanosis and muscle cramps characterise later symptomatology. Late complications include decreased urine output with albuminuria, casts, pigment, and sometimes blood cells due to toxic nephritis. Jaundice and liver tenderness also develop as a result of toxic hepatitis.

TREATMENT for dinitrophenol intoxications:

- ▶ Gastric lavage with large quantities of 5% sodium bicarbonate solution leaving 1-2 pints in the stomach.
- ▶ Saline cathartics e.g. 15-30 gm sodium or magnesium sulfate in water.
- Cold packs and alcohol sponges to reduce body temperature. Antipyretic drugs are ineffective here. Cold water enemas have been used. Intensive efforts to correct a dinitrophenol fever are justified. If it can be accomplished, mild hypothermia (rectal temperature between 33.5 and 36 deg. C) is desirable because dinitrophenol appears to lose its metabolic activity at reduced temperature. [DO NOT give atropine, aspirin, and other salicylates to control hyperthermia, as these agents appear likely to enhance the toxicity of phenolic substances. Aspirin also enhances the uncoupling of oxidative phosphorylation.]
- Fluids, orally or intravenously (e.g. glucose in saline, 1000 ml) to correct dehydration and acidosis.
- Because dinitrophenol is actively transported by the renal organic acid transport processes in some species, a trial of forced diuresis with alkalisation of the urine is warranted.
- Oxygen therapy. Artificial ventilation is needed. [Administer oxygen by mask to minimise anoxia].
- Prophylactic measures in anticipation of kidney and liver insufficiency.

GOSSELIN, SMITH HODGE; Clinical Toxicology of Commercial Products 5th Ed.

Diazepam may be used, if necessary, for the treatment of convulsions, to reduce body heat and control agitation. Be prepared to counter respirator depression and hypotension which may occur following administration of anticonvulsants.

Copper, magnesium, aluminium, antimony, iron, manganese, nickel, zinc (and their compounds) in welding, brazing, galvanising or smelting operations all give rise to thermally produced particulates of smaller dimension than may be produced if the metals are divided mechanically. Where insufficient ventilation or respiratory protection is available these particulates may produce "metal fume fever" in workers from an acute or long term exposure.

- Onset occurs in 4-6 hours generally on the evening following exposure. Tolerance develops in workers but may be lost over the weekend. (Monday Morning Fever)
 Pulmonary function tests may indicate reduced lung volumes, small airway obstruction and decreased carbon monoxide diffusing capacity but these abnormalities resolve after
- several months.
- Although mildly elevated urinary levels of heavy metal may occur they do not correlate with clinical effects.
- The general approach to treatment is recognition of the disease, supportive care and prevention of exposure.
- Seriously symptomatic patients should receive chest x-rays, have arterial blood gases determined and be observed for the development of tracheobronchitis and pulmonary edema.

[Ellenhorn and Barceloux: Medical Toxicology]

- Gastric acids solubilise lead and its salts and lead absorption occurs in the small bowel.
- ▶ Particles of less than 1 um diameter are substantially absorbed by the alveoli following inhalation.
- Lead is distributed to the red blood cells and has a half-life of 35 days. It is subsequently redistributed to soft tissue & bone-stores or eliminated. The kidney accounts for 75% of daily lead loss; integumentary and alimentary losses account for the remainder.
- Neurasthenic symptoms are the most common symptoms of intoxication. Lead toxicity produces a classic motor neuropathy. Acute encephalopathy appears infrequently in adults. Diazepam is the best drug for seizures.
- Whole-blood lead is the best measure of recent exposure; free erythrocyte protoporphyrin (FEP) provides the best screening for chronic exposure. Obvious clinical symptoms occur in adults when whole-blood lead exceeds 80 ug/dL.
- British Anti-Lewisite is an effective antidote and enhances faecal and urinary excretion of lead. The onset of action of BAL is about 30 minutes and most of the chelated metal complex is excreted in 4-6 hours, primarily in the bile. Adverse reaction appears in up to 50% of patients given BAL in doses exceeding 5 mg/kg. CaNa2EDTA has also been used alone or in concert with BAL as an antidote. D-penicillamine is the usual oral agent for mobilisation of bone lead; its use in the treatment of lead poisoning remains investigational. 2,3-dimercapto-1-propanesulfonic acid (DMPS) and dimercaptosuccinic acid (DMSA) are water soluble analogues of BAL and their effectiveness is undergoing review. As a rule, stop BAL if lead decreases below 50 ug/dL; stop CaNa2EDTA if blood lead decreases below 40 ug/dL or urinary lead drops below 2 mg/24hrs.

[Ellenhorn & Barceloux: Medical Toxicology]

BIOLOGICAL EXPOSURE INDEX - BEI

These represent the determinants observed in specimens collected from a healthy worker who has been exposed at the Exposure Standard (ES or TLV):



Version No. 2.1		Ammunitions with Inert Projectile (Cartridges fo	or Small Arms)	Plint Date. 10/00/2022
				2
Lead in urine		150 ug/gm creatinine	Not Critical	В
3. Zinc protoporphyrin in b	lood	250 ug/100 ml erythrocytes OR 100 ug/100 ml blood	After 1 month exposure	В
B: Background levels occu	ur in specimens c	ollected from subjects NOT exposed.		

Symptoms of vasodilation and reflex tachycardia may present following organic nitrate overdose; most organic nitrates are extensively metabolised by hydrolysis to inorganic nitrites. Organic nitrates and nitrites are readily absorbed through the skin, lungs, mucosa and gastro-intestinal tract.

SECTION 5 Firefighting measures

Extinguishing media

Metal dust fires need to be smothered with sand, inert dry powders.

DO NOT USE WATER, CO2 or FOAM

- Use DRY sand, graphite powder, dry sodium chloride based extinguishers, G-1 or Met L-X to smother fire.
- Confining or smothering material is preferable to applying water as chemical reaction may produce flammable and explosive hydrogen gas.
- Chemical reaction with CO2 may produce flammable and explosive methane.
- ▶ If impossible to extinguish, withdraw, protect surroundings and allow fire to burn itself out.

DO NOT use halogenated fire extinguishing agents.

Special hazards arising from the substrate or mixture

	 Reacts with acids producing flammable / explosive hydrogen (H2) gas Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
· · · · · · · · · · · · · · · · · · ·	Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result

Advice for firefighters

Fire Fighting	 WARNING: EXPLOSIVE MATERIALS / ARTICLES PRESENT! Evacuate all personnel and move upwind. Prevent re-entry. Alert Fire Brigade and tell them location and nature of hazard. May detonate and burning material may be propelled from fire. Wear full-body protective clothing with breathing apparatus. Prevent, by any means available, spillage and fire effluent from entering drains and water courses. Fight fire from safe distances and from protected locations. Use flooding quantities of water. DO NOT approach containers or packages suspected to be hot. Cool any exposed containers not involved in fire from a protected location. Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	 Zinc dust clouds are potentially explosive. Electric sparks may ignite the dust cloud even in atmospheres containing low oxygen (10%). In air the dust may be ignited in contact with hot surfaces or flame where temperatures exceed 600 deg C. DO NOT use water or foam as generation of explosive hydrogen may result. With the exception of the metals that burn in contact with hot ar owater (for example, sodium), masses of combustible metals do not represent unusual fire risks because they have the ability to conduct heat away from hot spots so efficiently that the heat of combustion cannot be maintained - this means that it will require al ot of heat to ignite a mass of combustible metal. Generally, metal fire risks exist when sawdust, machine shavings and other metal fines' are present. Metal powders, while generally regarded as non-combustible: May bur when metal is finely divided and energy input is high. May react explosively with water. May bur when metal is finely divided and energy input is high. Way react explosively with water. May bur when metal set is finely divided and energy input is high. Way react explosively with water. May react explosively with water. May pained by friction, heat, sparks or flame. My REIGNTE atter fire is extinguished. Will burn with intense heat. Note: Metal dust fires are slow moving but intense and difficult to extinguish. Containers may explore on heating. Dusts or fumes may form explosive mixtures with air. Gases generated in fire may be poisonous, corrosive or irritating. Hor or burning metals can be higher than temperatures generated by burning flammable liquids Some metals can continue to burn in carbon divide, nitrogen, water, or steam atmospheres in which ordinary combustibles or flammable liquids. Some metals can continue to burn in carbon divide, nitrogen, wa
HAZCHEM	1YE

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

See section 12

Minor Spills	 For nitroglycerine and similar products: Clean up spills immediately. Avoid all personal contact. Wear protective clothing, impervious gloves and safety glasses. Minor splashes should be wiped clean with an alcohol soaked cloth. The spill area is decontaminated using NG Decontamination Solution'. Do not use metal or spark producing implements during clean up. WARNING!: EXPLOSIVE. BLAST and/or PROJECTION and/or FIRE HAZARD Clean up all spills immediately. Avoid inhalation of the material and avoid contact with eyes and skin. Wear impervious gloves and safety glasses. Remove all ignition sources. Use spark-free tools when handling. Sweep into non-sparking containers or barrels and moisten with water. Place spilled material in clean, sealable, labelled container for disposal. Flush area with large amounts of water.
Major Spills	 Do not use compressed air to remove metal dusts from floors, beams or equipment Vacuum cleaners, of flame-proof design, should be used to minimise dust accumulation. Use non-sparking handling equipment, tools and natural bristle brushes. Provide grounding and bonding where necessary to prevent accumulation of static charges during metal dust handling and transfer operations Cover and reseal partially empty containers. Do not allow chips, fines or dusts to contact water, particularly in enclosed areas. If molten: Contain the flow using dry sand or salt flux as a dam. All tooling (e.g., shovels or hand tools) and containers which come in contact with molten metal must be preheated or specially coated, rust free and approved for such use. Allow the spill to cool before remelting scrap. WARNINGI: EXPLOSIVE. Clear area of personnel and move upwind. Aller Fire Brigade and tell them location and nature of hazard. May be violently or explosively reactive. Wear full body protective clothing with breathing apparatus. Consider evacuation (or protect in place). In case of transport accident notify Police, Emergency Authority, Competent Explosives Authority or Manufacturer. No smoking, naked lights, heat or ignition sources. Increase ventilation. Use extreme caution to prevent physical shock. Use only spark-free shovels and explosion-proof equipment. Collect recoverable material and segregate from spilled material. Wash spill area with large quantities of water.

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

SECTION 7 Handling and storage

Safe handling	 For molten metala: Molten metal and water can be an explosive combination. The risk is greatest when there is sufficient molten metal to entrap or seal off water. Water and other forms of contamination on or contained in scrap or remet ingot are known to have caused explosions in mething operations. While the products may have minimal surface roughness and internal voids, there remains the possibility of moisture contamination or entrapment. If confined, even a few drops can lead to violent explosions. All tooling, containers, molds and ladies, which come in contact with molten metal must be preheated or specially coated, nust free and approved for such use. Any surfaces that may contact molten metal (e.g. concrete) should be specially coated Orops of molten metal in water (e.g. from plasma arc cutting), while not normally an explosion hazard, can generate enough flammable hydrogen gas to present an explosion hazard. Vigorous circulation of the water and removal of the particles minims et hazard. During melting operations, the following minimum guidelines should be observed: Inspect all materials prior to furnace charging and completely remove surface contamination such as water, ice, snow, deposits of grease and or other surface contamination resulting from weather exposure, shipment, or storage. Store materials in dry, heated areas with any cracks or cavities pointed downwards. Preheat and dry large objects adequately before charging in to a furnace containing molten metal. This is typically done by the use of a drying oven or homogenising furnace. The dry cycle should bring the metal temperature of the coldest item of the batch to 200 degree C (400 deg F) and then hold at that temperature for 6 hours. A Handle gently. Use good occupational work practice. Observe manufacturer's storage and handling recommendations contained within this SDS. Avoid angending. The dry cycles should bring
---------------	---

	 Do not use air hoses for cleaning. Minimise dry sweeping to avoid generation of dust clouds. Vacuum dust-accumulating surfaces and remove to a chemical disposal area. Vacuums with explosion-proof motors should be used. Control sources of static electricity. Dusts or their packages may accumulate static charges, and static discharge can be a source of ignition. Solids handling systems must be designed in accordance with applicable standards (e.g. NFPA including 654 and 77) and other national guidance. Do not empty directly into flammable solvents or in the presence of flammable vapors. The operator, the packaging container and all equipment must be grounded with electrical bonding and grounding systems. Plastic bags and plastics cannot be grounded, and antistatic bags do not completely protect against development of static charges. Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source. Do NOT cut, drill, grind or weld such containers. In addition ensure such activity is not performed near full, partially empty or empty containers without appropriate workplace safety authorisation or permit.
Other information	 DO NOT store near acids, or oxidising agents Store cases in a well ventilated magazine licensed for the appropriate Class, Division and Compatibility Group. Rotate stock to prevent ageing. Use on FIFO (first in-first out) basis. Observe manufacturer's storage and handling recommendations contained within this SDS. Store in a cool place in original containers. Keep containers securely sealed. No smoking, naked lights, heat or ignition sources. Store in an isolated area away from other materials. Keep storage area free of debris, waste and combustibles. Protect containers against physical damage. Check regularly for spills and leaks NOTE: If explosives need to be destroyed contact the Competent Authority.
Conditions for safe storage, in	cluding any incompatibilities
Suitable container	 Bulk bags: Reinforced bags required for dense materials. CARE: Packing of high density product in light weight metal or plastic packages may result in container collapse with product release All packaging for Class 1 Goods shall be in accordance with the requirements of the relevant Code for the transport of Dangerous Goods. Class 1 is unique in that the type of packaging used frequently has a very decisive effect on the hazard and therefore on the assignment to a particular division Heavy gauge metal packages / Heavy gauge metal drums
Storage incompatibility	Inorganic derivative of Group 11 metal. For aluminas (aluminium oxide): Incompatible with hot chlorinated rubber. In the presence of chlorine trifluoride may react violently and ignite. -Adva initiate explosive polymerisation of oldein oxides including ethylene oxide. -Produces exothermic reaction above 200°C with halocarbons and an exothermic reaction at ambient temperatures with halocarbons in the presence of choir metals. -Produces exothermic reaction with oxygen difluoride. -Produces exothermic and explosive solution of thirt cai caid and glycerol + is hydroflyosed in water forming an explosive solution of thirt cai caid and glycerol + is hydroflyosed in water forming an explosive solution of thirt cai caid and glycerol + is hydroflyosed in water forming an explosive solution of thirt caid and glycerol + is hydroflyosed in water forming an explosive solution of thirt caid and glycerol + work form prelexes formed between chromin(0) and differ transition metal peroxides should be considered as potentially explosive. For example transition metal complexes of alkyl hydroperoxides may decompose explosively. - The pic-complexes formed between chromin(0) and differ transition metals (haloarene-metal complexes) and mono-or polyl-fluorobenzene show extreme sensitivity to heat and are explosively upo

react with halogenated hydrocarbons (for example, copper dissolves when heated in carbon tetrachloride), sometimes forming explosive compounds.

- Many metals in elemental form react exothermically with compounds having active hydrogen atoms (such as acids and water) to form flammable hydrogen gas and caustic products.
- Elemental metals may react with azo/diazo compounds to form explosive products.
- Some elemental metals form explosive products with halogenated hydrocarbons.
 Explosion hazard may follow contact with incompatible materials

Finely divided metal powders develop pyrophoricity when a critical specific surface area is exceeded; this is ascribed to high heat of oxide formation on exposure to air.
Safe handling is possible in relatively low concentrations of oxygen in an inert gas.
Several pyrophoric metals, stored in glass bottles have ignited when the container is broken on impact. Storage of these materials moist and in metal containers is recommended.
The reaction residues from various metal syntheses (involving vacuum evaporation and co-deposition with a ligand) are often pyrophoric.
Factors influencing the pyrophoricity of metals are particle size, presence of moisture, nature of the surface of the particle, heat of formation of
the oxide, or nitride, mass, hydrogen content, stress, purity and presence of oxide, among others.
Phenols are incompatible with strong reducing substances such as hydrides, nitrides, alkali metals, and sulfides.
Avoid use of aluminium, copper and brass alloys in storage and process equipment.
Heat is generated by the acid-base reaction between phenols and bases.
Phenols are sulfonated very readily (for example, by concentrated sulfuric acid at room temperature), these reactions generate heat.
Phenols are nitrated very rapidly, even by dilute nitric acid.
Nitrated phenols often explode when heated. Many of them form metal salts that tend toward detonation by rather mild shock.

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	lead	Lead, inorganic dusts & fumes (as Pb)	0.05 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	copper	Copper, dusts & mists (as Cu)	1 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	copper	Copper (fume)	0.2 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	nitroglycerin	Nitroglycerine (NG)	0.05 ppm / 0.46 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	lead dioxide	Lead, inorganic dusts & fumes (as Pb)	0.05 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	barium nitrate	Barium, soluble compounds (as Ba)	0.5 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	antimony trisulfide	Antimony & compounds (as Sb)	0.5 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	barium sulfate	Barium sulphate	10 mg/m3	Not Available	Not Available	(a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica.
Australia Exposure Standards	aluminium	Aluminium (welding fumes) (as Al)	5 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	aluminium	Aluminium (metal dust)	10 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	aluminium	Aluminium, pyro powders (as Al)	5 mg/m3	Not Available	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1 TEEL-2			TEEL-3		
lead	0.15 mg/m3 120 mg/m3			700 mg/m3		
copper	3 mg/m3	33 mg/m3		200 mg/m3		
zinc	6 mg/m3	21 mg/m3		120 mg/m3		
pentaerythritol tetranitrate	5 mg/m3	55 mg/m3		330 mg/m3		
nitroglycerin	0.1 mg/m3	2 mg/m3		75 mg/m3		
lead dioxide	0.17 mg/m3	140 mg/m3		810 mg/m3		
barium nitrate	2.9 mg/m3	350 mg/m3		2,100 mg/m3		
barium sulfate	15 mg/m3	170 mg/m3		990 mg/m3		
Ingredient	Original IDLH		Revised IDLH			
lead	Not Available		Not Available			
copper	100 mg/m3	100 mg/m3		Not Available		
zinc	Not Available	Not Available		Not Available		
nitrocellulose	Not Available	Not Available		Not Available		
lead styphnate	100 mg/m3		Not Available			
tetrazene	Not Available		Not Available			
pentaerythritol tetranitrate	Not Available		Not Available			
nitroglycerin	75 mg/m3	75 mg/m3		Not Available		
lead dioxide	100 mg/m3	100 mg/m3		Not Available		
barium nitrate	50 mg/m3	50 mg/m3		Not Available		
antimony trisulfide	50 mg/m3		Not Available			
barium sulfate	Not Available		Not Available	Not Available		

Ingredient	Original IDLH	Revised IDLH
aluminium	Not Available	Not Available
Occupational Exposure Band	ing	
Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
lead styphnate	E	≤ 0.01 mg/m³
tetrazene	E	≤ 0.01 mg/m³
pentaerythritol tetranitrate	E	≤ 0.01 mg/m³
Notes:	Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.	

MATERIAL DATA

Exposure	controls
----------	----------

Exposure controls	
Appropriate engineering controls	 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: Process controls which involve changing the way a job activity or process is done to reduce the risk. 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. Employees may need to use multiple types of controls to prevent employee overexposure. Mork should be undertaken in an isolated system such as a "glove-box". Employees should wash their hands and arms upon completion of the assigned task and before engaging in other activities not associated with the isolated system. Within regulated areas, the carcinogen should be stored in sealed containers, or enclosed in a closed system, including piping systems, with any sample ports or openings closed while the carcinogens are contained within. Open-vessel systems are prohibited. Each operation should be provided with continuous local exhaust ventilation so that air movement is always from ordinary work areas to the operation. Exhaust air should be introduced in sufficient volume to maintain correct operation of the local exhaust system. For maintenance and decontamination activities, authorized employee sentering the area should be provided with and required to wear clean, impervious garments, including gloves, boots and continuous-air supplied hood. Prior to removing protective garments the employee should undergo decontamination and be requir
Personal protection	
Eye and face protection	 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 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]
Skin protection	See Hand protection below
Hands/feet protection	 Wear chemical protective gloves, e.g. PVC. Wear safety footwear or safety gumboots, e.g. 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. The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: frequency and durability of glove type is dependent on usage. Important factors in the selection of gloves include: frequency and durability of glove type is dependent on usage. Important factors in the selection of gloves include: glove thickness and dexterity Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent). When only brief contact is expected, 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. When only brief contact is expected, a glove with a protection class of 3

	As defined in ASTM F-739-96 in any application, gloves are rated as:
	Excellent when breakthrough time > 480 min
	Good when breakthrough time > 20 min
	Fair when breakthrough time < 20 min
	Poor when glove material degrades
	For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.
	It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation
	efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on
	consideration of the task requirements and knowledge of breakthrough times.
	Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical
	data should always be taken into account to ensure selection of the most appropriate glove for the task.
	Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:
	• Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only
	likely to give short duration protection and would normally be just for single use applications, then disposed of.
	Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or
	puncture potential
	Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed
	moisturiser is recommended.
	Protective gloves eg. Leather gloves or gloves with Leather facing
	Non-sparking or conductive footwear essential. 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.
Body protection	See Other protection below
Body protection	
	Employees working with confirmed human carcinogens should be provided with, and be required to wear, clean, full body protective clothing
	(smocks, coveralls, or long-sleeved shirt and pants), shoe covers and gloves prior to entering the regulated area. [AS/NZS ISO 6529:2006 or
	national equivalent]
	Employees engaged in handling operations involving carcinogens should be provided with, and required to wear and use half-face filter-type
	respirators with filters for dusts, mists and fumes, or air purifying canisters or cartridges. A respirator affording higher levels of protection may
	be substituted. [AS/NZS 1715 or national equivalent]
	Emergency deluge showers and eyewash fountains, supplied with potable water, should be located near, within sight of, and on the same
	level with locations where direct exposure is likely.
	Prior to each exit from an area containing confirmed human carcinogens, employees should be required to remove and leave protective
	clothing and equipment at the point of exit and at the last exit of the day, to place used clothing and equipment in impervious containers at
	the point of exit for purposes of decontamination or disposal. The contents of such impervious containers must be identified with suitable
	labels. For maintenance and decontamination activities, authorized employees entering the area should be provided with and required to
	wear clean, impervious garments, including gloves, boots and continuous-air supplied hood.
	Prior to removing protective garments the employee should undergo decontamination and be required to shower upon removal of the
	garments and hood.
	For handling explosives or explosive compositions:
Other protection	 Wear close-fitting flame-protection treated clothing closed at the neck and sleeves.
	Cotton underwear, socks and conductive shoes are recommended to avoid human static discharge. During and index and i
	During repair or maintenance activities the potential exists for exposures to toxic metal particulate in excess of the occupational standards.
	Under these circumstances, protecting workers can require the use of specific work practices or procedures involving the combined use of
	ventilation, wet and vacuum cleaning methods, respiratory protection, decontamination, special protective clothing, and when necessary,
	restricted work zones.
	Protective over-garments or work clothing must be worn by persons who may become contaminated with particulate during activities such as
	machining, furnace rebuilding, air cleaning equipment filter changes, maintenance, furnace tending, etc. Contaminated work clothing and
	over-garments must be managed in a controlled manner to prevent secondary exposure to workers of third parties, to prevent the spread of
	particulate to other areas, and to prevent particulate from being taken home by workers.
	Personnel who handle and work with molten metal should utilise primary protective clothing like polycarbonate face shields, fire resistant
	tapper's jackets, neck shades (snoods), leggings, spats and similar equipment to prevent burn injuries. In addition to primary protection,
	secondary or day-to-day work clothing that is fire resistant and sheds metal splash is recommended for use with molten metal. Synthetic
	materials should never be worn even as secondary clothing (undergarments).
	Manufacture may require:
	Non-static flame retardant treated clothing
	Access to deluge Safety shower
	r barner cream.
	Access to deluge Safety shower Barrier cream.

Respiratory protection

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required. Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A-AUS P2	-	A-PAPR-AUS / Class 1 P2
up to 50 x ES	-	A-AUS / Class 1 P2	-
up to 100 x ES	-	A-2 P2	A-PAPR-2 P2 ^

^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

· 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.
 Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)

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

· Try to avoid creating dust conditions.

Where significant concentrations of the material are likely to enter the breathing zone, a Class P3 respirator may be required. Class P3 particulate filters are used for protection against highly toxic or highly irritant particulates. Filtration rate: Filters at least 99.95% of airborne particles

Suitable for:

· Relatively small particles generated by mechanical processes eg. grinding, cutting, sanding, drilling, sawing.

 \cdot Sub-micron thermally generated particles e.g. welding fumes, fertilizer and bushfire smoke

· Biologically active airborne particles under specified infection control applications e.g. viruses, bacteria, COVID-19, SARS

 \cdot Highly toxic particles e.g. Organophosphate Insecticides, Radionuclides, Asbestos

Note: P3 Rating can only be achieved when used with a Full Face Respirator or Powered Air-Purifying Respirator (PAPR). If used with any other respirator, it will only provide filtration protection up to a P2 rating.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

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

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	 Presence of shock and friction Presence of heat source and ignition source Product is considered stable under normal handling conditions. Stable under normal storage conditions. Hazardous polymerization will not occur. Avoid contact with other chemicals.
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

information on toxicological e	
Inhaled	 Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system. Inhalation of dusts, generated by the material during the course of normal handling, may produce severe damage to the health of the individual. Relatively small amounts absorbed from the lungs may prove fatal. Exposure by inhalation to levels between 0.04 and 0.5 ppm nitroglycerin have been reported to result in headaches. Considerable individual variability has been observed. A transient loss of vision has been reported in some cases following overexposure. Exposure to nitroglycerin and its analogues by any route causes dilation of blood vessels in the body and produces a reduction in blood pressure. Exposure to small amounts can result in headaches, dizziness, weakness and nausea. Large exposures can result in vomiting, cyanosis, convulsions, coma and possible circulatory collapse and respiratory paralysis. The prior ingestion of alcohol can potentiate these effects. Temporary tolerance to headache may develop following repeated exposure. This tolerance disappears rapidly, a short absence from exposure may lead to severe poisoning from amounts that were previously safe. Operatives are required to obtain Occupational Health Centre "classification" prior to working in nitroglycerin areas. Nitroglycerin is a potent vasodilator of bot

	Inhalation of freshly formed metal oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in "metal fume fever". Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure. Copper poisoning following exposure to copper dusts and fume may result in headache, cold sweat and weak pulse. Capillary, kidney, liver and brain damage are the longer term manifestations of such poisoning. Inhalation of freshly formed metal oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in "metal fume fever". Symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure. Not normally a hazard due to physical form of product.
Ingestion	Not normally a hazard due to physical form of product.
Skin Contact	Skin contact with the material may produce toxic effects; systemic effects may result following absorption. Limited evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. The material may accentuate any pre-existing dermatitis condition Open cuts, abraded or irritated skin should not be exposed to this material Exposure to copper, by skin, has come from its use in pigments, ointments, ornaments, jewellery, dental amalgams and IUDs and as an antifungal agent and an algicide. Although copper algicides are used in the treatment of water in swimming pools and reservoirs, there are no reports of toxicity from these applications. Reports of allergic contact dermatitis following contact with copper and its salts have appeared in the literature, however the exposure concentrations leading to any effect have been poorly characterised. In one study, patch testing of 1190 eczema patients found that only 13 (1.1%) cross-reacted with 2% copper sulfate in petrolatum. The investigators warned, however, that the possibility of contamination with nickel (an established contact allergen) might have been the cause of the reaction. Copper salts often produce an itching eczema in contact with skin. This is, likely, of a non-allergic nature.
Eye	Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.
Chronic	Long-term exposure to respiratory initiants may result in disease of the airways involving difficult breathing and related systemic problems. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of induciduals, and/or of producing a positive response in experimential animals. Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, infraind or other metabians. Once the airways have become hyper-responsive. further exposure to a transmostive and its inspossible to identify in advance who are likely to become hyper-responsive. Substances than can cause occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances that can cuuse occupational asthma and user opposed to a substances that can cuuse occupational asthma and there should be prevented. Where this is not possible the primary am is to apply adequate standards of control to prevent workers from becoming hyper-responsive. Activities giving face to short-term peak concentrations should receive particular attention when in Kamaagement is being considered. Health user should be appropriate consultation with an occupational health professional over the degree of risk and level of succellance as a structure of a secondary non-specific consequence of the trait of succellance to establish a causal relationship between human exposure to the material and subsequent developmental toxic effects. There is sufficient evidence to provide a strong presumption that human exposure to the material may result in impaired fertility on the basis of - dear evidence in animal studies of impaired fertility in the absence of toxic effects. The substance attention the nix strong effects in the dispersity occurring at around the same dose levels as other

	disease) of elementary aluminium, or its oxides or hydroxides we enter the alveolii (sub 5 um) are able to produce pathogenic eff Excessive exposure to lead can affect the blood, the nervous s The synthesis of haemoglobin is inhibited and can result in ana encephalopathy (brain tissue damage) may result. Other sympl muscles (frequently the hand and wrist), headache, dizziness, a insomnia and metallic taste. High body levels produce cerebros death. Early symptoms of lead poisoning ("plumbism") include a fatigue, headache, weakness, and a metallic taste in the mouth nervousness, myalgia of the arms and legs (often with wrist ann lethargy, visual disturbances progressing to optic neuritis and a convulsions and coma. Neurological effects include mental reta spine, limbs, hips and sometimes the cranial inervated muscles irreversible kidney damage. Lead is a cumulative poison with adverse effects in pregnancy' Lead salts have been reported to cross the placenta and induce birth deformities) in certain animal species. Organometallic lead embryonic and foetal development and postnatal mental develd defects, mental retardation, behavioural disorders and death due imotence, sterility and adverse effects on the sperm which in t include miscarriage and stillbirth in exposed women, or women menses. Exposure by both parents to lead may exacerbate the For copper and its compounds (typically copper chloride): Acute toxicity: There are no reliable acute oral toxicity results a hardness of the skin, scar formation, exudation and reddish cha Repeat dose toxicity: Animal testing shows that very high levels.	he degree of pathogenicity (the ability of a micro-organism to produce infectious when they occur as dusts, fumes or vapours. Only those particles small enough to fects in the lungs. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and the digestive system. Hystem, heart, endocrine organs and the immune system and, in some cases, anorexia and loss of weight, constipation, nausea, vomiting, blue line on the gums, hystem, hyster, tension, papilloedema, cranial nerve paralysis, delirium, ardation, seizures, cerebral palsy and marked muscular contractions that distort the s (dystonia musculorum deformans). Industrial exposure has been associated with [NIOSHTIC] e embryo- and foeto-mortality. They also may have a teratogenic effect (causing d may not produce these effects. Adverse effects of lead on human reproduction, opment have also been recorded. Foetal exposure to lead may result in birth uring the first year of childhood. Paternal effects may include reduced sex drive, turn may increase the potential for increased birth defects. Maternal effects may whose husbands might be exposed, sterility or decreased fertility, and abnormal reproductive effects. Animal testing shows that skin in exposure to
	eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and
Ammunitions with Inert	Congener substances such as 2,4-dinitrophenol were previous eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s Chronic exposure to nitrophenols may produce kidney and liver pathology. Colitis, enteritis, hepatitis, gastritis, hyperplasia of th	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and the spleen and neuritis may occur.
Ammunitions with Inert Projectile (Cartridges for Small Arms)	Congener substances such as 2,4-dinitrophenol were previous eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s Chronic exposure to nitrophenols may produce kidney and liver	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and
Projectile (Cartridges for	Congener substances such as 2,4-dinitrophenol were previous eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s Chronic exposure to nitrophenols may produce kidney and liver pathology. Colitis, enteritis, hepatitis, gastritis, hyperplasia of th TOXICITY Not Available	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and le spleen and neuritis may occur.
Projectile (Cartridges for	Congener substances such as 2,4-dinitrophenol were previous eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s Chronic exposure to nitrophenols may produce kidney and liver pathology. Colitis, enteritis, hepatitis, gastritis, hyperplasia of th TOXICITY Not Available TOXICITY	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and le spleen and neuritis may occur.
Projectile (Cartridges for	Congener substances such as 2,4-dinitrophenol were previous eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s Chronic exposure to nitrophenols may produce kidney and liver pathology. Colitis, enteritis, hepatitis, gastritis, hyperplasia of th TOXICITY Not Available TOXICITY dermal (rat) LD50: >2000 mg/kg ^[1]	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and le spleen and neuritis may occur.
Projectile (Cartridges for Small Arms)	Congener substances such as 2,4-dinitrophenol were previous eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s Chronic exposure to nitrophenols may produce kidney and liver pathology. Colitis, enteritis, hepatitis, gastritis, hyperplasia of th TOXICITY Not Available TOXICITY	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and le spleen and neuritis may occur.
Projectile (Cartridges for Small Arms)	Congener substances such as 2,4-dinitrophenol were previous eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s Chronic exposure to nitrophenols may produce kidney and liver pathology. Colitis, enteritis, hepatitis, gastritis, hyperplasia of th TOXICITY Not Available TOXICITY dermal (rat) LD50: >2000 mg/kg ^[1] Inhalation(Rat) LC50; >5.05 mg/l4h ^[1]	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and le spleen and neuritis may occur.
Projectile (Cartridges for Small Arms)	Congener substances such as 2,4-dinitrophenol were previous eruption, peripheral neuritis, liver and kidney damage, granuloc produce an allergic or irritant dermatitis. Chronic exposures ma may indicate adsorption of potentially harmful amounts of the s Chronic exposure to nitrophenols may produce kidney and liver pathology. Colitis, enteritis, hepatitis, gastritis, hyperplasia of th TOXICITY Not Available TOXICITY dermal (rat) LD50: >2000 mg/kg ^[1] Inhalation(Rat) LC50; >5.05 mg/l4h ^[1] Oral (Rat) LD50; >2000 mg/kg ^[1]	ly used to produce weight loss. Adverse effects of the treatment included skin cytopenia and, rarely, cataract formation. Repeated or prolonged contact may ay produce fatigue and weight loss. A yellow discolouration of the sclerae and urine substance. r damage. Studies in mammals show changes in neurohumoral regulation and le spleen and neuritis may occur. IRRITATION Not Available IRRITATION Not Available

	uermai (rat) LD30. >2000 mg/kg ^c i	Not Available
lead	Inhalation(Rat) LC50; >5.05 mg/l4h ^[1]	
	Oral (Rat) LD50; >2000 mg/kg ^[1]	
	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
copper	Inhalation(Rat) LC50; 0.733 mg/l4h ^[1]	Skin: no adverse effect observed (not irritating) ^[1]
	Oral (Mouse) LD50; 0.7 mg/kg ^[2]	
	TOXICITY	IRRITATION
zinc	Dermal (rabbit) LD50: 1130 mg/kg ^[2]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (Rat) LD50; >2000 mg/kg ^[1]	Skin: no adverse effect observed (not irritating) ^[1]
	ΤΟΧΙΟΙΤΥ	IRRITATION
nitrocellulose	Oral (Rat) LD50; >5000 mg/kg ^[2]	Not Available
	ΤΟΧΙΟΙΤΥ	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Not Available
lead styphnate	Inhalation(Rat) LC50; >5.05 mg/l4h ^[1]	
	Oral (Rat) LD50; >2000 mg/kg ^[1]	
	ΤΟΧΙΟΙΤΥ	IRRITATION
tetrazene	Not Available	Not Available
	ΤΟΧΙΟΙΤΥ	IRRITATION
pentaerythritol tetranitrate	Oral (Rat) LD50; 1660 mg/kg ^[2]	Not Available

	ΤΟΧΙΟΙΤΥ	IRRITATION
nitroglycerin	dermal (rat) LD50: >9560 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (Rat) LD50; 105 mg/kg ^[2]	Skin: adverse effect observed (irritating) ^[1]
	ΤΟΧΙΟΙΤΥ	IRRITATION
lead dioxide	Oral (Rat) LD50; >2000 mg/kg ^[1]	Not Available
	ΤΟΧΙΟΙΤΥ	IRRITATION
barium nitrate	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye (rabbit):100 mg/24h - moderate
	Oral (Rat) LD50; >50<300 mg/kg ^[1]	Skin (rabbit): 500 mg/24h - mild
	ΤΟΧΙΟΙΤΥ	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
antimony trisulfide	Inhalation(Rat) LC50; >5.04 mg/l4h ^[1]	Skin: no adverse effect observed (not irritating) ^[1]
	Oral (Rat) LD50; >2000 mg/kg ^[1]	
	ΤΟΧΙΟΙΤΥ	IRRITATION
barium sulfate	dermal (rat) LD50: >2000 mg/kg ^[1]	Not Available
	Oral (Mouse) LD50; >3000 mg/kg ^[2]	
	ΤΟΧΙΟΙΤΥ	IRRITATION
aluminium	Inhalation(Rat) LC50; >2.3 mg/l4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (Rat) LD50; >2000 mg/kg ^[1]	Skin: no adverse effect observed (not irritating) $[1]$
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	
LEAD	WARNING: Lead is a cumulative poison and has the pote workers.	ential to cause abortion and intellectual impairment to unborn children of pregnant
	Symptoms are tiredness, influenza like respiratory tract in for copper and its compounds (typically copper chloride): Acute toxicity: There are no reliable acute oral toxicity rats and 5 groups of 5 female rats received doses of 1000	

was observed in female rats in the high dose group. Erythropoietic toxicity (anaemia) was seen in both sexes at the 80 mg/kg bw/day. The COPPER

frequency of squamous cell hyperplasia of the forestomach was increased in a dose-dependent manner in male and female rats at all treatment groups, and was statistically significant in males at doses of =20 mg/kg bw/day and in females at doses of =5 mg/kg bw/day doses. The observed effects are considered to be local, non-systemic effect on the forestomach which result from oral (gavage) administration of copper monochloride. Genotoxicity: An in vitro genotoxicity study with copper monochloride showed negative results in a bacterial reverse mutation test with Salmonella typhimurium strains (TA 98, TA 100, TA 1535, and TA 1537) with and without S9 mix at concentrations of up to 1,000 ug/plate. An in vitro test for chromosome aberration in Chinese hamster lung (CHL) cells showed that copper monochloride induced structural and numerical aberrations at the concentration of 50, 70 and 100 ug/mL without S9 mix. In the presence of the metabolic activation system, significant increases of structural aberrations were observed at 50 and 70 ug/mL and significant increases of numerical aberrations were observed at 70 ug/mL. In an in vivo mammalian erythrocyte micronucleus assay, all animals dosed (15 - 60 mg/kg bw) with copper monochloride exhibited similar PCE/(PCE+NCE) ratios and MNPCE frequencies compared to those of the negative control animals. Therefore copper monochloride is not an in vivo mutagen

Carcinogenicity: there was insufficient information to evaluate the carcinogenic activity of copper monochloride.

Reproductive and developmental toxicity: In the combined repeated dose toxicity study with the reproduction/developmental toxicity screening test (OECD TG 422), copper monochloride was given orally (gavage) to Sprague-Dawley rats for 30 days to males and for 39-51 days to females at concentrations of 0, 1.3, 5.0, 20, and 80 mg/kg bw/day. The NOAEL of copper monochloride for fertility toxicity was 80 mg/kg bw/day for the parental animals. No treatment-related effects were observed on the reproductive organs and the fertility parameters assessed. For developmental toxicity the NOAEL was 20 mg/kg bw/day. Three of 120 pups appeared to have icterus at birth; 4 of 120 pups appeared runted at the highest dose tested (80 mg/kg bw/day).

The following information refers to contact allergens as a group and may not be specific to this product. 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 LEAD STYPHNATE 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.

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 TETRAZENE 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.			
NITROGLYCERIN	The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. Substance has been investigated as a tumorigen, mutagen and reproductive effector. Equivocal tumorigen by RTECS criteria. Reproductive effector in rats.			
BARIUM NITRATE	The material may produce moderate eye irritation lead conjunctivitis.	ling to inflammation. Repeated or pro	longed exposure to irritants may produce	
ANTIMONY TRISULFIDE	The substance is 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. * REACH Dossier			
ZINC & NITROCELLULOSE & LEAD STYPHNATE & TETRAZENE & BARIUM SULFATE & ALUMINIUM	No significant acute toxicological data identified in literature search.			
ZINC & NITROGLYCERIN & BARIUM NITRATE	The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.			
Acute Toxicity	*	Carcinogenicity	×	
Skin Irritation/Corrosion	×	Reproductivity	✓	
Serious Eye Damage/Irritation	×	STOT - Single Exposure	×	
Respiratory or Skin sensitisation	✓	STOT - Repeated Exposure	×	
Mutagenicity	×	Aspiration Hazard	×	

SECTION 12 Ecological information

Toxicity

Ammunitions with Inert	Endpoint	Test Duration (hr)	Species		Value	Source
Projectile (Cartridges for Small Arms)	Not Available	Not Available	Not Available		Not Available	Not Availabl
	Endpoint	Test Duration (hr)	Species	Val	ue	Sourc
	NOEC(ECx)	Not Available	Crustacea	0.0	51mg/L	5
lead	EC50	72h	Algae or other aquatic plants	1.191mg/L		4
	EC50	96h	Algae or other aquatic plants	0.2	82-0.864mg/l	4
	LC50	96h	Fish	1.1	7mg/l	4
	Endpoint	Test Duration (hr)	Species	Valu	le	Sourc
	EC50(ECx)	24h	Algae or other aquatic plants	<0.0	001mg/L	4
	EC50	72h	Algae or other aquatic plants	0.011-0.017mg/L		4
copper	EC50	48h	Crustacea	<0.001mg/L		4
	EC50	96h	Algae or other aquatic plants	0.03-0.058mg/l		4
	LC50	96h	Fish	0.005-0.06mg/l		4
	Endpoint	Test Duration (hr)	Species	Val	ue	Sourc
	EC50(ECx)	72h	Algae or other aquatic plants	0.0	05mg/l	4
	EC50	72h	Algae or other aquatic plants	0.0	05mg/l	4
zinc	EC50	48h	Crustacea	1.4	mg/l	2
	EC50	96h	Algae or other aquatic plants	0.2	64-0.881mg/l	4
	LC50	96h	Fish	0.1	6mg/L	4
	Endpoint	Test Duration (hr)	Species		Value	Source
nitrocellulose	Not Available	Not Available	Not Available		Not Available	Not Availab
	Endpoint	Test Duration (hr)	Species		Value	Sourc
lead styphnate	EC10(ECx)	48h	Crustacea		0.5mg/l	2
	EC50	48h	Crustacea		7.02mg/l	2

Continued...

Ammunitions with Inert Projectile (Cartridges for Small Arms)

	Endpoint	Test Duration (hr)	Species	Value	Source
tetrazene	tetrazene Not Available Not Available Not Available		Not Available	Not Available	
	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50(ECx)	24h	Crustacea	>49mg/l	4
pentaerythritol tetranitrate	EC50	48h	Crustacea	>49mg/l	4
	LC50	96h	Fish	~926mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	1440h	Fish	0.03mg/l	2
nitroglycerin	EC50	48h	Crustacea	4655mg/l	1
	EC50	96h	Algae or other aquatic plants	0.1-1.3mg/l	4
	LC50	96h	Fish	1.69-2.14mg/l	4
	Endpoint	Test Duration (hr)	Species	Value	Source
lead dioxide	Not Available	Not Available	Not Available	Not Available	Not Availabl
barium nitrate	Endpoint	Test Duration (hr)	Species	Value	Sourc
	EC50	72h	Algae or other aquatic plants	>1.15mg/l	2
	NOEC(ECx)	72h	Algae or other aquatic plants	>=1.15mg/l	2
	EC50	48h	Crustacea	>=16<=18mg/l	2
	LC50	96h	Fish	>3.5mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	EC50	72h	Algae or other aquatic plants	>2.4mg/l	2
	NOEC(ECx)	2160h	Algae or other aquatic plants	0.032mg/l	2
antimony trisulfide	EC50	48h	Crustacea	423.45mg/l	2
	EC50	96h	Algae or other aquatic plants	0.61mg/l	2
	LC50	96h	Fish	0.93mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	NOEC(ECx)	72h	Algae or other aquatic plants	>=1.15mg/l	2
barium sulfate	EC50	72h	Algae or other aquatic plants	>1.15mg/l	2
	EC50	48h	Crustacea	32mg/l	4
	LC50	96h	Fish	>3.5mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Sourc
	LC50	96h	Fish	0.078-0.108mg/l	2
	NOEC(ECx)	48h	Crustacea	>100mg/l	1
aluminium	EC50	72h	Algae or other aquatic plants	0.2mg/l	2
	EC50	48h	Crustacea	1.5mg/l	2
	EC50	96h	Algae or other aquatic plants	0.024mg/l	2
Legend:	Extracted from Ecotox databas	1. IUCLID Toxicity Data 2. Europe EC	Algae or other aquatic plants CHA Registered Substances - Ecotoxicological Info Aquatic Hazard Assessment Data 6. NITE (Japan	rmation - Aquatic Toxicity 4.	US EP.

- Bioconcentration Data 8. Vendor Data

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

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
tetrazene	HIGH	HIGH
nitroglycerin	LOW (Half-life = 14 days)	LOW (Half-life = 0.73 days)

Bioaccumulative potential

tetrazene $I OW (I og KOW2.0204)$	Bioaccumulation	Ingredient
	LOW (LogKOW = -2.0204)	tetrazene

Mobility in soil

Ingredient	Mobility
tetrazene	LOW (KOC = 238.4)

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 SDS and observe all notices pertaining to the product.
	For nitroglycerine and similar products:
	Contaminated cloths and sawdust are disposed of at the burning ground by following the appropriate Factory Procedure.
	The spill area is decontaminated using NG Decontamination Solution'
	Buildings and equipment taken from service in an NG environment must be decontaminated and inspected.
	Explosives which are surplus, deteriorated or considered unsafe for transport, storage or use shall be destroyed and the statutory authorities shall be notified.
	 Explosives must not be thrown away, buried, discarded or placed with garbage.
	 This material may be disposed of by burning or detonation but the operation must be performed under the control of a person competent in
	 This material may be usposed of by burning of deconation but the operation must be performed under the control of a person completent in the destruction of explosives.
	Disposal by detonation:
	 The explosives to be destroyed must be placed in direct contact with fresh priming charge in a hole which is at least 0.6 metre deep and th
	adequately stemmed.
	 No detonators shall be inserted into defective explosives.
	Personnel must be evacuated to a safe distance prior to initiation/firing of the charge.
	Disposal by burning:
roduct / Packaging disposal	Make a sawdust bed or trail adequate for the quantity of explosives to be burned, approximately 400 mm wide and 40 mm deep, upon whic the explosive will be laid.
	If sawdust is not available, newspaper may be used.
	Normal precautions shall be taken to avoid the spread of fire.
	Individual trails should not be closer together than 600 mm and should contain not more than 12 kg of explosive.
	Trails should be side by side, NOT in-line, and not more than four should be set up at one time.
	Remove any explosive that is not to be burnt to a distance of at least 300 metre.
	Sufficient diesel oil (never petrol or other highly flammable liquid) should be used to thoroughly wet the sawdust (or paper) at least 4 litre petrail is recommended.
	Light the trail from a long, rolled paper wick which should be placed downwind and in contact with the end 1m of trail that is not covered with
	explosive. The wind should blow so that the flame from the wick (and later from the burning explosive) will blow away from the unburned
	explosive as detonation is more likely to occur if the explosive is preheated by the flame.
	If plastic igniter cord (slow) is available, its use for lighting is recommended instead of paper. One end should be coiled into the sawdust or
	under the paper and the other end lit from a minimum distance of 7m from the trail.
	Retire at least 300m or to a safe place.
	DO NOT return to the site for at least 30 minutes after the burning has apparently finished.
	If the fire goes out do not approach for at least 15 minutes after all trace of fire has gone.
	DO NOT add more diesel oil unless certain that the flame is completely extinguished.
	[DYNO]
	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 sever may be subject to local laws and regulations and these should be considered first.

SECTION 14 Transport information

Labels Required Image: Application of the second second

Land	transport (ADG)	

• • •			
UN number	0012		
UN proper shipping name	ARTRIDGES FOR WEAPONS, INERT PROJECTILE or CARTRIDGES, SMALL ARMS		
Transport hazard class(es)	Class 1.4S Subrisk Not Applicable		
Packing group	Not Applicable		
Environmental hazard	Environmentally hazardous		
Special precautions for user	Special provisions 364 Limited quantity 5 kg		

UN number	0012			
UN proper shipping name	Cartridges for weapons,	inert projectile		
Transport hazard class(es)	ICAO/IATA Class ICAO / IATA Subrisk ERG Code	ICAO / IATA Subrisk Not Applicable		
Packing group	Not Applicable			
Environmental hazard	Environmentally hazardous			
	Special provisions		A802	
	Cargo Only Packing Instructions		130	
	Cargo Only Maximum Qty / Pack		100 kg	
Special precautions for user	Passenger and Cargo Packing Instructions		130	
	Passenger and Cargo Maximum Qty / Pack		25 kg	
	Passenger and Cargo	Limited Quantity Packing Instructions	Forbidden	
	Passenger and Cargo	Limited Maximum Qty / Pack	Forbidden	

Sea transport (IMDG-Code / GGVSee)

UN number	0012	0012		
UN proper shipping name	CARTRIDGES FOR W	EAPONS, INERT PROJECTILE or CARTRIDGES, SMALL ARMS		
Transport hazard class(es)				
Packing group	Not Applicable			
Environmental hazard	Marine Pollutant			
Special precautions for user	EMS Number Special provisions Limited Quantities	F-B, S-X 364 5 kg		

Transport in bulk according to $\ensuremath{\mathsf{Annex}}$ II of $\ensuremath{\mathsf{MARPOL}}$ and the IBC code

Not Applicable

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

•	
Product name	Group
lead	Not Available
copper	Not Available
zinc	Not Available
nitrocellulose	Not Available
lead styphnate	Not Available
tetrazene	Not Available
pentaerythritol tetranitrate	Not Available
nitroglycerin	Not Available
lead dioxide	Not Available
barium nitrate	Not Available
antimony trisulfide	Not Available
barium sulfate	Not Available
aluminium	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
lead	Not Available
copper	Not Available
zinc	Not Available
nitrocellulose	Not Available
lead styphnate	Not Available
tetrazene	Not Available
pentaerythritol tetranitrate	Not Available
nitroglycerin	Not Available
lead dioxide	Not Available
barium nitrate	Not Available
antimony trisulfide	Not Available

Product name	Ship Type				
barium sulfate	Not Available				
aluminium	Not Available				
ECTION 15 Regulate	bry information				
•	onmental regulations / legislation specific for the su	bstance or mixture			
lead is found on the follo					
	ical Information System (HCIS) - Hazardous Chemicals Uniform Scheduling of Medicines and Poisons (SUSMP) -	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs International Agency for Research on Cancer (IARC) - Agents Classified by the IARC			
Australian Inventory of Indu	ustrial Chemicals (AIIC)	Monographs - Group 1: Carcinogenic to humans			
Chemical Footprint Project	- Chemicals of High Concern List	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 2B: Possibly carcinogenic to humans International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)			
copper is found on the fo	ollowing regulatory lists				
Australia Standard for the	Uniform Scheduling of Medicines and Poisons (SUSMP) -	Australian Inventory of Industrial Chemicals (AIIC)			
Schedule 4	Inform Schoduling of Madiaines and Drivers (OLIOND)	International WHO List of Proposed Occupational Exposure Limit (OEL) Values for			
Australia Standard for the Schedule 5	Uniform Scheduling of Medicines and Poisons (SUSMP) -	Manufactured Nanomaterials (MNMS)			
Australia Standard for the I Schedule 6	Uniform Scheduling of Medicines and Poisons (SUSMP) -				
zinc is found on the follo	wing regulatory lists				
	ical Information System (HCIS) - Hazardous Chemicals	International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nacomaterials (MNMS)			
Australian Inventory of Indu	ustriai Unemicais (AIIU)	Manufactured Nanomaterials (MNMS)			
	n the following regulatory lists				
Australia Hazardous Chem Australian Inventory of Indu	ical Information System (HCIS) - Hazardous Chemicals ustrial Chemicals (AIIC)	International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)			
lead styphnate is found o	on the following regulatory lists				
	ical Information System (HCIS) - Hazardous Chemicals	Australian Inventory of Industrial Chemicals (AIIC)			
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 10 / Appendix C		Chemical Footprint Project - Chemicals of High Concern List			
Australia Standard for the U	Uniform Scheduling of Medicines and Poisons (SUSMP) -	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs			
Schedule 5 Australia Standard for the I Schedule 6	Uniform Scheduling of Medicines and Poisons (SUSMP) -	International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)			
	following regulatory lists				
Australian Inventory of Indu		International WHO List of Proposed Occupational Exposure Limit (OEL) Values for			
Additional inventory of inde		Manufactured Nanomaterials (MNMS)			
pentaerythritol tetranitrat	te is found on the following regulatory lists				
	ical Information System (HCIS) - Hazardous Chemicals	FEI Equine Prohibited Substances List - Banned Substances			
Australia Standard for the Schedule 4	Uniform Scheduling of Medicines and Poisons (SUSMP) -	FEI Equine Prohibited Substances List (EPSL)			
Australian Inventory of Indu	ustrial Chemicals (AIIC)				
nitroglycerin is found on	the following regulatory lists				
Australia Hazardous Chem	ical Information System (HCIS) - Hazardous Chemicals	Australian Inventory of Industrial Chemicals (AIIC)			
Australia Standard for the I Schedule 3	Uniform Scheduling of Medicines and Poisons (SUSMP) -	FEI Equine Prohibited Substances List - Controlled Medication			
	Uniform Scheduling of Medicines and Poisons (SUSMP) -	FEI Equine Prohibited Substances List (EPSL)			
	the following regulatory lists				
	hical Information System (HCIS) - Hazardous Chemicals	Chemical Footprint Project - Chemicals of High Concern List			
	Uniform Scheduling of Medicines and Poisons (SUSMP) -	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC			
Schedule 10 / Appendix C	Inform Scheduling of Medicines and Deisens (CLICMD)	Monographs			
Schedule 5	Uniform Scheduling of Medicines and Poisons (SUSMP) -	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 2A: Probably carcinogenic to humans			
Australia Standard for the I Schedule 6	Uniform Scheduling of Medicines and Poisons (SUSMP) -	International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)			
Australian Inventory of Indu	ustrial Chemicals (AIIC)				
barium nitrate is found o	n the following regulatory lists				
	ical Information System (HCIS) - Hazardous Chemicals	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC			
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) -		Monographs International Agency for Research on Cancer (IARC) - Agents Classified by the IARC			
Schedule 6					

antimony trisulfide is found on the following regulatory lists

Continued...

Ammunitions with Inert Projectile (Cartridges for Small Arms)

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) -Schedule 6

Australian Inventory of Industrial Chemicals (AIIC)

barium sulfate is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

aluminium is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australian Inventory of Industrial Chemicals (AIIC)

National Inventory Status

Chemical Footprint Project - Chemicals of High Concern List International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

International WHO List of Proposed Occupational Exposure Limit (OEL) Values for Manufactured Nanomaterials (MNMS)

National Inventory	Status			
Australia - AIIC / Australia Non-Industrial Use	Yes			
Canada - DSL	No (tetrazene)			
Canada - NDSL	No (lead; copper; zinc; nitrocellulose; lead styphnate; pentaerythritol tetranitrate; nitroglycerin; lead dioxide; barium nitrate; antimony trisulfide; barium sulfate; aluminium)			
China - IECSC	No (lead styphnate; tetrazene)			
Europe - EINEC / ELINCS / NLP	No (nitrocellulose)			
Japan - ENCS	No (lead; copper; zinc; tetrazene; aluminium)			
Korea - KECI	No (tetrazene)			
New Zealand - NZIoC	Yes			
Philippines - PICCS	No (lead styphnate; tetrazene; pentaerythritol tetranitrate)			
USA - TSCA	Yes			
Taiwan - TCSI	No (tetrazene)			
Mexico - INSQ	No (tetrazene)			
Vietnam - NCI	No (lead styphnate; tetrazene)			
Russia - FBEPH	No (lead styphnate; tetrazene)			
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.			

SECTION 16 Other information

Revision Date	14/03/2022
Initial Date	14/03/2022

SDS Version Summary

Version	Date of Update	Sections Updated
2.1	14/03/2022	Acute Health (eye), Acute Health (inhaled), Acute Health (skin), Acute Health (swallowed), Chronic Health, Classification, Fire Fighter (fire/explosion hazard)

Other information

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

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

Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average PC-STEL: Permissible Concentration-Short Term Exposure Limit IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure Limit。 IDLH: Immediately Dangerous to Life or Health Concentrations ES: Exposure Standard **OSF: Odour Safety Factor** 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** AIIC: Australian Inventory of Industrial Chemicals DSL: Domestic Substances List NDSL: Non-Domestic Substances List IECSC: Inventory of Existing Chemical Substance in China

EINECS: European INventory of Existing Commercial chemical Substances ELINCS: European List of Notified Chemical Substances NLP: No-Longer Polymers ENCS: Existing and New Chemical Substances Inventory KECI: Korea Existing Chemicals Inventory NZIoC: New Zealand Inventory of Chemicals PICCS: Philippine Inventory of Chemicals and Chemical Substances TSCA: Toxic Substances Control Act TCSI: Taiwan Chemical Substance Inventory INSQ: Inventario Nacional de Sustancias Químicas NCI: National Chemical Inventory

FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

This document is copyright.

Apart from any fair dealing for the purposes of private study, research, review or criticism, as permitted under the Copyright Act, no part may be reproduced by any process without written permission from CHEMWATCH.

TEL (+61 3) 9572 4700.