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# Natural Choice Products Ltd

Safety Data Sheet Toilet Bowl Cleaner

#### 1.IDENTIFICATION OF THE MATERIAL AND SUPPLIER

**Product Name:** Toilet Bowl Cleaner

**Recommend Use:** General clean the toilet bowl **Supplier Name:** Natural Choice Products Ltd

**Address:** 4/26 Bancroft Crescent, Glendene, Auckland

**Telephone:** (+64) 9 441 4238

Website: <a href="https://www.naturalchoice.co.nz">www.naturalchoice.co.nz</a>
Emergency Phone: National Poisons Centre

0800 POISON (0800 764 766)

# 2. HAZARDS IDENTIFICATION

GHS Classification
Acute Aquatic Hazard Category 1
Metal Corrosion Category 1
Serious Eye Damage Category 1
Skin Corrosion/Irritation Category 1C
Skin Sensitizer Category 1
EMERGENCY OVERVIEW
HAZARD
DANGER





Determined by Chemwatch using GHS/HSNO criteria: 6.1D, 6.5B 8.1A 8.2C 8.3A 9.1A,9.1D
May cause allergic skin reaction
May be corrosive to metals
Causes severe skin burns and eye damage
Causes serious eye damage
Very toxic to aquatic life

# PRECAUTIONARY STATEMENTS

#### **Prevention**

Keep only in original container.

Do not breathe dust/fume/gas/mist/vapours/spray.

Avoid breathing dust/fume/gas/mist/vapours/spray.

Wash thoroughly after handling.

Contaminated work clothing should not be allowed out of the workplace.

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Avoid release to the environment.

Wear protective gloves/protective clothing/eye protection/face protection.

# **Response:**

IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.

IF ON SKIN: Wash with plenty of soap and water.

IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.

IF INHALED: Remove to fresh air and keep at rest in a position comfortable for breathing.

IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

Immediately call a POISON CENTER or doctor/physician.

If skin irritation or rash occurs: Get medical advice/attention.

Wash contaminated clothing before reuse.

Absorb spillage to prevent material damage.

Collect spillage

# **Storage:**

Store locked up.

Store in corrosive resistant container or with a resistant inner liner.

#### 3. COMPOSITION/ INFORMATION ON INGREDIENTS

Ingredient Name	CAS Number	Concentration %w/w
sodium hypochlorite	7681-52-9	10-12
Sodium hydroxide	1310-73-2	<5

Other ingredients, determined not to be hazardous subject to the provisions of the Hazardous Substances (Identification) Regulations 2001, make up the product concentration to 100%.

#### 4. FIRST AID MEASURES

For advice, contact National Poisons Centre (0800 POISON; 0800 764 766) or a doctor. Have product container or label available.

#### **Swallowed**

- For advice, contact a Poisons Information Centre or a doctor at once.
- Urgent hospital treatment is likely to be needed.
- If swallowed do NOT induce vomiting.
- If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.

#### Skin

If skin & 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.

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- 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.

# Eye

If this product comes in contact with the eyes:

- Immediately hold eyelids apart and flush the eye continuously with running water.
- Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
- Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.
- Transport to hospital or doctor without delay.

# Inhalation

- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.
- Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
- Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.
- Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema.
- Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs).
- As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested.
- Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered.

# Advice to Physician

Treat symptomatically.

Excellent warning properties force rapid escape of personnel from chlorine vapour thus most inhalations are mild to moderate. If escape is notpos sible, exposure to high concentrations for a very short time can result in dyspnea, haemophysis and cyanosis with later complications being tracheobroncho-pneumonitis and pulmonary oedema.for corrosives:

#### **Basic Tratment**

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary oedema.

For acute or repeated exposures to hypochlorite solutions:

• Release of small amounts of hypochlorous acid and acid gases from the stomach following ingestion, is usually too low to cause damage but may beirritating to mucous membranes. Buffering with

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antacid may be helpful if discomfort is evident.

- Evaluate as potential caustic exposure.
- Decontaminate skin and eyes with copious saline irrigation. Check exposed eyes for corneal abrasions with fluorescein staining.
- Emesis or lavage and catharsis may be indicated for mild caustic exposure.
- Depending on the degree of exposure, periodic medical examination is indicated. The symptoms of lung oedema often do not manifest until a few hourshave passed and they are aggravated by physical effort.

#### 5. FIRE FIGHTING MEASURES

#### **EXTINGUISHING MEDIA**

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

#### FIRE/EXPLOSION HAZARD

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

May emit corrosive fumes.

FIRE INCOMPATIBILITY: None known.

#### PERSONAL PROTECTION

Gas tight chemical resistant suit.

# 6. ACCIDENTAL RELEASE MEASURES

#### MINOR SPILLS

- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb spill with sand, earth, inert material or vermiculite.

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

#### 7. HANDLING AND STORAGE

#### PROCEDURE FOR HANDLING

- DO NOT allow clothing wet with material to stay in contact with skin.
- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Avoid contact with moisture.

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#### SUITABLE CONTAINER

Liquid inorganic hypochlorites shall not to be transported in unlined metal drums. Inner packagings shall be fitted with vented closures and plastics drums and carboys shall have vented closures or be performance tested to a minimum of 250 kPa.

- Lined metal can, lined metal pail/ can.
- Plastic pail.
- Polyliner drum.
- Packing as recommended by manufacturer.

# For low viscosity materials

- Drums and jerricans must be of the non-removable head type.
- Where a can is to be used as an inner package, the can must have a screwed enclosure. <</>>.

# STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry, well-ventilated area.
- Store away from incompatible materials and foodstuff containers.

#### 8. EXPOSURE CONTROLS: PERSONAL PROTECTION

#### EXPOSURE CONTROLS

Source	Material	TWA	TWA	STEL	STEL	Peak
		ppm	mg/m³	mg/m³	ppm	mg/m³
New Zealand Workplace	sodium hypochlorite	0.5	1.5	1	2	
Exposure Standards (WES)	(Chlorine)					
New Zealand Workplace	Sodium hydroxide					2
Exposure Standards (WES)						

The following materials had no OELs on our records Water: CAS: 7732- 18- 5

# PERSONAL PROTECTION RESPIRATOR

Type B-P Filter of sufficient capacity

#### **EYE**

- Chemical goggles.
- Full face shield may be required for supplementary but never for primary protection of eyes
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A
  written policy document, describing thewearing of lens or restrictions on use, should be created for
  each workplace or task. This should include a review of lens absorption and adsorption for the class
  of chemicals in use and an account of injury experience. Medical and first-aid personnel should be
  trained in their removal and suitable equipment should be readily available. In the event of chemical

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exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment

• only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].

# HANDS/FEET

- Wear chemical protective gloves, eg. PVC.
- Wear safety footwear or safety gumboots, eg. Rubber.
- When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.

#### NOTE:

- The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to
- avoid all possible skin contact.
- Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.
- Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: such as:
- frequency and duration of contact,
- chemical resistance of glove material,
- glove thickness and
- dexterity.
- OTHER
  - Overalls.
  - PVC Apron.
  - PVC protective suit may be required if exposure severe.
  - Eyewash unit.

#### ENGINEERING CONTROLS

General exhaust is adequate under normal operating conditions. Local exhaust ventilation may be required in special circumstances.

# 9. PHYSICAL AND CHEMICAL PROPERTIES

Physical state:

Colour:

Pearly
Odour:

Melting Point:

Vapour pressure:

Specific gravity:

Liquid
Pearly

Not Available
Not Available
Not Available

Flash point Product does not support combustion

Vapour density Not Available PH Ph> PH14

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#### 10. STABILITY AND REACTIVITY

#### CONDITIONS CONTRIBUTING TO INSTABILITY

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

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

# 11. TOXICOLOGICAL INFORMATION POTENTIAL HEALTH EFFECTS ACUTE HEALTH EFFECTS

**Eye contact:** The material can produce chemical burns to the eye following direct

contact. Vapours or mists may be extremely irritating.

When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after

instillation.

Hypochlorite in pool water at concentrations of 1 ppm chlorine or less is non irritating to eyes if the pH is higher than 7.2 (slightly alkaline). At lower pH, a sensation of stinging, smarting of eyes with transient

reddening may occur but generally no injury.

Eye contact with a 5% hypochlorite solution may produce a temporary burning discomfort and slight irritation of the corneal epithelium with

noinjury.

The material can produce severe chemical burns to the eye following

direct contact. Vapours or mists may be extremely irritating.

**Inhalation:** Evidence shows, or practical experience predicts, that the material

produces irritation of the respiratory system in a substantial number of

individuals following inhalation

**Chronic effects:** Repeated or prolonged exposure to corrosives may result in the erosion

of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. On the basis, primarily, of animal experiments, concern has been expressed by at least one classification body that the material may produce carcinogenic or mutagenic effects; in

respect of the available information, however, there presently exists inadequate data for making a satisfactory

madequate data for making a satisfactor

assessment.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or

biochemical systems.

There exists limited evidence that shows that skin contact with the material is capable either of inducing a sensitisation reaction in a significantnumber of individuals, and/or of producing positive response

in experimental animals.

Reduced respiratory capacity may result from chronic low level

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exposure to chlorine gas. Chronic poisoning may result in coughing, severe chest pains, sore throat and haemoptysis (bloody sputum). Delayed effects can include shortness of breath, violent headaches, pulmonary oedema and pneumonia.

**Toxicity and Irritation** 

Hypochlorite salts are classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans.

Evidence of carcinogenicity may be inadequate or limited in animal testing.

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition knownas reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound.

Hypochlorite salts are extremely corrosive and can cause severe damage to the eyes and skin.

A number of fibrosarcomas and squamous cell carcinomas were observed in mice treated dermally with repeated subcarcinogenic doses of 4-nitroquinoline-oxide, followed by dermal treatment with sodium hypochlorite.

**CARCINOGEN** 

Hypochlorite salts International Agency for Research on Group 3

Cancer (IARC) - Agents Reviewed by the

IARC Monographs

#### 12. ECOLOGICAL INFORMATION

Very toxic to aquatic organisms.

This material and its container must be disposed of as hazardous waste.

Avoid release to the environment.

Refer to special instructions/ safety data sheets.

# 13. DISPOSAL CONSIDERATION

- Recycle where possible
- Otherwise ensure that:
- licensed contractors dispose of the product and its container.
- disposal occurs at a licenced facility

#### 14. TRANSPORT INFORMATION



Proper Shipping Name CORROSIVE,

UN No: 1719

Dangerous Goods Class: 8

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# Toilet Bowl Cleaner Safety Data Sheet



Hazchem Code: 2X
Packing Group: III
Labels Required: CORROSIVE

HAZCHEM:

2R

Land Transport UNDG:

Class or division: 8 Subsidiary risk: None UN No.: 1719 UN packing group: III

# 15. REGULATORY INFOMATION

HSNO Classifications: 6.1D: Substances that are acutely toxic - Harmful

6.5B: Substances that are contact sensitisers8.1A: Substances that are corrosive to metals

8.2C: Substances that are corrosive to dermal tissue UN PGIII

8.3A: Substances that are corrosive to ocular tissue

9.1C: Substances that are harmful in the aquatic environment 9.1D: Substances that are slightly harmful to the aquatic

# 16. OTHER INFORMATION

Date of previous issue: dd/mm/yyyy

New Zealand National Poison Information Centre (24 hours): 0800 POISON [764 766] New Zealand

Emergency Services: 111

For General Information: Natural Choice Products Ltd PH: (09) 441 4238

Natural Choice Products Ltd has taken care in compiling this information. No liability is accepted directly or indirectly from its application as conditions of use are outside the Company's control. End users are obliged to conform to relevant Local Government regulation.

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