



## OzCrop Methoxyfen 240 Insecticide

### OzCrop

Chemwatch: 5489-95

Version No: 2.1

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard Alert Code: 2

Issue Date: 07/10/2021

Print Date: 21/10/2021

S.GHS.AUS.EN

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

### Product Identifier

Product name	OzCrop Methoxyfen 240 Insecticide
Chemical Name	Not Applicable
Synonyms	APVMA Approval No: 91174/131114
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	Insecticide.
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### Details of the supplier of the safety data sheet

Registered company name	OzCrop
Address	G13/25 Solent Circuit Norwest NSW 2153 Australia
Telephone	+61 2 8123 0170
Fax	+61 2 8123 0171
Website	<a href="http://www.ozcrop.com.au">http://www.ozcrop.com.au</a>
Email	orders@ozcrop.com.au

### Emergency telephone number

Association / Organisation	In Transport Emergency DIAL 000
Emergency telephone numbers	1800 033 111 (24 hours - Australia wide)
Other emergency telephone numbers	Not Available

## SECTION 2 Hazards identification

### Classification of the substance or mixture

Poisons Schedule	S6
Classification [1]	Hazardous to the Aquatic Environment Long-Term Hazard Category 3
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

### Label elements

Hazard pictogram(s)	Not Applicable
Signal word	Not Applicable

### Hazard statement(s)

H412	Harmful to aquatic life with long lasting effects.
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### Precautionary statement(s) Prevention

P273	Avoid release to the environment.
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### Precautionary statement(s) Response

Not Applicable

### Precautionary statement(s) Storage

Not Applicable

### Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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## SECTION 3 Composition / information on ingredients

### Substances

See section below for composition of Mixtures

### Mixtures

CAS No	%[weight]	Name
161050-58-4	10-30	<u>methoxyfenozid</u>
Not Available		(240 g/L)
107-21-1	1-10	<u>ethylene glycol</u>
Not Available		(60 g/L)
30525-89-4	<1	<u>paraformaldehyde</u>
Not Available		(1.5 g/L)

**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

<b>Eye Contact</b>	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> <li>▶ Wash out immediately with fresh running water.</li> <li>▶ 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.</li> <li>▶ Seek medical attention without delay; if pain persists or recurs seek medical attention.</li> <li>▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
<b>Skin Contact</b>	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Immediately remove all contaminated clothing, including footwear.</li> <li>▶ Flush skin and hair with running water (and soap if available).</li> <li>▶ Seek medical attention in event of irritation.</li> </ul>
<b>Inhalation</b>	<ul style="list-style-type: none"> <li>▶ If fumes or combustion products are inhaled remove from contaminated area.</li> <li>▶ Lay patient down. Keep warm and rested.</li> <li>▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>▶ 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.</li> <li>▶ Transport to hospital, or doctor, without delay.</li> </ul>
<b>Ingestion</b>	<ul style="list-style-type: none"> <li>▶ <b>If swallowed do NOT induce vomiting.</b></li> <li>▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>▶ Observe the patient carefully.</li> <li>▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>▶ Seek medical advice.</li> </ul>

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

Treat symptomatically.

To treat poisoning by the higher aliphatic alcohols (up to C7):

- ▶ Gastric lavage with copious amounts of water.
- ▶ It may be beneficial to instill 60 ml of mineral oil into the stomach.
- ▶ Oxygen and artificial respiration as needed.
- ▶ Electrolyte balance: it may be useful to start 500 ml. M/6 sodium bicarbonate intravenously but maintain a cautious and conservative attitude toward electrolyte replacement unless shock or severe acidosis threatens.
- ▶ To protect the liver, maintain carbohydrate intake by intravenous infusions of glucose.
- ▶ Haemodialysis if coma is deep and persistent. [GOSSELIN, SMITH HODGE: Clinical Toxicology of Commercial Products, Ed 5]

#### BASIC TREATMENT

- ▶ 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 shock.
- ▶ Monitor and treat, where necessary, for pulmonary oedema.
- ▶ Anticipate and treat, where necessary, for seizures.
- ▶ **DO NOT use emetics.** Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.
- ▶ Give activated charcoal.

#### ADVANCED TREATMENT

- ▶ Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- ▶ Positive-pressure ventilation using a bag-valve mask might be of use.
- ▶ Monitor and treat, where necessary, for arrhythmias.
- ▶ Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- ▶ If the patient is hypoglycaemic (decreased or loss of consciousness, tachycardia, pallor, dilated pupils, diaphoresis and/or dextrose strip or glucometer readings below 50 mg), give 50% dextrose.
- ▶ Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- ▶ Drug therapy should be considered for pulmonary oedema.
- ▶ Treat seizures with diazepam.
- ▶ Proparacaine hydrochloride should be used to assist eye irrigation.

#### EMERGENCY DEPARTMENT

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- ▶ Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- ▶ Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- ▶ Acidosis may respond to hyperventilation and bicarbonate therapy.
- ▶ Haemodialysis might be considered in patients with severe intoxication.
- ▶ Consult a toxicologist as necessary. BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For C8 alcohols and above.

Symptomatic and supportive therapy is advised in managing patients.

For acute or short term repeated exposures to ethylene glycol:

- ▶ Early treatment of ingestion is important. Ensure emesis is satisfactory.
- ▶ Test and correct for metabolic acidosis and hypocalcaemia.
- ▶ Apply sustained diuresis when possible with hypertonic mannitol.
- ▶ Evaluate renal status and begin haemodialysis if indicated. [I.L.O]
- ▶ Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective.
- ▶ Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution.
- ▶ Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites.
- ▶ Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days.
- ▶ Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis.

[Ellenhorn and Barceloux: Medical Toxicology]

It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated with such exposures.

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

The material may induce methaemoglobinaemia following exposure.

- ▶ Initial attention should be directed at oxygen delivery and assisted ventilation if necessary. Hyperbaric oxygen has not demonstrated substantial benefits.
- ▶ Hypotension should respond to Trendelenburg's position and intravenous fluids; otherwise dopamine may be needed.
- ▶ Symptomatic patients with methaemoglobin levels over 30% should receive methylene blue. (Cyanosis, alone, is not an indication for treatment). The usual dose is 1-2 mg/kg of a 1% solution (10 mg/ml) IV over 50 minutes; repeat, using the same dose, if symptoms of hypoxia fail to subside within 1 hour.
- ▶ Thorough cleansing of the entire contaminated area of the body, including the scalp and nails, is of utmost importance.

### BIOLOGICAL EXPOSURE INDEX - BEI

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

Determinant	Index	Sampling Time	Comment
1. Methaemoglobin in blood	1.5% of haemoglobin	During or end of shift	B, NS, SQ

B: Background levels occur in specimens collected from subjects **NOT** exposed

NS: Non-specific determinant; also observed after exposure to other materials

SQ: Semi-quantitative determinant - Interpretation may be ambiguous; should be used as a screening test or confirmatory test.

## SECTION 5 Firefighting measures

### Extinguishing media

- ▶ Alcohol stable foam.
- ▶ Dry chemical powder.
- ▶ BCF (where regulations permit).
- ▶ Carbon dioxide.
- ▶ Water spray or fog - Large fires only.

### Special hazards arising from the substrate or mixture

<b>Fire Incompatibility</b>	▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
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### Advice for firefighters

<b>Fire Fighting</b>	<ul style="list-style-type: none"> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear full body protective clothing with breathing apparatus.</li> <li>▶ Prevent, by any means available, spillage from entering drains or water course.</li> <li>▶ Use water delivered as a fine spray to control fire and cool adjacent area.</li> <li>▶ Avoid spraying water onto liquid pools.</li> <li>▶ <b>DO NOT</b> approach containers suspected to be hot.</li> <li>▶ Cool fire exposed containers with water spray from a protected location.</li> <li>▶ If safe to do so, remove containers from path of fire.</li> </ul>
<b>Fire/Explosion Hazard</b>	<ul style="list-style-type: none"> <li>▶ Combustible.</li> <li>▶ Slight fire hazard when exposed to heat or flame.</li> <li>▶ Heating may cause expansion or decomposition leading to violent rupture of containers.</li> <li>▶ On combustion, may emit toxic fumes of carbon monoxide (CO).</li> <li>▶ May emit acrid smoke.</li> <li>▶ Mists containing combustible materials may be explosive.</li> </ul> <p>Combustion products include: carbon dioxide (CO<sub>2</sub>) nitrogen oxides (NO<sub>x</sub>) other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.</p>
<b>HAZCHEM</b>	Not Applicable

## SECTION 6 Accidental release measures

### Personal precautions, protective equipment and emergency procedures

See section 8

### Environmental precautions

Continued...

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See section 12

## Methods and material for containment and cleaning up

<b>Minor Spills</b>	<ul style="list-style-type: none"> <li>▶ Remove all ignition sources.</li> <li>▶ Clean up all spills immediately.</li> <li>▶ Avoid breathing vapours and contact with skin and eyes.</li> <li>▶ Control personal contact with the substance, by using protective equipment.</li> <li>▶ Contain and absorb spill with sand, earth, inert material or vermiculite.</li> <li>▶ Wipe up.</li> <li>▶ Place in a suitable, labelled container for waste disposal.</li> </ul>
<b>Major Spills</b>	<ul style="list-style-type: none"> <li>▶ Clear area of personnel and move upwind.</li> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear full body protective clothing with breathing apparatus.</li> <li>▶ Prevent, by all means available, spillage from entering drains or water courses.</li> <li>▶ Consider evacuation (or protect in place).</li> <li>▶ No smoking, naked lights or ignition sources.</li> <li>▶ Increase ventilation.</li> <li>▶ Stop leak if safe to do so.</li> <li>▶ Water spray or fog may be used to disperse / absorb vapour.</li> <li>▶ Contain or absorb spill with sand, earth or vermiculite.</li> <li>▶ Collect recoverable product into labelled containers for recycling.</li> <li>▶ Collect solid residues and seal in labelled drums for disposal.</li> <li>▶ Wash area and prevent runoff into drains.</li> <li>▶ After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.</li> <li>▶ If contamination of drains or waterways occurs, advise emergency services.</li> </ul>

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

## SECTION 7 Handling and storage

## Precautions for safe handling

<b>Safe handling</b>	<ul style="list-style-type: none"> <li>▶ <b>DO NOT allow clothing wet with material to stay in contact with skin</b></li> <li>▶ Avoid all personal contact, including inhalation.</li> <li>▶ Wear protective clothing when risk of exposure occurs.</li> <li>▶ Use in a well-ventilated area.</li> <li>▶ Prevent concentration in hollows and sumps.</li> <li>▶ <b>DO NOT enter confined spaces until atmosphere has been checked.</b></li> <li>▶ Avoid smoking, naked lights or ignition sources.</li> <li>▶ Avoid contact with incompatible materials.</li> <li>▶ When handling, <b>DO NOT eat, drink or smoke.</b></li> <li>▶ Keep containers securely sealed when not in use.</li> <li>▶ Avoid physical damage to containers.</li> <li>▶ Always wash hands with soap and water after handling.</li> <li>▶ Work clothes should be laundered separately.</li> <li>▶ Use good occupational work practice.</li> <li>▶ Observe manufacturer's storage and handling recommendations contained within this SDS.</li> <li>▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.</li> </ul>
<b>Other information</b>	<ul style="list-style-type: none"> <li>▶ Store in original containers.</li> <li>▶ Keep containers securely sealed.</li> <li>▶ No smoking, naked lights or ignition sources.</li> <li>▶ Store in a cool, dry, well-ventilated area.</li> <li>▶ Store away from incompatible materials and foodstuff containers.</li> <li>▶ Protect containers against physical damage and check regularly for leaks.</li> <li>▶ Observe manufacturer's storage and handling recommendations contained within this SDS.</li> </ul>

## Conditions for safe storage, including any incompatibilities

<b>Suitable container</b>	<ul style="list-style-type: none"> <li>▶ Metal can or drum</li> <li>▶ Packaging as recommended by manufacturer.</li> <li>▶ Check all containers are clearly labelled and free from leaks.</li> </ul>
<b>Storage incompatibility</b>	<ul style="list-style-type: none"> <li>▶ Avoid reaction with oxidising agents</li> </ul>

## 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	ethylene glycol	Ethylene glycol (vapour)	20 ppm / 52 mg/m3	104 mg/m3 / 40 ppm	Not Available	Not Available
Australia Exposure Standards	ethylene glycol	Ethylene glycol (particulate)	10 mg/m3	Not Available	Not Available	Not Available

## Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
ethylene glycol	30 ppm	150 ppm	900 ppm
paraformaldehyde	2 mg/m3	23 mg/m3	47 mg/m3

Ingredient	Original IDLH	Revised IDLH
methoxyfenozid	Not Available	Not Available

Continued...

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Ingredient	Original IDLH	Revised IDLH
ethylene glycol	Not Available	Not Available
paraformaldehyde	Not Available	Not Available

## Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
methoxyfenozid	E	≤ 0.01 mg/m <sup>3</sup>
paraformaldehyde	E	≤ 0.01 mg/m <sup>3</sup>

**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.

## Exposure controls

<b>Appropriate engineering controls</b>	<p>Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.</p> <p>Employers may need to use multiple types of controls to prevent employee overexposure.</p> <p>Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection. An approved self contained breathing apparatus (SCBA) may be required in some situations.</p> <p>Provide adequate ventilation in warehouse or closed storage area. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.</p> <table border="1"> <thead> <tr> <th>Type of Contaminant:</th> <th>Air Speed:</th> </tr> </thead> <tbody> <tr> <td>solvent, vapours, degreasing etc., evaporating from tank (in still air).</td> <td>0.25-0.5 m/s (50-100 f/min.)</td> </tr> <tr> <td>aerosols, fumes from pouring operations, intermittent container filling, low speed conveyor transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)</td> <td>0.5-1 m/s (100-200 f/min.)</td> </tr> <tr> <td>direct spray, spray painting in shallow booths, drum filling, conveyor loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)</td> <td>1-2.5 m/s (200-500 f/min.)</td> </tr> <tr> <td>grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).</td> <td>2.5-10 m/s (500-2000 f/min.)</td> </tr> </tbody> </table> <p>Within each range the appropriate value depends on:</p> <table border="1"> <thead> <tr> <th>Lower end of the range</th> <th>Upper end of the range</th> </tr> </thead> <tbody> <tr> <td>1: Room air currents minimal or favourable to capture</td> <td>1: Disturbing room air currents</td> </tr> <tr> <td>2: Contaminants of low toxicity or of nuisance value only.</td> <td>2: Contaminants of high toxicity</td> </tr> <tr> <td>3: Intermittent, low production.</td> <td>3: High production, heavy use</td> </tr> <tr> <td>4: Large hood or large air mass in motion</td> <td>4: Small hood-local control only</td> </tr> </tbody> </table> <p>Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.</p>	Type of Contaminant:	Air Speed:	solvent, vapours, degreasing etc., evaporating from tank (in still air).	0.25-0.5 m/s (50-100 f/min.)	aerosols, fumes from pouring operations, intermittent container filling, low speed conveyor transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)	direct spray, spray painting in shallow booths, drum filling, conveyor loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)	grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500-2000 f/min.)	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<b>Personal protection</b>																					
<b>Eye and face protection</b>	<ul style="list-style-type: none"> <li>▶ Safety glasses with side shields.</li> <li>▶ Chemical goggles.</li> <li>▶ 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]</li> </ul>																				
<b>Skin protection</b>	See Hand protection below																				
<b>Hands/feet protection</b>	<ul style="list-style-type: none"> <li>▶ Wear chemical protective gloves, e.g. PVC.</li> <li>▶ Wear safety footwear or safety gumboots, e.g. Rubber</li> </ul> <p><b>NOTE:</b></p> <ul style="list-style-type: none"> <li>▶ 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.</li> <li>▶ Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.</li> </ul> <p>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.</p> <p>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.</p> <p>Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be</p>																				

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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 duration of contact,
- chemical resistance of glove material,
- 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 prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.

- When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.

- Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.

- Contaminated gloves should be replaced.

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.

**Body protection**

See Other protection below

**Other protection**

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

**Recommended material(s)****GLOVE SELECTION INDEX**

Glove selection is based on a modified presentation of the:

**"Forsberg Clothing Performance Index"**.

The effect(s) of the following substance(s) are taken into account in the **computer-generated** selection:

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Material	CPI
NATURAL RUBBER	A
NATURAL+NEOPRENE	A
NEOPRENE	A
NEOPRENE/NATURAL	A
NITRILE	A
NITRILE+PVC	A
PE/EVAL/PE	A
PVC	A
TEFLON	A
PVA	B

\* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion

**NOTE:** As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

\* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

**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(SO<sub>2</sub>), G = Agricultural chemicals, K = Ammonia(NH<sub>3</sub>), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

- ▶ Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- ▶ The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- ▶ Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

**SECTION 9 Physical and chemical properties****Information on basic physical and chemical properties**

<b>Appearance</b>	Liquid.		
<b>Physical state</b>	Liquid	<b>Relative density (Water = 1)</b>	Not Available

Continued...

## OzCrop Methoxyfen 240 Insecticide

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

## SECTION 10 Stability and reactivity

<b>Reactivity</b>	See section 7
<b>Chemical stability</b>	<ul style="list-style-type: none"> <li>▶ Unstable in the presence of incompatible materials.</li> <li>▶ Product is considered stable.</li> <li>▶ Hazardous polymerisation will not occur.</li> </ul>
<b>Possibility of hazardous reactions</b>	See section 7
<b>Conditions to avoid</b>	See section 7
<b>Incompatible materials</b>	See section 7
<b>Hazardous decomposition products</b>	See section 5

## SECTION 11 Toxicological information

## Information on toxicological effects

<b>Inhaled</b>	<p>The material is not thought to produce respiratory irritation (as classified by EC Directives using animal models). Nevertheless inhalation of vapours, fumes or aerosols, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo.</p> <p>Aliphatic alcohols with more than 3-carbons cause headache, dizziness, drowsiness, muscle weakness and delirium, central depression, coma, seizures and behavioural changes. Secondary respiratory depression and failure, as well as low blood pressure and irregular heart rhythms, may follow.</p> <p>Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.</p>
<b>Ingestion</b>	<p>Accidental ingestion of the material may be damaging to the health of the individual.</p> <p>Overexposure to non-ring alcohols causes nervous system symptoms. These include headache, muscle weakness and inco-ordination, giddiness, confusion, delirium and coma.</p> <p>The substance and/or its metabolites may bind to haemoglobin inhibiting normal uptake of oxygen. This condition, known as "methaemoglobinemia", is a form of oxygen starvation (anoxia).</p> <p>Symptoms include cyanosis (a bluish discoloration skin and mucous membranes) and breathing difficulties. Symptoms may not be evident until several hours after exposure.</p> <p>At about 15% concentration of blood methaemoglobin there is observable cyanosis of the lips, nose and earlobes. Symptoms may be absent although euphoria, flushed face and headache are commonly experienced. At 25-40%, cyanosis is marked but little disability occurs other than that produced on physical exertion. At 40-60%, symptoms include weakness, dizziness, lightheadedness, increasingly severe headache, ataxia, rapid shallow respiration, drowsiness, nausea, vomiting, confusion, lethargy and stupor. Above 60% symptoms include dyspnea, respiratory depression, tachycardia or bradycardia, and convulsions. Levels exceeding 70% may be fatal.</p> <p>For ethylene glycol:</p> <p>Symptoms following swallowing ethylene glycol include failure of breathing, central nervous system depression, cardiovascular collapse, lung swelling, acute kidney failure, and even brain damage. Swallowing 100 millilitres has caused death.</p> <p>There are three stages of ethylene glycol poisoning. The severity of each stage depends upon the amount of ethylene glycol swallowed. There is usually minimal damage to the liver. In the first 12 hours, central nervous system depression is seen. A temporary feeling of exhilaration occurs, without the odour of ethanol. There may be gastrointestinal complaints including nausea and vomiting. Acidosis, coma, convulsions and seizures may also occur. Disorders in eye movements may occur, although otherwise eye examination usually remains normal.</p> <p>At 12-24 hours after swallowing, effects on the lung and heart appear. These are characterized by fast heart rate, fast breathing, and mildly high blood pressure. Congestive heart failure and circulatory collapse may occur in severe poisonings. Effects on the kidney are seen 24-72 hours post-ingestion and are characterized by reduced urine output, flank pain, death of kidney tubules, kidney failure, and rarely, failure of the bone marrow. Kidney damage may be permanent.</p> <p>Acid base disturbances (acidosis) in the blood result from the formation of glycolic acid and some lactic acid.</p> <p>Animal testing showed that ethylene glycol, if swallowed during pregnancy, may lead to birth defects.</p>
<b>Skin Contact</b>	<p>Repeated exposure may cause skin cracking, flaking or drying following normal handling and use.</p> <p>There is some evidence to suggest that this material can cause inflammation of the skin on contact in some persons.</p> <p>Most liquid alcohols appear to act as primary skin irritants in humans. Significant percutaneous absorption occurs in rabbits but not apparently in man.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.</p> <p>Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.</p>

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<b>Eye</b>	Although the liquid is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may produce transient discomfort characterised by tearing or conjunctival redness (as with windburn).	
<b>Chronic</b>	<p>There is some evidence from animal testing that exposure to this material may result in reduced fertility.</p> <p>There is some evidence from animal testing that exposure to this material may result in toxic effects to the unborn baby.</p> <p>Exposure to ethylene glycol over a period of several weeks may cause throat irritation, mild headache and low backache. These may worsen with increasing concentration of the substance. They may progress to a burning sensation in the throat, a burning cough, and drowsiness.</p> <p>Exposure to the material for prolonged periods may cause physical defects in the developing embryo (teratogenesis).</p> <p>Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.</p> <p>There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the general population.</p> <p>There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment.</p>	
<b>OzCrop Methoxyfen 240 Insecticide</b>	<b>TOXICITY</b> Not Available	<b>IRRITATION</b> Not Available
<b>methoxyfenozid</b>	<b>TOXICITY</b> dermal (rat) LD50: 2000 mg/kg <sup>[2]</sup> Inhalation(Rat) LC50; 4.3 mg/L4h <sup>[2]</sup> Oral(Mouse) LD50; 5000 mg/kg <sup>[2]</sup>	<b>IRRITATION</b> Not Available
<b>ethylene glycol</b>	<b>TOXICITY</b> dermal (mouse) LD50: >3500 mg/kg <sup>[1]</sup> Oral(Rat) LD50; >2000 mg/kg <sup>[2]</sup>	<b>IRRITATION</b> Eye (rabbit): 100 mg/1h - mild Eye (rabbit): 12 mg/m <sup>3</sup> /3D Eye (rabbit): 1440mg/6h-moderate Eye (rabbit): 500 mg/24h - mild Eye: no adverse effect observed (not irritating) <sup>[1]</sup> Skin (rabbit): 555 mg(open)-mild Skin: no adverse effect observed (not irritating) <sup>[1]</sup>
<b>paraformaldehyde</b>	<b>TOXICITY</b> Inhalation(Rat) LC50; 1.07 mg/L4h <sup>[2]</sup> Oral(Rat) LD50; 592 mg/kg <sup>[2]</sup>	<b>IRRITATION</b> Eye (rabbit): 100 mg SEVERE Skin (rabbit): 500 mg/24h SEVERE
<b>Legend:</b>	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	

<b>METHOXYFENOZID</b>	<p>Not genotoxic * Target organ/ critical effect: liver (hypertrophy), red blood cells (MethHb and haemolysis) * Lowest relevant oral NOAEL/ NOEL: 500 ppm bw (18 mg/kg bw/day) 2 week and 1 year dog * Lowest relevant dermal NOAEL/ NOEL: &gt;1000 mg/kg bw/day 28 day rat *</p> <p>Carinogenicity: no evidence * Not mutagenic in Ames Test * Reproductive toxicity: no evidence at parental effects toxic dose; NOAEL/ NOEL &gt;20000 ppm (&gt;1333 mg/kg bw/day) Developmental toxicity: no evidence up to limit dose NOAEL/ NOEL &gt;100 mg/kg bw/day (rat and rabbit)</p> <p>Delayed neurotoxicity: NOAEL (acute, rat) &gt;2000 mg/kg bw; (90-day, rat) &gt;20000 ppm (1318 mg/kg bw/day) * Directorate E ? Food Safety: plant health, animal health and welfare, international questions E1 - Plant health</p>
<b>ETHYLENE GLYCOL</b>	<p>[Estimated Lethal Dose (human) 100 ml; RTECS quoted by Orica] Substance is reproductive effector in rats (birth defects). Mutagenic to rat cells. For ethylene glycol:</p> <p>Ethylene glycol is quickly and extensively absorbed throughout the gastrointestinal tract. Limited information suggests that it is also absorbed through the airways; absorption through skin is apparently slow. Following absorption, it is distributed throughout the body. In humans, it is initially metabolized by alcohol dehydrogenase to form glycoaldehyde, which is rapidly converted to glycolic acid and glyoxal. These breakdown products are oxidized to glyoxylate, which may be further metabolized to formic acid, oxalic acid, and glycine. Breakdown of both glycine and formic acid can generate carbon dioxide, which is one of the major elimination products of ethylene glycol. In addition to exhaled carbon dioxide, ethylene glycol is eliminated in the urine as both the parent compound and glycolic acid. Elimination is rapid and occurs within a few hours.</p> <p>Respiratory effects: Respiratory system involvement occurs 12-24 hours after swallowing sufficient amounts of ethylene glycol. Symptoms include hyperventilation, shallow rapid breathing, and generalized swelling of the lungs with calcium oxalate deposits occasionally appearing in the lungs. Respiratory system involvement appears to be dose-dependent and occurs at the same time as cardiovascular changes. Later, there may be other changes compatible with adult respiratory distress syndrome (ARDS). Swelling of the lung can be a result of heart failure, ARDS, or aspiration of stomach contents. Symptoms related to acidosis such as fast or excessive breathing are frequently observed; however, major symptoms such as swelling of the lung and inflammation of the bronchi and lungs are relatively rare, and are usually seen only in extreme poisoning.</p> <p>Cardiovascular effects: Cardiovascular system involvement in humans occurs at the same time as respiratory system involvement, during the second phase of ethylene glycol poisoning by swallowing, which is 12-24 hours after acute exposure. The symptoms of poisoning involving the heart include increased heart rate, heart enlargement and ventricular gallop. There may also be high or low blood pressure, which may progress to cardiogenic shock. In lethal cases, inflammation of the heart muscle has been observed at autopsy. Cardiovascular involvement appears to be rare and usually seen after swallowing higher doses of ethylene glycol. In summary, acute exposure to high levels of ethylene glycol can cause serious cardiovascular effects in humans. The effects of a long-term, low-dose exposure are unknown.</p> <p>Gastrointestinal effects: Common early acute effects of swallowing ethylene glycol include nausea, vomiting with or without blood, heartburn and abdominal cramping and pain. One patient showed intermittent diarrhea and pain, and after surgery, deposition of oxalate crystals was shown to have occurred.</p> <p>Musculoskeletal effects: Reported musculoskeletal effects in cases of acute ethylene glycol poisoning include diffuse muscle tenderness and pain, associated with high levels of creatinine in the blood, and jerks and contractions associated with low calcium.</p> <p>Liver effects: Autopsies carried out on people who died following acute ethylene glycol poisoning showed deposition of calcium oxalate in the liver as well as hydropic and fatty degeneration and cell death (necrosis) of the liver.</p> <p>Kidney effects: Adverse kidney effects are seen during the third stage of ethylene glycol poisoning, 2-3 days after acute exposure. Calcium oxalate crystals are deposited in the tubules and are seen in the urine. There may also be degeneration and death of tubule cells, and inflammation of the tubule interstitium. If untreated, the degree of kidney damage progresses and leads to blood and protein in the urine, decreased kidney function, reduction in urine output and ultimately, kidney failure. With adequate supportive therapy, kidney function can return to normal or near normal.</p> <p>Metabolic effects: Metabolic changes can occur within 12 hours of exposure to ethylene glycol. There may be metabolic acidosis, caused by</p>



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	<p>accumulation of glycolic acid in the blood and therefore a reduction in blood pH. The anion gap is increased, due to increased unmeasured anions (mainly glycolate).</p> <p>Effects on the nervous system: Adverse reactions involving the nervous system are among the first symptoms to appear in humans after ethylene glycol is swallowed. These early effects are also the only symptoms caused by unmetabolised ethylene glycol. Together with metabolic effects (see above), they occur from 0.5-12 hours after exposure and are considered to be part of the first stage in ethylene glycol poisoning.</p> <p>Inco-ordination, slurred speech, confusion and sleepiness are common in the early stages, as are irritation, restlessness and disorientation. Later, there may be effects on cranial nerves (which may be reversible over many months). Swelling of the brain (cerebrum) and crystal deposits of calcium oxalate in the walls of the small blood vessels of the brain were found at autopsy in people who died after acute ethylene glycol poisoning.</p> <p>Reproductive effects: Animal testing showed that ethylene glycol may affect fertility, survival of fetuses and the male reproductive organs.</p> <p>Effects on development: Animal studies indicate that birth defects may occur after exposure in pregnancy; there may also be reduction in foetal weight.</p> <p>Cancer: No studies are known regarding cancer effects in humans or animal, after skin exposure to ethylene glycol.</p> <p>Genetic toxicity: No human studies available, but animal testing results are consistently negative.</p>
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PARAFORMALDEHYDE	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.</p> <p>Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosis 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.</p> <p>The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.</p>
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Acute Toxicity	✗	Carcinogenicity	✗
Skin Irritation/Corrosion	✗	Reproductivity	✗
Serious Eye Damage/Irritation	✗	STOT - Single Exposure	✗
Respiratory or Skin sensitisation	✗	STOT - Repeated Exposure	✗
Mutagenicity	✗	Aspiration Hazard	✗

Legend: ✗ – Data either not available or does not fill the criteria for classification  
 ✔ – Data available to make classification

## SECTION 12 Ecological information

## Toxicity

OzCrop Methoxyfen 240 Insecticide	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
methoxyfenozid	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96h	Fish	>2.072mg/L	4
	EC50	48h	Crustacea	2.294-3.33mg/L	4
	NOEC(ECx)	504h	Crustacea	0.148mg/L	4
ethylene glycol	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48h	Crustacea	>100mg/l	2
	LC50	96h	Fish	>10000mg/l	1
	EC50(ECx)	Not Available	Algae or other aquatic plants	6500-7500mg/l	1
	EC50	96h	Algae or other aquatic plants	6500-13000mg/l	1
paraformaldehyde	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96h	Fish	45.26-72.27mg/L	4
Legend:	Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data				

Harmful 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
methoxyfenozid	HIGH	HIGH
ethylene glycol	LOW (Half-life = 24 days)	LOW (Half-life = 3.46 days)

Continued...

Ingredient	Persistence: Water/Soil	Persistence: Air
paraformaldehyde	LOW	LOW

**Bioaccumulative potential**

Ingredient	Bioaccumulation
methoxyfenozid	MEDIUM (LogKOW = 4.2112)
ethylene glycol	LOW (BCF = 200)
paraformaldehyde	LOW (LogKOW = 0.35)

**Mobility in soil**

Ingredient	Mobility
methoxyfenozid	LOW (KOC = 13300)
ethylene glycol	HIGH (KOC = 1)
paraformaldehyde	HIGH (KOC = 1)

**SECTION 13 Disposal considerations****Waste treatment methods**

<b>Product / Packaging disposal</b>	<ul style="list-style-type: none"> <li>▶ <b>DO NOT allow wash water from cleaning or process equipment to enter drains.</b></li> <li>▶ It may be necessary to collect all wash water for treatment before disposal.</li> <li>▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.</li> <li>▶ Where in doubt contact the responsible authority.</li> <li>▶ Recycle wherever possible or consult manufacturer for recycling options.</li> <li>▶ Consult State Land Waste Authority for disposal.</li> <li>▶ Bury or incinerate residue at an approved site.</li> <li>▶ Recycle containers if possible, or dispose of in an authorised landfill.</li> </ul>
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**SECTION 14 Transport information****Labels Required**

<b>Marine Pollutant</b>	NO
<b>HAZCHEM</b>	Not Applicable

**Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS**

**Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS**

**Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS**

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

Not Applicable

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

Product name	Group
methoxyfenozid	Not Available
ethylene glycol	Not Available
paraformaldehyde	Not Available

**Transport in bulk in accordance with the ICG Code**

Product name	Ship Type
methoxyfenozid	Not Available
ethylene glycol	Not Available
paraformaldehyde	Not Available

**SECTION 15 Regulatory information****Safety, health and environmental regulations / legislation specific for the substance or mixture**

**methoxyfenozid is found on the following regulatory lists**

Not Applicable

**ethylene glycol is found on the following regulatory lists**

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals  
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) -  
Schedule 10 / Appendix C

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) -  
Schedule 5

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) -  
Schedule 6

Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

**paraformaldehyde is found on the following regulatory lists**

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 10 / Appendix C  
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6  
Australian Inventory of Industrial Chemicals (AIIC)

### National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	No (methoxyfenozid)
Canada - DSL	No (methoxyfenozid)
Canada - NDSL	No (methoxyfenozid; ethylene glycol; paraformaldehyde)
China - IECSC	No (methoxyfenozid)
Europe - EINEC / ELINCS / NLP	No (methoxyfenozid; paraformaldehyde)
Japan - ENCS	No (methoxyfenozid)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	No (methoxyfenozid)
USA - TSCA	No (methoxyfenozid)
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	No (methoxyfenozid)
<b>Legend:</b>	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

<b>Revision Date</b>	07/10/2021
<b>Initial Date</b>	07/10/2021

### SDS Version Summary

Version	Date of Update	Sections Updated
2.1	07/10/2021	Advice to Doctor, Engineering Control

### 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

## **OzCrop Methoxyfen 240 Insecticide**

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