

## CONSOLIDATED CHEMICAL CO. ABN: 34 527 060 773 ACN: 005 056 502

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# ASCORBIC ACID

 CONSOLIDATED CHEMICAL CO
 Chemwatch Alert Code: 2

 Chemwatch: 4771-82
 Issue Date: 27/06/2017

 Version No: 2.1.1
 Print Date: 04/09/2018

 Safety Data Sheet according to WHS and ADG requirements
 L.GHS.AUS.EN

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

#### **Product Identifier**

Product name	ASCORBIC ACID
Other means of identification	Not Available

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

Relevant identified uses As antimicrobial and antioxidant in foodstuffs. Used for Vitamin C deficiency.

#### Details of the supplier of the safety data sheet

Registered company name	CONSOLIDATED CHEMICAL CO
Address	52-62 Waterview Close 3175 Australia
Telephone	03 9799 7555
Fax	03/9799 7666
Website	Not Available
Email	Not Available

#### **Emergency telephone number**

Association / Organisation	Not Available
Emergency telephone numbers	1800 839 984
Other emergency telephone numbers	Not Available

#### CHEMWATCH EMERGENCY RESPONSE

Primary Number Alternative Number 1		Alternative Number 2	
1800 039 008	+61 2 9186 1132	Not Available	

Once connected and if the message is not in your prefered language then please dial 01

#### **SECTION 2 HAZARDS IDENTIFICATION**

#### Classification of the substance or mixture

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

Poisons Schedule Not Applicable

Classification <sup>[1]</sup>	Skin Corrosion/Irritation Category 2, Eye Irritation Category 2A, Germ cell mutagenicity Category 2, Reproductive Toxicity Category 2, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation)	
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI	
Label elements		

WARNING

#### Hazard statement(s)

H315	Causes skin irritation.		
H319	Causes serious eye irritation.		
H341	Suspected of causing genetic defects.		
H361	Suspected of damaging fertility or the unborn child.		
H335	May cause respiratory irritation.		

#### Supplementary statement(s)

Not Applicable

## Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P271	Use only outdoors or in a well-ventilated area.
P281	Use personal protective equipment as required.
P261	Avoid breathing dust/fumes.
P280	Wear protective gloves/protective clothing/eye protection/face protection.

## Precautionary statement(s) Response

P308+P313	IF exposed or concerned: Get medical advice/attention.		
P362	Take off contaminated clothing and wash before reuse.		
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.		
P312	Call a POISON CENTER or doctor/physician if you feel unwell.		
P337+P313	If eye irritation persists: Get medical advice/attention.		
P302+P352	IF ON SKIN: Wash with plenty of soap and water.		
P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.		
P332+P313	If skin irritation occurs: Get medical advice/attention.		

#### Precautionary statement(s) Storage

P405	Store locked up.
P403+P233	Store in a well-ventilated place. Keep container tightly closed.

## Precautionary statement(s) Disposal

P501

Dispose of contents/container in accordance with local regulations.

## SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

## Substances

See section below for composition of Mixtures

## Mixtures

CAS No
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Name

hemwatch: 4771-82		Page <b>3</b> of <b>11</b>	Issue Date: 27/06/20
ersion No: <b>2.1.1.1</b>		ASCORBIC ACID	
50-81-7	>99	ascorbic acid	
SECTION 4 FIRST AID ME	ASURES		
Eye Contact	<ul> <li>If in eyes, hold eyeli</li> <li>Continue flushing ur</li> <li>Ensure complete irri occasionally lifting th</li> <li>Seek medical attenti</li> <li>Removal of contact</li> <li>For THERMAL burns:</li> <li>Do NOT remove cor</li> <li>Lay victim down, on by placing thick pad</li> <li>Seek urgent medical</li> </ul>	ids apart and flush the eye continuously with running wantil advised to stop by the Poisons Information Centre of igation of the eye by keeping eyelids apart and away from the upper and lower lids. ion without delay; if pain persists or recurs seek medical lenses after an eye injury should only be undertaken by <b>ntact lens</b> to stretcher if available and pad <b>BOTH</b> eyes, make sure of a under dressing, above and below the eye. al assistance, or transport to hospital.	ater. or a doctor, or for at least 15 minutes. rom eye and moving the eyelids by al attention. by skilled personnel. dressing does not press on the injured eye
Skin Contact	If skin or hair contact or Immediately flush bi- Quickly remove all c Wash skin and hair of Centre. Transport to hospital In case of burns: Immediately apply c DO NOT remove or this can cause furthor DO NOT break bliste Quickly cover wound For large burns, she DO NOT apply ointhor Water may be given Alcohol is not to be Reassure. Treat for shock by ke Seek medical aid an of arrival of the pati	ccurs: ody and clothes with large amounts of water, using safe contaminated clothing, including footwear. with running water. Continue flushing with water until ad l, or doctor. cold water to burn either by immersion or wrapping with s cut away clothing over burnt areas. <b>DO NOT</b> pull away er injury. er or remove solidified material. d with dressing or clean cloth to help prevent infection a cets, towels or pillow slips are ideal; leave holes for eyes ments, oils, butter, etc. to a burn under any circumstance n in small quantities if the person is conscious. given under any circumstances. eeeping the person warm and in a lying position. nd advise medical personnel in advance of the cause ar ient.	ety shower if available. Ivised to stop by the Poisons Information saturated clean cloth. clothing which has adhered to the skin as and to ease pain. s, nose and mouth. ces.
Inhalation	<ul> <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 air 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>		
Ingestion	<ul> <li>Immediately give a</li> <li>First aid is not gene</li> </ul>	glass of water. rally required. If in doubt, contact a Poisons Informatior	n Centre or a doctor.

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

Treat symptomatically.

## SECTION 5 FIREFIGHTING MEASURES

## Extinguishing media

For SMALL FIRES:

▶ Dry chemical, CO2, water spray or foam.

For LARGE FIRES:

- Foam, fog or water spray
- DO NOT use water jets.

## Special hazards arising from the substrate or mixture

Fire Incompatibility	<ul> <li>Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result</li> </ul>
Advice for firefighters	
Fire Fighting	<ul> <li>Wear SCBA and fully-encapsulating, gas-tight suits when handling these substances.</li> <li>Always wear thermal protective clothing when handling molten substances.</li> </ul>

Structural fire fighter's uniform will only provide limited protection.

	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear full body protective clothing with breathing apparatus.</li> </ul>
	<ul> <li>Prevent, by any means available, spillage from entering drains or water course.</li> <li>Consider evacuation (or protect in place).</li> </ul>
Fire/Explosion Hazard	<ul> <li>May ignite on contact with air leading to spontaneous combustion</li> <li>May decompose explosively when heated or involved in fire.</li> <li>May REIGNITE after fire is extinguished.</li> <li>Gases generated in fire may be poisonous, corrosive or irritating.</li> <li>Containers may explode on heating.</li> <li>Combustion products include: </li> <li>, <ul> <li>carbon monoxide (CO)</li> <li>, <ul> <li>carbon dioxide (CO2)</li> <li>, </li></ul> </li> <li>other pyrolysis products typical of burning organic material.</li> <li>May emit clouds of acrid smoke</li> </ul> </li> </ul>
HAZCHEM	Not Applicable

#### SECTION 6 ACCIDENTAL RELEASE MEASURES

#### Personal precautions, protective equipment and emergency procedures

See section 8

#### **Environmental precautions**

See section 12

## Methods and material for containment and cleaning up

Minor Spills	<ul> <li>Eliminate all ignition sources.</li> <li>Cover with WET earth, sand or other non-combustible material.</li> <li>Use clean, non-sparking tools to collect absorbed material</li> <li>Wear gloves and safety glasses as appropriate.</li> </ul>
Major Spills	<ul> <li>Clear area of personnel and move upwind.</li> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Eliminate all ignition sources (no smoking, flares, sparks or flames)</li> <li>Stop leak if safe to do so; prevent entry into waterways, drains or confined spaces.</li> <li>May be violently or explosively reactive.</li> </ul>

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

## SECTION 7 HANDLING AND STORAGE

## Precautions for safe handling

Safe handling	<ul> <li>For large scale or continuous use, spark-free, earthed ventilation system venting directly to the outside and separate from usual ventilation systems</li> <li>Provide dust collectors with explosion vents.</li> <li>Avoid all personal contact, including inhalation.</li> <li>Wear protective clothing when risk of overexposure occurs.</li> <li>Use in a well-ventilated area.</li> <li>Organic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions)</li> <li>Minimise airborne dust and eliminate all ignition sources. Keep away from heat, hot surfaces, sparks, and flame.</li> <li>Establish good housekeeping practices.</li> <li>Remove dust accumulations on a regular basis by vacuuming or gentle sweeping to avoid creating dust clouds.</li> </ul>
Other information	<ul> <li>Store under an inert gas, e.g. argon or nitrogen.</li> <li>FOR MINOR QUANTITIES: <ul> <li>Store in an indoor fireproof cabinet or in a room of noncombustible construction.</li> <li>Provide adequate portable fire-extinguishers in or near the storage area.</li> </ul> </li> <li>FOR PACKAGE STORAGE: <ul> <li>Store in original containers in approved flame-proof area.</li> <li>No smoking, naked lights, heat or ignition sources.</li> </ul> </li> </ul>

## Conditions for safe storage, including any incompatibilities

Suitable container	<ul> <li>Glass container is suitable for laboratory quantities</li> </ul>
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- Must not be stored together х

- May be stored together with specific preventions 0

- May be stored together

Х

#### SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

#### **Control parameters**

#### OCCUPATIONAL EXPOSURE LIMITS (OEL)

#### INGREDIENT DATA

Not Available

#### EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
ASCORBIC ACID	Not Available	Not Available	Not Available	Not Available
Ingredient	Original IDLH		Revised IDLH	
ascorbic acid	Not Available		Not Available	

#### MATERIAL DATA

It is the goal of the ACGIH (and other Agencies) to recommend TLVs (or their equivalent) for all substances for which there is evidence of health effects at airborne concentrations encountered in the workplace.

At this time no TLV has been established, even though this material may produce adverse health effects (as evidenced in animal experiments or clinical experience). Airborne concentrations must be maintained as low as is practically possible and occupational exposure must be kept to a minimum. NOTE: The ACGIH occupational exposure standard for Particles Not Otherwise Specified (P.N.O.S) does NOT apply.

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable.

#### 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.	
Personal protection		
Eye and face protection	<ul> <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.</li> </ul>	
Skin protection	See Hand protection below	
Hands/feet protection	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.
	<ul> <li>Personal hygiene is a key element of effective hand care.</li> <li>Fire resistant/ heat resistant gloves where practical, otherwise</li> <li>Heavy-duty chemically resistant gloves capable of providing short-term protection against spontaneous ignition.</li> </ul>
Body protection	See Other protection below
Other protection	Wear protective clothing appropriate for the work situation. For large scale or continuous use, when handling dry powder, wear : -tight-weave, non-static, noncombustible or flameproof clothing without cuffs, metallic fasteners, pockets, or laps in which powder may collect. -non-sparking safety or conductive footwear. 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.

### **Respiratory protection**

Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:001, ANSI Z88 or national equivalent)

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

\* - Negative pressure demand \*\* - Continuous flow

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.
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

#### SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

## Information on basic physical and chemical properties

Appearance	White crystals, soluble in wate (33 g/100 ml)r. Pleasant, sharp acidic taste. stable to air when dry and pure. Aqueous solutions are rapidly oxidized by air.		
Physical state	Divided Solid	Relative density (Water = 1)	1.65
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	660
pH (as supplied)	Not Applicable	Decomposition temperature	Not Available
Melting point / freezing point (°C)	190	Viscosity (cSt)	Not Applicable
Initial boiling point and boiling range (°C)	Decomposes	Molecular weight (g/mol)	176.14
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available

Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Applicable
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution (1%)	3 арргох.
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available

## SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	<ul> <li>May heat spontaneously</li> <li>Identify and remove sources of ignition and heating.</li> <li>Incompatible material, especially oxidisers, and/or other sources of oxygen may produce unstable product(s).</li> <li>Hazardous polymerization will not occur.</li> </ul>
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

## SECTION 11 TOXICOLOGICAL INFORMATION

## Information on toxicological effects

Inhaled	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. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled. If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures. Not normally a hazard due to non-volatile nature of product
Ingestion	The material has <b>NOT</b> been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health).
Skin Contact	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 Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.
Eye	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.

	Strong evidence exists that the substance may cause irreversible but non-lethal mutagenic effects following a single exposure. Exposure to the material may cause concerns for human fertility, generally on the basis that results in animal studies
	provide sufficient evidence to cause a strong suspicion of impaired fertility in the absence of toxic effects, or evidence of impaired fertility occurring at around the same dose levels as other toxic effects, but which are not a secondary non-specific consequence of other toxic effects.
	Exposure to the material may cause concerns for humans owing to possible developmental toxic effects, generally on the basis that results in appropriate animal studies provide strong suspicion of developmental toxicity in the absence of signs of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not a secondary non-specific consequence of other toxic effects.
	Exposure to the material may result in a possible risk of irreversible effects. The material may produce mutagenic effects in man. This concern is raised, generally, on the basis of
	appropriate studies using mammalian somatic cells in vivo. Such findings are often supported by positive results from in vitro mutagenicity studies.
	Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.
Chronic	
	Long term exposure to high dust concentrations may cause changes in lung function (i.e. pneumoconiosis) caused by particles less than 0.5 micron penetrating and remaining in the lung. A prime symptom is breathlessness. Lung shadows show on X-ray.
	As vitamin C (ascorbic acid) enhances iron absorption, iron poisoning can become an issue to people with rare iron overload disorders, such as haemochromatosis. A genetic condition that results in inadequate levels of the enzyme glucose-6-phosphate dehydrogenase (G6PD) can cause sufferers to develop haemolytic anemia after ingesting specific oxidizing substances, such as very large dosages of vitamin C.
	Some case reports exist for a link between patients with oxalate deposits and a history of high-dose vitamin C usage In a study conducted on rats, during the first month of pregnancy, high doses of vitamin C may suppress the production of progesterone from the corpus luteum. Progesterone, necessary for the maintenance of a pregnancy, is produced by the corpus luteum for the first few weeks, until the placenta is developed enough to produce its own source.
	Chronic exposure to oxalates may result in circulatory failure or nervous system irregularities may follow prolonged calcium metabolism due to oxalation. Sharp reduction of serum calcium, following exposure, can cause dysfunction of head and brain. Calcium may be deposited in the liver and kidneys leading to damage.
	Circulatory failure or nervous system irregularities may follow prolonged calcium metabolism disturbances
	Prolonged and severe exposure can cause chronic cough, albuminuria, vomiting, pain in the back and gradual emaciation and weakness.

ASCORBIC ACID ascorbic acid	TOXICITY	IRRITATION
	Oral (rat) LD50: 11900 mg/kg <sup>[2]</sup>	Not Available
	TOXICITY	IRRITATION
	Oral (rat) LD50: 11900 mg/kg <sup>[2]</sup>	Not Available
Legend:	1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS.	
	Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances	

ASCORBIC ACID	Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS.
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Acute Toxicity	×	Carcinogenicity	$\odot$
Skin Irritation/Corrosion	×	Reproductivity	×
Serious Eye Damage/Irritation	*	STOT - Single Exposure	*
Respiratory or Skin sensitisation	0	STOT - Repeated Exposure	0
Mutagenicity	✓	Aspiration Hazard	$\otimes$

Legend: X – Data available but does not fill the criteria for classification

Data available to make classification

🚫 – Data Not Available to make classification

## SECTION 12 ECOLOGICAL INFORMATION

#### Toxicity SPECIES VALUE ENDPOINT TEST DURATION (HR) SOURCE ASCORBIC ACID Not Not Not Not Available Not Available Available Available Available ENDPOINT TEST DURATION (HR) SPECIES VALUE SOURCE ascorbic acid Not Not Not Not Available Not Available Available Available Available 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

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

#### Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
ascorbic acid	LOW	LOW

#### **Bioaccumulative potential**

Ingredient	Bioaccumulation
ascorbic acid	LOW (LogKOW = -1.85)

#### Mobility in soil

Ingredient	Mobility
ascorbic acid	LOW (KOC = 10)

## SECTION 13 DISPOSAL CONSIDERATIONS

#### Waste treatment methods • 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. Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked. A Hierarchy of Controls seems to be common - the user should investigate: Reduction Reuse Product / Packaging Recvcling disposal Disposal (if all else fails) This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use • DO NOT allow wash water from cleaning or process equipment to enter drains. + It may be necessary to collect all wash water for treatment before disposal. + In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first. Where in doubt contact the responsible authority. Recycle wherever possible or consult manufacturer for recycling options. Consult State Land Waste Authority for disposal. · Bury or incinerate residue at an approved site. Recycle containers if possible, or dispose of in an authorised landfill.

#### **SECTION 14 TRANSPORT INFORMATION**

#### Labels Required

Marine Pollutant	NO
HAZCHEM	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

#### **SECTION 15 REGULATORY INFORMATION**

#### Safety, health and environmental regulations / legislation specific for the substance or mixture

ASCORBIC ACID(50-81-7) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

#### **National Inventory Status**

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

#### **SECTION 16 OTHER INFORMATION**

Revision Date	27/06/2017
Initial Date	Not Available

## Other information

#### Ingredients with multiple cas numbers

Name	CAS No
ascorbic acid	50-81-7, 129940-97-2, 14536-17-5, 154170-90-8, 259133-78-3, 30208-61-8, 50976-75-5, 56172-55-5, 56533-05-2, 57304-74-2, 57606-40-3, 623158-95-2, 882690-91-7, 884381-69-5, 885512-24-3, 88845-26-5, 89924-69-6

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 Chemwatch: **4771-82** Version No: **2.1.1.1** 

#### ASCORBIC ACID

STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure Limit。 IDLH: Immediately Dangerous to Life or Health Concentrations OSF: Odour Safety Factor NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level TLV: Threshold Limit Value LOD: Limit Of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors BEI: Biological Exposure Index

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