FUJIFILM

Fujifilm Superdol S I

FujiFilm

Chemwatch: 42-4006

Version No: 21.1.1 Material Safety Data Sheet according to NOHSC and ADG requirements Chemwatch Hazard Alert Code: 2

Issue Date: 05/08/2014 Print Date: 06/08/2014 Initial Date: Not Available S.Local.AUS.EN

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

Product Identifier

Product name	Fujifilm Superdol S I
Chemical Name	Not Applicable
Synonyms	Product Code: 850735 / 750735
Proper shipping name	Not Applicable
Chemical formula	Not Applicable
Other means of identification	Not Available
CAS number	Not Applicable

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

Relevant identified uses	Reducing agent Starter of developer for IX automatic processor.
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Details of the manufacturer/importer

Registered company name	FujiFilm	1	1
Address	114 Old Pittwater Road Brookvale NSW Australia	1	
Telephone	+61 2 9466 2600	1	1
Fax	+61 2 9938 1975	1	
Website	http://www.fujifilm.co	1	1
Email	Not Available	1	

Emergency telephone number

Association / Organisation	Not Available	 	
Emergency telephone numbers	Not Available		
Other emergency telephone numbers	Not Available		

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

HAZARDOUS SUBSTANCE. NON-DANGEROUS GOODS. According to the Criteria of NOHSC, and the ADG Code.

CHEMWATCH HAZARD RATINGS

-	Min	Max	
Flammability	0	ļ	
Toxicity	1		0 = Minimum
Body Contact	2		1 = Low 2 = Moderate
Reactivity	0		3 = High
Chronic	0		4 = Extreme

Label elements



Relevant risk statements are found in section 2

Poisons Schedule Not Applicable

Continued...

	•			
	R36/37/38	Irritating to eyes, respiratory system and skin.		
Risk Phrases ^[1]	R52	Harmful to aquatic organisms.		
Legend:	1. Classified by Chemwatc	h; 2. Classification drawn from HSIS ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI		
Indication(s) of danger	Xi			
SAFETY ADVICE	•			
S23	Do not breathe gas/fumes/	vapour/spray.		
S24	Avoid contact with skin.			
S25	Avoid contact with eyes.			
S26	In case of contact with eyes	s, rinse with plenty of water and contact Doctor or Poisons Information Centre.		
S29	Do not empty into drains.	Do not empty into drains.		
S35	This material and its contai	This material and its container must be disposed of in a safe way.		
S37	Wear suitable gloves.	Wear suitable gloves.		
S39	Wear eye/face protection.	Wear eye/face protection.		
S40	To clean the floor and all ot	To clean the floor and all objects contaminated by this material, use water.		
S46	If swallowed, seek medical	If swallowed, seek medical advice immediately and show this container or label.		
S56	Dispose of this material and its container at hazardous or special waste collection point.			
S57	Use appropriate container t	Use appropriate container to avoid environmental contamination.		
S64	If swallowed, rinse mouth v	with water (only if the person is conscious).		
ther hazards				
	Possible respiratory and sl	kin sensitizer*.		
	Cumulative effects may res	sulf following exposure*		

Possible respiratory and skin sensitizer*.
Cumulative effects may result following exposure*.
Inhalation may produce health damage*.
May be harmful to the foetus/ embryo*.

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
7631-90-5	15-30	sodium bisulfite
7758-02-3	10-20	potassium bromide
123-31-9	0.1-<1	hydroquinone
7732-18-5	50-70	water

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Eye Contact	 If this product comes in contact with the eyes: Wash out immediately with fresh 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. Seek medical attention without delay; if pain persists or recurs seek medical attention. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	 If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation.
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. Transport to hospital, or doctor, without delay. 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. This must definitely be left to a doctor or person authorised by him/her. (ICSC13719)

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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. Observe the patient carefully. Ingestion • Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. Seek medical advice.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

Treatment of intoxication by the bromide ion includes hydration, the maintenance of mild water diuresis, and sodium, or even better, ammonium chloride (10-15 gm. daily in divided doses) with an osmotic or high ceiling diuretic. Haemodialysis may be of value. [GOSSELIN, SMITH, HODGE: Clinical Toxicology of Commercial Products]

In acute poisoning the stomach should be emptied by aspiration and lavage and sodium chloride given by intravenous infusion. Dextrose has also been administered and frusemide may be given to aid diuresis. In severe cases of bromide intoxication or when usual treatments cannot be used haemodialysis or peritoneal dialysis may be of value. [MARTINDALE: The Extra Pharmacopoeia] As in all cases of suspected poisoning, follow the ABCDEs of emergency medicine (airway, breathing, circulation, disability, exposure), then the ABCDEs of toxicology (antidotes, basics, change absorption, change distribution, change elimination).

For poisons (where specific treatment regime is absent):

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 pulmonary oedema.
- Monitor and treat, where necessary, for shock.
- Anticipate 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.

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.
- Drug therapy should be considered for pulmonary oedema. ۶
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications
- Treat seizures with diazepam. Þ
- Proparacaine hydrochloride should be used to assist eye irrigation.
- BRONSTEIN, A.C. and CURRANCE, P.L.
- EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

Depending on the degree of exposure, periodic medical examination is indicated. The symptoms of lung oedema often do not manifest until a few hours have passed and they are aggravated by physical effort. Rest and medical observation is therefore essential. Immediate administration of an appropriate spray, by a doctor or a person authorised by him/her should be considered. (ICSC24419/24421

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media	 There is no restriction on the type of extinguisher which may be used. Use extinguishing media suitable for surrounding area.
Special hazards arising fr	om the substrate or mixture
Fire Incompatibility	None known.
Advice for firefighters	
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves in the event of a fire. Prevent, by any means available, spillage from entering drains or water courses. Use fire fighting procedures suitable for surrounding area.
Fire/Explosion Hazard	 Non combustible. Not considered a significant fire risk, however containers may burn. Decomposition may produce toxic fumes of., sulfur oxides (SOx)May emit poisonous fumesMay emit corrosive fumes.
SECTION 6 ACCIDENTAL	RELEASE MEASURES
Personal precautions, pro	tective equipment and emergency procedures

Minor Spills	 Clean up all spills immediately. Avoid breathing vapours and contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Contain and absorb spill with sand, earth, inert material or vermiculite.
Major Spills	Moderate hazard. Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves.
	Personal Protective Equipment advice is contained in Section 8 of the MSDS.

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SECTION 7 HANDLING AND STORAGE

recautions for safe hand Safe 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. Prevent concentration in hollows and sumps.
Other information	 Store in original containers. Keep containers securely sealed. Store in a cool, dry, well-ventilated area. Store away from incompatible materials and foodstuff containers.

Conditions for safe storage, including any incompatibilities

Suitable container	 Polyethylene or polypropylene container. Packing as recommended by manufacturer. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	 Contact with acids produces toxic fumes Inorganic reducing agents react with oxidizing agents to generate heat and products that may be flammable, combustible, or otherwise reactive. Their reactions with oxidizing agents may be violent. Incidents involving interaction of active oxidants and reducing agents, either by design or accident, are usually very energetic and examples of so-called redox reactions. Segregate from alcohol, water.

PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

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	sodium bisulfite	Sodium bisulphite	5 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	hydroquinone	Hydroquinone	2 mg/m3	Not Available	Not Available	Not Available

EMERGENCY LIMITS

Ingredient	TEEL-0	TEEL-1	TEEL-2	TEEL-3
sodium bisulfite	5 ppm	15 ppm	25 ppm	500 ppm
potassium bromide	12.5 ppm	40 ppm	250 ppm	500 ppm
hydroquinone	2 ppm	3 ppm	20 ppm	50 ppm
water	500 ppm	500 ppm	500 ppm	500 ppm

Ingredient	Original IDLH	Revised IDLH
sodium bisulfite	Not Available	Not Available
potassium bromide	Not Available	Not Available
hydroquinone	Unknown mg/m3 / Unknown ppm	50 mg/m3
water	Not Available	Not Available

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	 Safety glasses with side shields. Chemical goggles. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task.
Skin protection	See Hand protection below

Hands/feet protection	 Wear chemical protective gloves, e.g. PVC. Wear safety footwear or safety gumboots, e.g. Rubber NOTE: The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact. Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.
Body protection	See Other protection below
Other protection	 Overalls. P.V.C. apron. Barrier cream.
Thermal hazards	Not Available

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

 * CPI - Chemwatch Performance Index
 A: Best Selection

 B: Satisfactory; may degrade after 4 hours continuous immersion
 CPI

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

Particulate. (AS/NZS 1716 & 1715, EN 143:000 & 149:001, 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	-AUS P2	-	-PAPR-AUS / Class 1 P2
up to 50 x ES	-	-AUS / Class 1 P2	-
up to 100 x ES	-	-2 P2	-PAPR-2 P2 ^

^ - Full-face

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

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Clear light yellow liquid with no odour; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.325
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	4.00	Decomposition temperature	Not Available
Melting point / freezing point (°C)	0	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	100	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution(1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7

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Hazardous decomposition products

n 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.
Ingestion	The material has NOT 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.
Eye	Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.
Chronic	Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. Limited evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a significant number of individuals at a greater frequency than would be expected from the response of a normal population. Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases.

Evijijim Sunardal S I	TOXICITY	IRRITATION
Fujifilm Superdol S I	Oral (Rat) LD50: >5000 mg/kg*	Not Available
	ΤΟΧΙCITY	IRRITATION
sodium bisulfite	Oral (rat) LD50: 2000 mg/kg	
	Not Available	Not Available
	ΤΟΧΙΟΙΤΥ	IRRITATION
potassium bromide		*[Manufacturers]
	Not Available	Not Available
	TOXICITY	IRRITATION
hudroguinono	Oral (rat) LD50: 320 mg/kg	Skin (human): 2% - mild
hydroquinone		Skin (human): 5% - SEVERE
	Not Available	Not Available
water	ΤΟΧΙΟΙΤΥ	IRRITATION
water	Not Available	Not Available

* Value obtained from manufacturer's msds

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances

SODIUM BISULFITE	Human lymphocyte mutagen
HYDROQUINONE	The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody- mediated immune reactions.
WATER	No significant acute toxicological data identified in literature search.
SODIUM BISULFITE, POTASSIUM BROMIDE	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.

Acute Toxicity	\otimes	Carcinogenicity	0
Skin Irritation/Corrosion	×	Reproductivity	0
Serious Eye Damage/Irritation	✓	STOT - Single Exposure	*
Respiratory or Skin sensitisation	0	STOT - Repeated Exposure	0
Mutagenicity	0	Aspiration Hazard	0
		×	 Data required to make classification available Data available but does not fill the criteria for classification Data Not Available to make classification

CMR STATUS

CARCINOGEN

hydroquinone Australia Exposure Standards - Carcinogens Carc. 2

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

Harmful to aquatic organisms. **DO NOT** discharge into sewer or waterways

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
Not Available	Not Available	Not Available

Bioaccumulative potential

Ingredient	Bioaccumulation
Not Available	Not Available
Mobility in soil	
Mobility in soil	Mobility

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

 Product / Packaging disposal Recycle wherever possible. Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment can be identified. Dispose of by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or incineration in a licenced a admixture with suitable combustible material). Decontaminate empty containers. 	, ,
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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 73 / 78 and the IBC code

Source	Ingredient	Pollution Category
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	sodium bisulfite	Z

SECTION 15 REGULATORY INFORMATION

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

sodium bisulfite(7631-90-5) is found on the following regulatory lists "IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk", "International Council of Chemical Associations (ICCA) - High Production Volume List", "Australia Exposure Standards", "Australia Inventory of Chemical Substances (AICS)", "OECD List of High Production Volume (HPV) Chemicals", "International Numbering System for Food Additives", "Sigma-AldrichTransport Information", "GESAMP/EHS Composite List - GESAMP Hazard Profiles", "Australia Hazardous Substances Information System - Consolidated Lists", "IMO IBC Code Chapter 17: Summary of minimum requirements"

potassium bromide(7758-02-3) is found on the following regulatory lists	"International Council of Chemical Associations (ICCA) - High Production Volume List", "Australia - Tasmania Misuse of Drugs Act 2001 - SCHEDULE 1 - Controlled substances and trafficable quantities - PART 2 - Controlled drugs", "Australia New Zealand Food Standards Code - Maximum Residue Limits (Australia only) - Schedule 1", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4", "FisherTransport Information", "Australia Inventory of Chemical Substances (AICS)", "OECD List of High Production Volume (HPV) Chemicals", "Sigma-AldrichTransport Information", "WHO Guidelines for Drinking-water Quality - Chemicals for which guideline values have not been established"
hydroquinone(123-31-9) is found on the following regulatory lists	"Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix F (Part 3)", "IOFI Global Reference List of Chemically Defined Substances", "International Maritime Dangerous Goods Requirements (IMDG Code)", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5", "Australia Exposure Standards", "International Maritime Dangerous Goods Requirements (IMDG Code) - Substance Index", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 4", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2", "Australia FAISD Handbook - First Aid Instructions, Warning Statements, and General Safety Precautions", "Fisher Transport Information", "United Nations Recommendations on the Transport of Dangerous Goods Model Regulations (English)", "Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes", "United Nations Consolidated List of Products Whose Consumption and/or Sale Have Been Banned, Withdrawn, Severely Restricted or Not Approved by Governments", "OECD List of High Production Volume (HPV) Chemicals", "Australia Inventory of Chemical Substances (AICS)", "Belgium Federal Public Service Mobility and Transport, Regulations concerning the International Carriage of Dangerous Goods by Rail - Table A: Dangerous Goods List - RID 2013 (Dutch)", "OECD Existing Chemicals Database", "Sigma- AldrichTransport Information", "United Nations Recommendations on the Transport of Dangerous Goods Model Regulations (Spanish)", "Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)", "Australia Hazardous Substances Information System - Consolidated Lists", "Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List", "International Air Transport Association (IATA) Dangerous Goods Regulations", "Australia Dangerous Goods Code (ADG Code) - Dangerous Goods Sust", "Australia Dangerous Goods Code (ADG Code) - Dangerous Goods Sust", "Australia D
water(7732-18-5) is found on the following regulatory lists	"Australia Inventory of Chemical Substances (AICS)","OECD List of High Production Volume (HPV) Chemicals","OSPAR National List of Candidates for Substitution – Norway","WHO Model List of Essential Medicines - Adults","Sigma-AldrichTransport Information","IMO IBC Code Chapter 18: List of products to which the Code does not apply","Australia High Volume Industrial Chemical List (HVICL)","International Fragrance Association (IFRA) Survey: Transparency List"

SECTION 16 OTHER INFORMATION

Other information

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

A list of reference resources used to assist the committee may be found at: www.chemwatch.net/references

The (M)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.

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