NUMOCAINE 2% INJECTION (NumOcaine 20mg/mL Local & Regional Anaesthetic)

Mavlab

Safety Data Sheet according to WHS and ADG requirements

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

Product Identifier

Product name	NUMOCAINE 2% INJECTION (Lignocaine 20mg/mL Local & Regional Anaesthetic)
Synonyms	NumOcaine; Lignomav 2%; Manufacturer's Code: P6200
Other means of identification	Not Available

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

Relevant identified uses	Local and regional anaesthetic for dogs, cats, horses and cattle. Veterinary chemical products at the point of administration to animals are excluded from the scope of the Workplace Health and Safety regulations

Details of the supplier of the safety data sheet

Registered company name	Senesino Pty Ltd
Address	PO Box 68 Grange QLD 4051 Australia
Telephone	+61 1300 646413
Website	www.numnuts.store
Email	info@numnuts.store

Emergency telephone numbers

Association / Organisation	
Emergency telephone number	
Other emergency telephone number	

SECTION 2 - HAZARDS INDENTIFICATION

Classification of the substance or mixture

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

HAZARD RATINGS

	Min	Max
Flammability	0	
Toxicity	2	
Body Contact	2	
Reactivity	0	
Chronic	2	

0 = Minimum
1 = Low
2 = Moderate
3 = High
4 = Extreme

Poisons schedule	S2
Classification [1]	Acute Toxicity (Oral) Category 4, Acute Toxicity (Dermal) Category 4, Acute Toxicity (Inhalation) Category 4, Skin Corrosion/Irritation Category 2, Eye Irritation Category 2A, Skin Sensitizer Category 1
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	

Signal word	**WARNING**

Hazard statement(s)

H302	Harmful if swallowed.
H312	Harmful in contact with skin.
H332	Harmful if inhaled.
H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H319	Causes serious eye irritation.

Precautionary statements: Prevention

P261	Avoid breathing mist/vapours/spray.
P270	Do not eat, drink or smoke when using this product.
P271	Use only outdoors or in a well-ventilated area.
P272	Contaminated work clothing should not be allowed out of the workplace.
P280	Wear protective gloves/protective clothing/eye protection/face protection.

Precautionary statements: Response

P321	Specific treatment (see advice on this label).
P322	Specific measures (see advice on this label).
P362	Take off contaminated clothing and wash before reuse.
P302 + P352	IF ON SKIN: Wash with plenty of water.
P305 + P351 + P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P333 + P313	If skin irritation or rash occurs: Get medical advice/attention.
P337 + P313	If eye irritation persists: Get medical advice/attention.
P301 + P312	IF SWALLOWED: Call a POISON CENTER or doctor/physician if you feel unwell.
P304 + P430	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.
P330	Rinse mouth.

Precautionary statements: Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 - COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of mixtures.

Mixtures

CAS No	% [weight]	Name
73-78-9	2	lignocaine hydrochloride
100-51-6	1	benzyl alcohol
7732-18-5	>90	wayer

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.

Eye Contact (cont.)	• 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.
Ingestion	**IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.** • For advice, contact a Poisons Information Centre or a doctor. • Urgent hospital treatment is likely to be needed. • In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. • If the services of a medical officer or medical doctor are readily available, the patient should be placedin his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist. • If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS. **Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:** • **INDUCE** vomiting with fingers down the back of the throat, **ONLY IF CONSCIOUS**. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. **NOTE:** Wear a protective glove when inducing vomiting by mechanical means.

Indication of any immediate medical attention and special treatment needed

When systemic reaction to local anaesthetic occurs, steps should be taken to maintain circulation and respiration and control convulsions. A clear airway should be established and oxygen given together with assisted ventilation if necessary. Circulation should be maintained with plasma infusion (or suitable electrolytes). Vasopressors such as ephedrine, metaraminol and methoxamine have been suggested in marked hypotension although their use is accompanied by the risk of CNS excitement. (Vasopressors should not be given in patients receiving oxytocic drugs.) Convulsions may be controlled by the use of diazepam or short acting barbiturates such as thiopentone sodium. It should be remembered that anticonvulsant treatment may also depress respiration. A short-acting neuromuscular blocking agent, together with endotracheal intubation and artificial respiration has been used when convulsions persist.
Methaemoglobinaemia may be treated by intravenous administration of a 1% solution of methylene blue.
MARTINDALE; The Extra Pharmacopoeia, 29th Edition
Local anaesthetics produce vasodilation by blocking sympathetic nerves. Elevating the patient's legs and positioning the patient on the left side will help decrease blood pressure.
Treat symptomatically.
Metabolism of amide-type anaesthetics occurs in the liver and in some cases in the kidney. Because these undergo extensive and rapid hepatic metabolism, only about 1/3 of an oral dose reaches the systemic circulation.

SECTION 5 - FIREFIGHTING MEASURES

Extinguishing media

The product contains a substantial proportion of water, therefore there are no restrictions on the type of extinguishing media which may be used. Choice of extinguishing media should take into account surrounding areas.
Though the material is non-combustible, evaporation of water from the mixture, caused by the heat of nearby fire, may produce floating layers of combustible substances.

In such an event consider:
- foam.
- dry chemical powder.
- carbon dioxide.

Special hazards arising from 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. • **DO NOT** approach containers suspected to be hot. • Cool fire exposed containers with water spray from a protected location. • If safe to do so, remove containers from path of fire. • Equipment should be thoroughly decontaminated after use.
Fire / Explosion Hazard	• The material is not readily combustible under normal conditions. • However, it will break down under fire conditions and the organic component may burn. • Not considered to be a significant fire risk. • Heat may cause expansion or decomposition with violent rupture of containers. • Decomposes on heating and may produce toxic fumes of carbon monoxide (CO). • May emit acrid smoke. Decomposes on heating and produces toxic fumes of: • carbon dioxide (CO2) • other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.
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	• 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. • Wipe up. • Place in a suitable, labelled container for waste disposal.
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. • Prevent, by any means available, spillage from entering drains or water course. • Stop leak if safe to do so. • Contain spill with sand, earth or vermiculite. • Collect recoverable product into labelled containers for recycling. • Neutralise/decontaminate residue (see Section 13 for specific agent).

Major Spills (cont.)	• Collect solid residues and seal in labelled drums for disposal. • Wash area and prevent runoff into drains. • After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using. • If contamination of drains or waterways occurs, advise emergency services.

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

SECTION 7 - HANDLING AND STORAGE

Precautions for safe handling

Safe Handling	• DO NOT allow clothing wet with material to stay in contact with skin • Avoid all personal contact, including inhalation.
Safe Handling (cont.)	• Wear protective clothing when risk of exposure occurs. • Use in a well-ventilated area. • Prevent concentration in hollows and sumps. • DO NOT enter confined spaces until atmosphere has been checked. • DO NOT allow material to contact humans, exposed food or food utensils. • Avoid contact with incompatible materials. • When handling, DO NOT eat, drink or smoke. • Keep containers securely sealed when not in use. • Avoid physical damage to containers. • Always wash hands with soap and water after handling. • Work clothes should be laundered separately. Launder contaminated clothing before re-use. • Use good occupational work practice. • Observe manufacturer's storage and handling recommendations contained within this SDS. • Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
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. • Protect containers against physical damage and check regularly for leaks. • Observe manufacturer's storage and handling recommendations contained within this SDS. • Store below 30 deg. C.

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	• Avoid reaction with oxidising agents

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
benzyl alcohol	Benzyl alcohol	30 ppm	52 ppm	740 ppm

Ingredient	Original IDLH	Revised IDLH
lignocaine hydrochloride	not available	not available

benzyl alcohol	not available	not available
water	not available	not available

OCCUPATIONAL EXPOSURE BANDING

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
lignocaine hydrochloride	E	≤ 0.01 mg/m^3
benzyl alcohol	E	≤ 0.1 ppm
Notes:	*Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.*	

MATERIAL DATA

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. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.
OSHA (USA) concluded that exposure to sensory irritants can:

- cause inflammation
- cause increased susceptibility to other irritants and infectious agents
- lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and
- acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

Exposure controls

Appropriate Engineering Controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.
The basic types of engineering controls are:
Process controls which involve changing the way a job activity or process is done to reduce the risk.
Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use. Employers may need to use multiple types of controls to prevent employee overexposure.
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.
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.

Types 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 conveyer 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, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)

Appropriate Engineering Controls (cont.)	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.) Within each range the appropriate value depends on: *Lower end of the range* / *Upper end of the range* 1: Room air currents minimal or favourable to capture / 1: Disturbing room air currents 2: Contaminants of low toxicity or of nuisance value only. / 2: Contaminants of high toxicity 3: Intermittent, low production. / 3: High production, heavy use 4: Large hood or large air mass in motion / 4: Small hood-local control only 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.
Personal Protection	
Eye and Face Protection	No special equipment for minor exposure i.e. when handling small quantities. OTHERWISE: • Safety glasses with side shields. • 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 createdfor each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]
Skin Protection	See Hand protection below
Hands / Feet Protection	No special equipment needed when handling small quantities. OTHERWISE: • Wear chemical protective gloves, e.g. PVC.
Body Protection	See Other protection below
Other Protection	No special equipment needed when handling small quantities. OTHERWISE: • Overalls. • Barrier cream. • Eyewash 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:

NUMOCAINE 2 % INJECTION (Lignocaine 20mg/mL Local & Regional Anaesthetic)

Material	CPI
butyl	A
viton	A
natural rubber	C
neoprene	C
PVA	C

* 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 Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)
Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required min. protection factor	Max. gas/vapour concentration present in air ppm (by vol.)	Half-face respirator	Full-face respirator
up to 10	1000	A-AUS / Class 1	-
up to 50	1000	-	A-AUS /Class 1
up to 50	5000	Airline*	-
up to 100	5000	-	A-2
up to 100	10,000	-	A-3
100+			Airline**

* Continuous Flow
** Continuous-flow or positive pressure demand

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°C)

- 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

Appearance	Clear colouless liquid	**Relative Density (water = 1)**	1.005

Physical State	Liquid	**Partition Coefficient n-octanol / water**	Not available
Odour	Not available	**Auto-ignition Temperature (°C)**	Not available
Odour Theshold	Not available	**Decomposition Temperature**	Not available
pH (as supplied)	Not available	**Viscosity (cSt)**	Not available
Melting Point / Freezing Point (°C)	Not available	**Molecular Weight (g/mol)**	Not available
Initial Bioling Point and Boiling Range (°C)	100.0	**Taste**	Not available
Flash Point (°C)	Not applicable	**Explosive Properties**	Not available
Evaporation Rate	Not available	**Oxidising Properties**	Not available
Flammability	Not applicable	**Surface Tension (dyn/cm or mN/m)**	Not available
Upper Explosive Limit (%)	Not applicable	**Volatile Component (%vol)**	<1.0
Lower Explosive Limit (%)	Not applicable	**Gas Group**	Not available
Vapour Pressure (kPa)	Not available	**pH as a solution (1%)**	Not available
Solubility in Water	Not available	**VOC g/L**	Not available
Vapour Density (air = 1)	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
Hazardous Decomposition Products	See section 5

SECTION 11 - TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful. 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.

Ingestion	Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual.
Skin Contact	Skin contact with the material may be harmful; systemic effects may result following absorption. Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period.
	Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. The material may accentuate any pre-existing dermatitis condition Open cuts, abraded or irritated skin should not be exposed to this material 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.
Chronic	Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. There exists limited evidence that shows that skin contact with the material is capable either of inducing a sensitisation reaction in a significant number of individuals, and/or of producing positive response in experimental animals.

NUMOCAINE 2 % INJECTION (NumOcaine 20mg/mL)	**TOXICITY:** Oral (Mouse) LD50: 292 mg/kg[2] **IRRITATION:** Not available
lignocaine hydrochloride	**TOXICITY:** Oral (Mouse) LD50: 220 mg/kg[2] **IRRITATION:** Not available
benzyl alcohol	**TOXICITY:** Dermal (Rabbit) LD50: 2000 mg/kg[2] Inhalation (Rat) LC50: >4.178 mg/l/4h[2] Oral (Rat) LD50: 1230 mg/kg[2] **IRRITATION:** Eye (Rabbit): 0.75mg open SEVERE Eye: adverse effect observed (irritating)[1] Skin (Man):16mg/48h-mild Skin (Rabbit): 10MG/24H open-mild Skin: No adverse effect observed (not irritating)[1]
water	**TOXICITY:** Oral (Rat) LD50: >90,000 mg/kg[2] **IRRITATION:** 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*

lignocain hydrochloride	The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

benzyl alcohol	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. 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, substancesare noteworthy if they produce an allergic test reaction in more than 1% of the persons tested. **For benzyl alkyl alcohols:** Unlike benzylic alcohols, the beta-hydroxyl group of the members of this cluster is unlikely to undergo phase II metabolic activation. Instead, the beta-hydroxyl group is expected to contribute to detoxification via oxidation to hydrophilic acid. Despite structural similarity to carcinogenic ethyl benzene, only a marginal concern has been assigned to phenethyl alcohol due to limited mechanistic analogy. For benzoates: **Acute toxicity:** Benzyl alcohol, benzoic acid and its sodium and potassium salt can be considered as a single category regarding human health, as they are all rapidly metabolised and excreted via a common pathway within 24 hrs. Systemic toxic effects of similar nature (e.g. liver, kidney) were observed. However with benzoic acid and its salts toxic effects are seen at higher doses than with benzyl alcohol. The compounds exhibit low acute toxicity as for the oral and dermal route. The LD50 values are > 2000 mg/kg bw except for benzyl alcohol which needs to be considered as harmful by the oral route in view of an oral LD50 of 1610 mg/kg bw. The 4 hrs inhalation exposure of benzyl alcohol or benzoic acid at 4 and 12 mg/l as aerosol/dust respectively gave no mortality, showing low acute toxicity by inhalation for these compounds. Benzoic acid and benzyl alcohol are slightly irritating to the skin, while sodium benzoate was not skin irritating. No data are available for potassium benzoate but it is also expected not to be skin irritating. Benzoic acid and benzyl alcohol are irritating to the eye and sodium benzoate was only slightly irritating to the eye. No data are available for potassium benzoate but it is expected also to be only slightly irritating to the eye. **Sensitisation:** The available studies for benzoic acid gave no indication for a sensitising effect in animals, however occasionally very low positive reactions were recorded with humans (dermatological patients) in patch tests. The same occurs for sodium benzoate. It has been suggested that the very low positive reactions are non-immunologic contact urticaria. Benzyl alcohol gave positive and negative results in animals. Benzyl alcohol also demonstrated a maximum incidence of sensitization of only 1% in human patch testing. Over several decades no sensitization with these compounds has been seen among workers. **Repeat dose toxicity:** For benzoic acid repeated dose oral toxicity studies give a NOAEL of 800 mg/kg/day. For the salts values > 1000 mg/kg/day are obtained. At higher doses increased mortality, reduced weight gain, liver and kidney effects were observed. For benzyl alcohol the long-term studies indicate a NOAEL > 400 mg/kg bw/d for rats and > 200 mg/kg bw/d for mice. At higher doses effects on bodyweights, lesions in the brains, thymus, skeletal muscle and kidney were observed. It should be taken into account that administration in these studies was by gavage route, at which saturation of metabolic pathways is likely to occur. Mutagenicity: All chemicals showed no mutagenic activity in in vitro Ames tests. Various results were obtained with other in vitro genotoxicity assays. Sodium benzoate and benzyl alcohol showed no genotoxicity in vivo. While some mixed and/or equivocal in vitro chromosomal/chromatid responses have been observed, no genotoxicity was observed in the in vivo cytogenetic, micronucleus, or other assays. The weight of the evidence of the in vitro and in vivo genotoxicity data indicates that these chemicals are not mutagenic or clastogenic. They also are not carcinogenic in long-term carcinogenicity studies.

benzyl alcohol (cont.)	In a 4-generation study with benzoic acid no effects on reproduction were seen (NOAEL: 750 mg/kg). No compound related effects on reproductive organs (gross and histopathology examination) could be found in the (sub) chronic studies in rats and mice with benzyl acetate, benzyl alcohol, benzaldehyde, sodium benzoate and supports a non-reprotoxic potential of these compounds. In addition, data from reprotoxicity studies on benzyl acetate (NOAEL >2000 mg/kg bw/d; rats and mice) and benzaldehyde (tested only up to 5 mg/kg bw; rats) support the non-reprotoxicity of benzyl alcohol and benzoic acid and its salts. Developmental toxicity: In rats for sodium benzoate dosed via food during the entire gestation developmental effects occurred only in the presence of marked maternal toxicity (reduced food intake and decreased body weight) (NOAEL = 1400 mg/kg bw). For hamster (NOEL: 300 mg/kg bw), rabbit (NOEL: 250 mg/kg bw) and mice (CD-1 mice, NOEL: 175 mg/kg bw) no higher doses (all by gavage) were tested and no maternal toxicity was observed. For benzyl alcohol: NOAEL= 550 mg/kg bw (gavage; CD-1 mice). LOAEL = 750 mg/kg bw (gavage mice). In this study maternal toxicity was observed e.g. increased mortality, reduced body weight and clinical toxicology. Benzyl acetate: NOEL = 500 mg/kg bw (gavage rats). No maternal toxicity was observed. Adverse reactions to fragrances in perfumes and in fragranced cosmetic products include allergic contact dermatitis, irritant contact dermatitis, photosensitivity, immediate contact reactions (contact urticaria), and pigmented contact dermatitis. Airborne and connubial contact dermatitis occur. Intolerance to perfumes, by inhalation, may occur if the perfume contains a sensitising principal. Symptoms may vary from general illness, coughing, phlegm, wheezing, chest-tightness, headache, exertional dyspnoea, acute respiratory illness, hayfever, and other respiratory diseases (including asthma). Perfumes can induce hyper-reactivity of the respiratory tract without producing an IgE-mediated allergy or demonstrable respiratory obstruction. This was shown by placebo-controlled challenges of nine patients to "perfume mix". The same patients were also subject to perfume provocation, with or without a carbon filter mask, to scertain whether breathing through a filter with active carbon would prevent symptoms. The patients breathed through the mouth, during the provocations, as a nose clamp was used to prevent nasal inhalation. The patient's earlier symptoms were verified; breathing through the carbon filter had no protective effect. The symptoms were not transmitted via the olfactory nerve but they may have been induced by trigeminal reflex via the respiratory tract or by the eyes. Cases of occupational asthma induced by perfume substances such as isoamyl acetate, limonene, cinnamaldehyde and benzaldehyde, tend to give persistent symptoms even though the exposure is below occupational exposure limits. Inhalation intolerance has also been produced in animals. The emissions of five fragrance products, for one hour, produced various combinations of sensory irritation, pulmonary irritation, decreases in expiratory airflow velocity as well as alterations of the functional observational battery indicative of neurotoxicity in mice. Neurotoxicity was found to be more severe after mice were repeatedly exposed to the fragrance products, being four brands of cologne and one brand of toilet water. Contact allergy to fragrances is relatively common, affecting 1 to 3% of the general population, based on limited testing with eight common fragrance allergens and about 16% of patients patch tested for suspected allergic contact dermatitis. Contact allergy to fragrance ingredients occurs when an individual has been exposed, on the skin, to a suffcient degree of fragrance contact allergens. Contact allergy is a life-long, specifically altered reactivity in the immune system. This means that once contact allergy is developed, cells in the immune system will be present which can recognise and react towards the allergen. As a consequence, symptoms, i.e. allergic contact dermatitis, may occur upon re-exposure to the fragrance allergen(s) in question. Allergic contact dermatitis is an inflammatory skin disease characterised by erythema, swelling and vesicles in the acute phase. If exposure continues it may develop into a chronic condition with scaling and painful fissures of the skin. Allergic contact dermatitis to fragrance ingredients is most often caused by cosmetic products and usually involves the face and/or hands. It may affect fitness for work and the quality of

benzyl alcohol (cont.)	life of the individual. Fragrance contact allergy has long been recognised as a frequent and potentially disabling problem. Prevention is possible as it is an environmental disease and if the environment is modified (e.g. by reduced use concentrations of allergens), the disease frequency and severity will decrease Fragrance contact allergy is mostly non-occupational and related to the personal use of cosmetic products. Allergic contact dermatitis can be severe and widespread, with a significant impairment of quality of life and potential consequences for fitness for work. Thus, prevention of contact sensitisation to fragrances, both in terms of primary prevention (avoiding sensitisation) and secondary prevention (avoiding relapses of allergic contact dermatitis in those already sensitised), is an important objective of public health risk management measure. **Hands:** Contact sensitisation may be the primary cause of hand eczema, or may be a complication of irritant or atopic hand eczema. The number of positive patch tests has been reported to correlate with the duration of hand eczema, indicating that long-standing hand eczema may often be complicated by sensitisation .Fragrance allergy may be a relevant problem in patients with hand eczema; perfumes are present in consumer products to which their hands are exposed. A significant relationship between hand eczema and fragrance contact allergy has been found in some studies based on patients investigated for contact allergy. However, hand eczema is a multi-factorial disease and the clinical significance of fragrance contact allergy in (severe) chronic hand eczema may not be clear. **Axillae Bilateral axillary:** (underarm) dermatitis may be caused by perfume in deodorants and, if the reaction is severe, it may spread down the arms and to other areas of the body. In individuals who consulted a dermatologist, a history of such first-time symptoms was significantly related to the later diagnosis of perfume allergy. **Face:** Facial eczema is an important manifestation of fragrance allergy from the use of cosmetic products (16). In men, after-shave products can cause an eczematous eruption of the beard area and the adjacent part of the neck and men using wet shaving as opposed to dry have been shown to have an increased risk of of being fragrance allergic. **Irritant reactions (including contact urticaria):** Irritant effects of some individual fragrance ingredients, e.g. citral are known. Irritant contact dermatitis from perfumes is believed to be common, but there are no existing investigations to substantiate this, Many more people complain about intolerance or rashes to perfumes/perfumed products than are shown to be allergic by testing. This may be due to irritant effects or inadequate diagnostic procedures. Fragrances may cause a dose-related contact urticaria of the non-immunological type (irritant contact urticaria). Cinnamal, cinnamic alcohol, and Myroxylon pereirae are well recognised causes of contact urticaria, but others, including menthol, vanillin and benzaldehyde have also been reported . The reactions to Myroxylon pereirae may be due to cinnamates. A relationship to delayed contact hypersensitivity was suggested , but no significant difference was found between a fragrance-allergic group and a control group in the frequency of immediate reactions to fragrance ingredients in keeping with a nonimmunological basis for the reactions seen. **Pigmentary anomalies:** The term “pigmented cosmetic dermatitis” was introduced in 1973 for what had previously been known as melanosis faciei feminae when the mechanism (type IV allergy) and causative allergens were clarified.. It refers to increased pigmentation, usually on the face/neck, often following sub-clinical contact dermatitis. Many cosmetic ingredients were patch tested at non-irritant concentrations and statistical evaluation showed that a number of fragrance ingredients were associated: jasmine absolute, ylang-ylang oil, cananga oil, benzyl salicylate, hydroxycitronellal, sandalwood oil, geraniol, geranium oil. **Photo-reactions:** Musk ambrette produced a considerable number of allergic photocontact reactions (in which UV-light is required) in the 1970s and was later banned from use in the EU. Nowadays, photoallergic contact dermatitis is uncommon . Furocoumarins (psoralens) in some plant-derived fragrance ingredients caused phototoxic reactions with erythema followed by hyperpigmentation resulting in Berloque dermatitis. There are now limits for the amount of furocoumarins in fragrance products. Phototoxic reactions still occur but are rare. **General/Respiratory:** Fragrances are volatile and therefore, in addition to skin exposure, a perfume also exposes the eyes and naso-respiratory tract. It is estimated that 2-4% of the adult population is affected by respiratory or eye symptoms by such an exposure. It is known that exposure to fragrances may exacerbate pre-existing asthma . Asthma-like symptoms can be provoked by sensory mechanisms. In an epidemiological investigation, a significant association was found between respiratory complaints related to fragrances and contact allergy to fragrance ingredients, in addition to hand eczema, which were independent risk factors in a multivariate analysis.

benzyl alcohol (cont.)

Fragrance allergens act as haptens, i.e. low molecular weight chemicals that are immunogenic only when attached to a carrier protein. However, not all sensitising fragrance chemicals are directly reactive, but require previous activation. A prehapten is a chemical that itself is non- or low-sensitising, but that is transformed into a hapten outside the skin by simple chemical transformation (air oxidation, photoactivation) and without the requirement of specific enzymatic systems. A prohapten is a chemical that itself is non- or low-sensitising but that is transformed into a hapten in the skin (bioactivation) usually via enzyme catalysis. It is not always possible to know whether a particular allergen that is not directly reactive acts as a prehapten or as prohapten, or both, because air oxidation and bioactivation can often give the same product (geraniol is an example). Some chemicals might act by all three pathways.

Prohaptens: Compounds that are bioactivated in the skin and thereby form haptens are referred to as prohaptens.
In the case of prohaptens, the possibility to become activated is inherent to the molecule and activation cannot be avoided by extrinsic measures. Activation processes increase the risk for cross-reactivity between fragrance substances. Crossreactivity has been shown for certain alcohols and their corresponding aldehydes, i.e. between geraniol and geranial (citral) and between cinnamyl alcohol and cinnamal.

The human skin expresses enzyme systems that are able to metabolise xenobiotics, modifying their chemical structure to increase hydrophilicity and allow elimination from the body. Xenobiotic metabolism can be divided into two phases: phase I and phase II. Phase I transformations are known as activation or functionalisation reactions, which normally introduce or unmask hydrophilic functional groups. If the metabolites are sufficiently polar at this point they will be eliminated. However, many phase I products have to undergo subsequent phase II transformations, i.e. conjugation to make them sufficiently water soluble to be eliminated. Although the purpose of xenobiotic metabolism is detoxification, it can also convert relatively harmless compounds into reactive species. Cutaneous enzymes that catalyse phase I transformations include the cytochrome P450 mixed-function oxidase system, alcohol and aldehyde dehydrogenases, monoamine oxidases, flavin-containing monooxygenases and hydrolytic enzymes. Acyltransferases, glutathione S-transferases, UDP-glucuronosyltransferases and sulfotransferases are examples of phase II enzymes that have been shown to be present in human skin . These enzymes are known to catalyse both activating and deactivating biotransformations, but the influence of the reactions on the allergenic activity of skin sensitisers has not been studied in detail. Skin sensitising prohaptens can be recognised and grouped into chemical classes based on knowledge of xenobiotic bioactivation reactions, clinical observations and/or in vivo and in vitro studies of sensitisation potential and chemical reactivity.

QSAR prediction: The relationships between molecular structure and reactivity that form the basis for structural alerts are based on well established principles of mechanistic organic chemistry. Examples of structural alerts are aliphatic aldehydes (alerting to the possibility of sensitisation via a Schiff base reaction with protein amino groups), and alpha,beta-unsaturated carbonyl groups, C=C-CO- (alerting to the possibility of sensitisation via Michael addition of protein thiol groups). Prediction of the sensitisation potential of compounds that can act via abiotic or metabolic activation (pre- or prohaptens) is more complex compared to that of compounds that act as direct haptens without any activation. The autoxidation patterns can differ due to differences in the stability of the intermediates formed, e.g. it has been shown that autoxidation of the structural isomers linalool and geraniol results in different

major haptens/allergens. Moreover, the complexity of the prediction increases further for those compounds that can act both as pre- and prohaptens. In such cases, the impact on the sensitisation potency depends on the degree of abiotic activation (e.g. autoxidation) in relation to the metabolic activation.

The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

benzyl alcohol (cont.)	A member or analogue of a group of benzyl derivatives generally regarded as safe (GRAS) based in part on their self-limiting properties as flavouring substances in food; their rapid absorption. metabolic detoxification, and excretion in humans and other animals, their low level of flavour use, the wide margin of safety between the conservative estimates of intake and the no-observed-adverse effect levels determined from chronic and subchronic studies and the lack of significant genotoxic and mutagenic potential. This evidence of safety is supported by the fact that the intake of benzyl derivatives as natural components of traditional foods is greater than the intake as intentionally added flavouring substances. All members of this group are aromatic primary alcohols, aldehydes, carboxylic acids or their corresponding esters or acetals. The substances in this group: • contain a benzene ring substituted with a reactive primary oxygenated functional group or can be hydrolysed to such a functional group • the major pathway of metabolic detoxification involves hydrolysis and oxidation to yield the corresponding benzoic acid derivate which is excreted either as the free acid or the glycine conjugate • they show a consistent pattern of toxicity in both short- and long- term studies and • they exhibit no evidence of genotoxicity in standardised batteries of in vitro and in vivo assays. The benzyl derivatives are rapidly absorbed through the gut, metabolised primarily in the liver, and excreted in the urine as glycine conjugates of benzoic acid derivatives. In general, aromatic esters are hydrolysed in vivo through the catalytic activity of carboxylesterases, the most important of which are the A-esterases. Hydrolysis of benzyl and benzoate esters to yield corresponding alcohols and carboxylic acids and hydrolysis of acetals to yield benzaldehyde and simple alcohols have been reported in several experiments. The alcohols and aldehydes are rapidly oxidised to benzoic acid while benzoate esters are hydrolysed to benzoic acid. Flavor and Extract Manufacturers Association (FEMA) The aryl alkyl alcohol (AAA) fragrance ingredients are a diverse group of chemical structures with similar metabolic and toxicity profiles. The AAA fragrances demonstrate low acute and subchronic dermal and oral toxicity. At concentrations likely to be encountered by consumers, AAA fragrance ingredients are non-irritating to the skin. The potential for eye irritation is minimal. With the exception of benzyl alcohol and to a lesser extent phenethyl and 2-phenoxyethyl AAA alcohols, human sensitization studies, diagnostic patch tests and human induction studies, indicate that AAA fragrance ingredients generally have no or low sensitization potential. Available data indicate that the potential for photosensitization is low. NOAELs for maternal and developmental toxicity are far in excess of current human exposure levels. No carcinogenicity in rats or mice was observed in 2-year chronic testing of benzyl alcohol or a-methylbenzyl alcohol; the latter did induce species and gender-specific renal adenomas in male rats at the high dose. There was no to little genotoxicity, mutagenicity, or clastogenicity in the mutagenicity in vitro bacterial assays, and in vitro mammalian cell assays. All in vivo micronucleus assays were negative. It is concluded that these materials would not present a safety concern at current levels of use as fragrance ingredients The Research Institute for Fragrance Materials (RIFM) Expert Panel
water	No significant acute toxicological data identified in literature search.

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

NUMOCAINE 2% INJECTION

ENDPOINT	TEST DURATION (hr)	SPECIES	VALUE	SOURCE
Not available	Not available	Not available	Not available	Not available

LIGNOCAINE HYDROCHLORIDE

ENDPOINT	TEST DURATION (hr)	SPECIES	VALUE	SOURCE
Not available	Not available	Not available	Not available	Not available

BENZYL ALCOHOL

ENDPOINT	TEST DURATION (hr)	SPECIES	VALUE	SOURCE
LC50	96	Fish	10mg/l	2
EC50	48	Crustacea	230mg/l	2
EC50	96	Algae or other aquatic plants	76.828mg/l	2
NOEC	336	Fish	5.1mg/l	2

WATER

ENDPOINT	TEST DURATION (hr)	SPECIES	VALUE	SOURCE
LC50	96	Fish	897.52mg/l	3
EC50	96	Algae or other aquatic plants	8768.874mg/l	3

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

Ingedient	Persistence: Water / Soil	Persistence: Air
benzyl alcohol	LOW	LOW
water	LOW	LOW

Bioaccumulative potential

Ingedient	Persistence: Water / Soil
benzyl alcohol	LOW (LogKOW = 1.1)
water	LOW (LogKOW = 1.38)

Mobility in soil

Ingedient	Persistence: Water / Soil
benzyl alcohol	LOW (KOC = 15.66)
water	LOW (KOC = 14.3)

SECTION 13 - DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging	Containers may still present a chemical hazard/ danger when empty.

Disposal	• 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 • Recycling • 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. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate. • 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. • Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. • Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or incineration in a licensed apparatus (after admixture with suitable combustible material). • Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 - TRANSPORTATION 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

LIGNOCAINE HYDROCHLORIDE IS FOUND ON THE FOLLOWING REGULATORY LISTS:

- Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List
- Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes

- Australia Inventory of Chemical Substances (AICS)
- International Air Transport Association (IATA) Dangerous Goods Regulations
- International Maritime Dangerous Goods Requirements (IMDG Code)
- United Nations Recommendations on the Transport of Dangerous Goods Model Regulations

BENZYL ALCOHOL IS FOUND ON THE FOLLOWING REGULATORY LISTS:

- Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List
- Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes
- Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
- Australia Inventory of Chemical Substances (AICS)
- GESAMP/EHS Composite List - GESAMP Hazard Profiles
- IMO IBC Code Chapter 17: Summary of minimum requirements
- IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk
- International Air Transport Association (IATA) Dangerous Goods Regulations
- International Maritime Dangerous Goods Requirements (IMDG Code)
- United Nations Recommendations on the Transport of Dangerous Goods Model Regulations

WATER IS FOUND ON THE FOLLOWING REGULATORY LISTS:

- Australia Inventory of Chemical Substances (AICS)
- IMO IBC Code Chapter 18: List of products to which the Code does not apply

National Inventory Status

National Inventory	Status
Australia - AICS	Yes
Canada - DSL	Yes
Canada - NDSL	No (benzyl alcohol; lignocaine hydrochloride; water)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (lignocaine hydrochloride)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Phillippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - ARIPS	No (lignocaine hydrochloride)
Legend:	*Yes = All CAS declared ingredients are on the inventory* *No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients* *in brackets)*

SECTION 16 - OTHER INFORMATION

Revision Date	N/A
Initial Date	01/06/2019

SDS Version Summary

Version	Issue Date	Sections Updated

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

TLV: Threshold Limit Value

OSF: Odour Safety Factor

LOD: Limit Of Detection

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit

IDLH: Immediately Dangerous to Life or Health Concentrations

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

OTV: Odour Threshold Value

BCF: BioConcentration Factors

BEI: Biological Exposure Index

LOAEL: Lowest Observed Adverse Effect Level

NOAEL: No Observed Adverse Effect Level