

Nowchem

Version No: 1.2 Safety Data Sheet according to WHS and ADG requirements

Issue Date: 13/07/2016 Print Date: 13/07/2016 Initial Date: 11/07/2016 L.GHS.AUS.EN

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

Product Identifier

Product name	Citric Acid 50%
Synonyms	Not Available
Other means of identification	Not Available

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

Relevant identified uses For various applications including water treatment processing and plant cleaning.

Details of the supplier of the safety data sheet

Registered company name	Nowchem
Address	112A Albatross Road NSW Australia
Telephone	(02) 4421 4099
Fax	(02) 4421 4932
Website	www.nowchem.com.au
Email	sales@nowchem.com.au

Emergency telephone number

Association / Organisation	Nowchern
Emergency telephone numbers	(02) 4421 4099
Other emergency telephone numbers	0413 809 255

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

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

CHEMWATCH HAZARD RATINGS

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

Poisons Schedule	Not Applicable
Classification ^[1]	Serious Eye Damage Category 1, Specific target organ toxicity - single exposure Category 3(respiratory tract irritation), Skin Corrosion/Irritation Category 1A
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

GHS label elements	
SIGNAL WORD	DANGER

Hazard statement(s)

H335	May cause respiratory irritation.
H314	Causes severe skin burns and eye damage.

Precautionary statement(s) Prevention

P101	If medical advice is needed, have product container or label at hand.
P102	Keep out of reach of children.
P103	Read label before use.
P260	Do not breathe dust/fume/gas/mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.

Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
P303+P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P310	Immediately call a POISON CENTER or doctor/physician.
P363	Wash contaminated clothing before reuse.
P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.

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	%[weight]	Name
77-92-9	50	citric acid

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Eye Contact	 If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	 If skin or hair contact occurs: Immediately flush body and clothes with large amounts of water, using safety shower if available. Quickly remove all contaminated clothing, including footwear. Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. Transport to hospital, or doctor.
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.

For advice, contact a Poisons Information Centre or a doctor at once.
 Urgent hospital treatment is likely to be needed.
 If swallowed do NOT induce vomiting.
 If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
 Observe the patient carefully.
 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.
 Transport to hospital or doctor without delay.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically. INGESTION:

• Immediate dilution (milk or water) within 30 minutes post ingestion is recommended.

- DO NOT attempt to neutralise the acid since exothermic reaction may extend the corrosive injury.
- Be careful to avoid further vomit since re-exposure of the mucosa to the acid is harmful. Limit fluids to one or two glasses in an adult.
- Charcoal has no place in acid management.
- Some authors suggest the use of lavage within 1 hour of ingestion.

SKIN:

+ Skin lesions require copious saline irrigation. Treat chemical burns as thermal burns with non-adherent gauze and wrapping.

Deep second-degree burns may benefit from topical silver sulfadiazine.

EYE:

- Eye injuries require retraction of the eyelids to ensure thorough irrigation of the conjuctival cul-de-sacs. Irrigation should last at least 20-30 minutes. DO NOT use neutralising agents or any other additives. Several litres of saline are required.
- Cycloplegic drops, (1% cyclopentolate for short-term use or 5% homatropine for longer term use) antibiotic drops, vasoconstrictive agents or artificial tears may be indicated dependent on the severity of the injury.
- Steroid eye drops should only be administered with the approval of a consulting ophthalmologist).

[Ellenhorn and Barceloux: Medical Toxicology]

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility	► Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
Advice for firefighters	
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus. Prevent, by any means available, spillage from entering drains or water course. Use water delivered as a fine spray to control fire and cool adjacent area. Avoid spraying water onto liquid pools. 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.
Fire/Explosion Hazard	 Slight fire hazard when exposed to heat or flame. Acids may react with metals to produce hydrogen, a highly flammable and explosive gas. Heating may cause expansion or decomposition leading to violent rupture of containers. May emit acrid smoke and corrosive fumes. Combustion products include; 3cv, carbon dioxide (CO2) other pyrolysis products typical of burning organic materiaMay emit poisonous fumesMay emit corrosive fumes.

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

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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. No smoking, naked lights or ignition sources. Increase ventilation. Stop leak if safe to do so. Contain spill with sand, earth or vermiculite. Collect recoverable product into labelled containers for recycling. Absorb remaining product with sand, earth or vermiculite. Collect solid residues and seal in labelled drums for disposal. Wash area and prevent runoff into drains.

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► 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	 Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Avoid smoking, naked lights or ignition sources. 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 scap and water after handling. Work clothes should be laundered separately. Use good occupational work practice. Observe manufacturer's storage and handling recommendations contained within this SDS.
Other information	 Store in original containers. Keep containers securely sealed. No smoking, naked lights or ignition sources. 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.

Conditions for safe storage, including any incompatibilities

Suitable container	 Plastic pail. Polyliner drum. Packing as recommended by manufacturer (HDPE). Check all containers are clearly labelled and free from leaks. Metal can or drum Packaging as recommended by manufacturer. Check all containers are clearly labelled and free from leaks.
Storage incompatibility	 Avoid strong bases. 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
citric acid	Citric acid	0.37 mg/m3		4 mg/m3	590 mg/m3
Ingredient	Original IDLH		Revised IDLH		
citric acid	Not Available		Not Available		

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 irritations 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 irritatis 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.
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	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.
Personal protection	Provide adequate ventilation in warehouse or closed storage area.
Eye and face protection	 Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure. Chemical goggles whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]
Skin protection	See Hand protection below
Hands/feet protection	► PVC or Latex gloves
Body protection	See Other protection below
Other protection	 Barrier cream. Skin cleansing cream. Eye wash unit.
Thermal hazards	Not Available

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Clear Colourless Liquid		
Physical state	Liquid	Relative density (Water = 1)	1.23 - 1.28
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	1-2	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Available
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Non Flammable	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
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Ingredient

Endpoint

Test Duration (hr)

Species

Citric Acid 50%

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	Ingestion of acidic corrosives may produce circumoral burns with a distinct discolouration of the mucous membranes of the mouth, throat and oesophagus. Immediate pain and difficulties in swallowing and speaking may also be evident. Oedema of the epiglottis may produce respiratory distress and possibly, asphyxia. Nausea, vomiting, diarrhoea and a pronounced thirst may occur. More severe exposures may produce a vomitus containing fresh or dark blood and large shreds of mucosa. Shock, with marked hypotension, weak and rapid pulse, shallow respiration and clammy skin may be symptomatic of the exposure. Circulatory collapse may, if left untreated, result in renal failure. Severe cases may show gastric and oesophageal perforation with peritonitis, fever and abdominal rigidity. Stricture of the oesophageal, gastric and pyloric sphincter may occur as within several weeks or may be delayed for years. Death may be rapid and often results from asphyxia, circulatory collapse or aspiration of even minute amounts. Delayed deaths may be due to peritonitis, severe nephritis or pneumonia. Coma and convulsions may be terminal. Accidental ingestion of the material may be damaging to the health of the individual.			
Skin Contact	Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue. Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions. 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	When applied to the eye(s) of animals, the material produces severe ocu Direct eye contact with acid corrosives may produce pain, lachrymation, p completely. Severe burns produce long-lasting and possible irreversible d initial contact. The cornea may ultimately become deeply vascularised an	ar lesions which are pre notophobia and burns. I mage. The appearance I opaque resulting in bli	sent twenty-four hours or more after instillation. Vild burns of the epithelia generally recover rapidly and of the burn may not be apparent for several weeks after the ndness.	
Chronic	Repeated or prolonged exposure to acids may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis. The impact of inhaled acidic agents on the respiratory tract depends upon a number of interrelated factors. These include physicochemical characteristics, e.g., gas versus aerosol; particle size (small particles can penetrate deeper into the lung); water solubility (more soluble agents are more likely to be removed in the nose and mouth). Given the general lack of information on the particle size of aerosols involved in occupational exposures to acids, it is difficult to identify their principal deposition site within the respiratory tract. Acid mists containing particles with a diameter of up to a few micrometers will be deposited in both the upper and lower airways. They are irritating to mucous epithelia, they cause dental erosion, and they produce acute effects in the lungs (symptoms and changes in pulmonary function). Asthmatics appear to be at particular risk for pulmonary effects.			
	TOXICITY	IRRITATION		
Citric Acid 50%	Not Available	Not Available		
citric acid	dermal (rat) LD50: >2000 mg/kg ¹⁺¹ Eye (rabbit):			
	Oral (rat) LD50: 3000 mg/kg ^[2] Skin (rabbit): 500 r) mg/24n - mila	
Legend:	1. Value obtained from Europe ECHA Registered Substances - Acute to extracted from RTECS - Register of Toxic Effect of chemical Substances	city 2.* Value obtained	from manufacturer's SDS. Unless otherwise specified data	
Citric Acid 50%	Asthma-like symptoms may continue for months or even years after expos reactive airways dysfunction syndrome (RADS) which can occur followin of RADS include the absence of preceding respiratory disease, in a non- to hours of a documented exposure to the irritant. A reversible airflow patt on methacholine challenge testing and the lack of minimal lymphocytic in of RADS. RADS (or asthma) following an irritating inhalation is an infrequ irritating substance. Industrial bronchitis, on the other hand, is a disorder (often particulate in nature) and is completely reversible after exposure of	ure to the material cease exposure to high level opic individual, with aburr, or spirometry, with 1 ammation, without eosi ent disorder with rates in that occurs as result of ases. The disorder is ch	es. This may be due to a non-allergenic condition known as s of highly irritating compound. Key criteria for the diagnosis upt onset of persistent asthma-like symptoms within minutes he presence of moderate to severe bronchial hyperreactivity nophilia, have also been included in the criteria for diagnosis related to the concentration of and duration of exposure to the exposure due to high concentrations of irritating substance arracterised by dyspnea, cough and mucus production.	
Acute Toxicity	0	Carcinogenicity	0	
Skin Irritation/Corrosion	✓	Reproductivity	0	
Serious Eye Damage/Irritation	✓ stc	- Single Exposure	*	
Respiratory or Skin sensitisation	S STOT -	Repeated Exposure	0	
Mutagenicity	0	Aspiration Hazard	0	
		Legend: X	 Data available but does not fill the criteria for classification Data required to make classification available Data Not Available to make classification 	
SECTION 12 ECOLOGICA	L INFORMATION			

Source

Value

citric acid	EC0	72	Crustacea	<80mg/L	1
citric acid	EC50	96	Algae or other aquatic plants	23.29809mg/L	3
citric acid	LC50	96	Fish	9.23896mg/L	3
citric acid	NOEC	16	Crustacea	153mg/L	4
citric acid	EC50	48	Crustacea	>50mg/L	2
Legend:	Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 - 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
citric acid	LOW	LOW

Bioaccumulative potential

Distance	
citric acid LOW (Lo	.ogKOW = -1.64)

Mobility in soil

Ingredient	Mobility
citric acid	LOW (KOC = 10)

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods
Product / Packaging disposal

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

CITRIC ACID(77-92-9) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Substances Information System - Consolidated Lists

National InventoryStatusAustralia - AICSYCanada - DSLYCanada - NDSLN (citric acid)China - IECSCYEurope - EINEC / ELINCS /
NLPYJapan - ENCSN (citric acid)

Australia Inventory of Chemical Substances (AICS)

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

Other information

Ingredients with multiple cas numbers

Name	CAS No
citric acid	1192555-95-5, 12262-73-6, 136108-93-5, 245654-34-6, 43136-35-2, 623158-96-3, 77-92-9, 856568-15-5, 878903-72-1, 890704-54-8, 896506-46-0, 906507-37-7

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

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

Definitions and abbreviations

PC – TWA: Permissible Concentration-Time Weighted Average PC – STEL: Permissible Concentration-Short Term Exposure Limit IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure Limit, IDLH: Immediately Dangerous to Life or Health Concentrations OSF: Odour Safety Factor NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level LOD: Limit of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors BEI: Biological Exposure Index

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