A-Gas R22

A-Gas (New Zealand) Limited

Chemwatch Hazard Alert Code: **1**

Chemwatch: **15-7563**
Version No: **10.1**
Safety Data Sheet according to the Health and Safety at Work (Hazardous Substances) Regulations 2017

Initial Date: **11/06/2008**
Revision Date: **06/03/2024**
Print Date: **16/10/2026**
L.GHS.NZL.EN

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

Product Identifier

Product name	A-Gas R22
Synonyms	Mixtures of Chlorofluorocarbons; Hydrochlorofluorocarbons; Hydrofluorocarbons; R-22; CHLORODIFLUOROMETHANE; HCFC-22; DYMEL 22
Proper shipping name	REFRIGERANT GAS R 22; CHLORODIFLUOROMETHANE
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses	Refrigerant. for industrial use only.

Details of the manufacturer or importer of the safety data sheet

Registered company name	**A-Gas (New Zealand) Limited**
Address	68 Rangi Road Takanini 2105 New Zealand
Telephone	+64 0800 992 427
Fax	Not Available
Website	www.agas.com
Email	Not Available

Emergency telephone number

Association / Organisation	**CHEMWATCH EMERGENCY RESPONSE (24/7)**
Emergency telephone number(s)	**+64 800 700 112 (ID#: 15-7563)**
Other emergency telephone number(s)	**+61 3 9573 3188**

SECTION 2 Hazards identification

Classification of the substance or mixture

Classification [1]	Gases Under Pressure (Liquefied Gas)
Legend:	*1. Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI*
Determined by Chemwatch using GHS/HSNO criteria	Not Available

Label elements

Hazard pictogram(s)	

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Signal word	**Warning**

Hazard statement(s)

H280	Contains gas under pressure; may explode if heated.

Precautionary statement(s) General

P101	If medical advice is needed, have product container or label at hand.
P102	Keep out of reach of children.
P103	Read carefully and follow all instructions.

Precautionary statement(s) Prevention

Not Applicable

Precautionary statement(s) Response

Not Applicable

Precautionary statement(s) Storage

P410+P403	Protect from sunlight. Store in a well-ventilated place.

Precautionary statement(s) Disposal

Not Applicable

No further product hazard information.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
75-45-6	>99.5	chlorodifluoromethane

Legend:	*1. Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available*

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	‣ If product comes in contact with eyes remove the patient from gas source or contaminated area. ‣ Take the patient to the nearest eye wash, shower or other source of clean water. ‣ Open the eyelid(s) wide to allow the material to evaporate. ‣ Gently rinse the affected eye(s) with clean, cool water for at least 15 minutes. Have the patient lie or sit down and tilt the head back. Hold the eyelid(s) open and pour water slowly over the eyeball(s) at the inner corners, letting the water run out of the outer corners. ‣ The patient may be in great pain and wish to keep the eyes closed. It is important that the material is rinsed from the eyes to prevent further damage. ‣ Ensure that the patient looks up, and side to side as the eye is rinsed in order to better reach all parts of the eye(s) ‣ Transport to hospital or doctor. ‣ Even when no pain persists and vision is good, a doctor should examine the eye as delayed damage may occur. ‣ If the patient cannot tolerate light, protect the eyes with a clean, loosely tied bandage. ‣ Ensure verbal communication and physical contact with the patient. **DO NOT** allow the patient to rub the eyes **DO NOT** allow the patient to tightly shut the eyes **DO NOT** introduce oil or ointment into the eye(s) without medical advice **DO NOT** use hot or tepid water.
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. In case of cold burns (frost-bite): ‣ Move casualty into warmth before thawing the affected part; if feet are affected carry if possible ‣ Bathe the affected area immediately in luke-warm water (not more than 35 deg C) for 10 to 15 minutes, immersing if possible and without rubbing ‣ **DO NOT** apply hot water or radiant heat. ‣ Apply a clean, dry, light dressing of "fluffed-up" dry gauze bandage

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	‣ If a limb is involved, raise and support this to reduce swelling ‣ If an adult is involved and where intense pain occurs provide pain killers such as paracetomol ‣ Transport to hospital, or doctor ‣ Subsequent blackening of the exposed tissue indicates potential of necrosis, which may require amputation.
Inhalation	‣ Following exposure to gas, remove the patient from the gas source or contaminated area. ‣ NOTE: Personal Protective Equipment (PPE), including positive pressure self-contained breathing apparatus may be required to assure the safety of the rescuer. ‣ Prostheses such as false teeth, which may block the airway, should be removed, where possible, prior to initiating first aid procedures. ‣ If the patient is not breathing spontaneously, administer rescue breathing. ‣ If the patient does not have a pulse, administer CPR. ‣ If medical oxygen and appropriately trained personnel are available, administer 100% oxygen. ‣ Summon an emergency ambulance. If an ambulance is not available, contact a physician, hospital, or Poison Control Centre for further instruction. ‣ Keep the patient warm, comfortable and at rest while awaiting medical care. ‣ **MONITOR THE BREATHING AND PULSE, CONTINUOUSLY.** ‣ Administer rescue breathing (preferably with a demand-valve resuscitator, bag-valve mask-device, or pocket mask as trained) or CPR if necessary.
Ingestion	‣ Not considered a normal route of entry.

Indication of any immediate medical attention and special treatment needed

for intoxication due to Freons/ Halons;
A: Emergency and Supportive Measures
- Maintain an open airway and assist ventilation if necessary
- Treat coma and arrhythmias if they occur. Avoid (adrenaline) epinephrine or other sympathomimetic amines that may precipitate ventricular arrhythmias. Tachyarrhythmias caused by increased myocardial sensitisation may be treated with propranolol, 1-2 mg IV or esmolol 25-100 microgm/kg/min IV.
- Monitor the ECG for 4-6 hours

B: Specific drugs and antidotes:
- There is no specific antidote

C: Decontamination
- Inhalation; remove victim from exposure, and give supplemental oxygen if available.
- Ingestion; (a) Prehospital: Administer activated charcoal, if available. **DO NOT** induce vomiting because of rapid absorption and the risk of abrupt onset CNS depression. (b) Hospital: Administer activated charcoal, although the efficacy of charcoal is unknown. Perform gastric lavage only if the ingestion was very large and recent (less than 30 minutes)

D: Enhanced elimination:
- There is no documented efficacy for diuresis, haemodialysis, haemoperfusion, or repeat-dose charcoal.

POISONING and DRUG OVERDOSE, Californian Poison Control System Ed. Kent R Olson; 3rd Edition
- Do not administer sympathomimetic drugs unless absolutely necessary as material may increase myocardial irritability.
- No specific antidote.
- Because rapid absorption may occur through lungs if aspirated and cause systematic effects, the decision of whether to induce vomiting or not should be made by an attending physician.
- If lavage is performed, suggest endotracheal and/or esophageal control.
- Danger from lung aspiration must be weighed against toxicity when considering emptying the stomach.
- Treatment based on judgment of the physician in response to reactions of the patient

DO NOT administer sympathomimetic drugs as they may cause ventricular arrhythmias.
For gas exposures:

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.

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.
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- 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

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SECTION 5 Firefighting measures

Extinguishing media

SMALL FIRE: Use extinguishing agent suitable for type of surrounding fire.
LARGE FIRE: Cool cylinder.
DO NOT direct water at source of leak or venting safety devices as icing may occur.

Special hazards arising from the substance 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	---------- GENERAL ---------- ‣ Alert Fire Brigade and tell them location and nature of hazard. ‣ Wear breathing apparatus and protective gloves. ‣ Fight fire from a safe distance, with adequate cover. ‣ Use water delivered as a fine spray to control fire and cool adjacent area.
Fire/Explosion Hazard	Although not flammable in air at temperatures up to 100 deg. C at atmospheric temperature, mixtures with high concentrations of air at elevated pressure and / or temperature can become combustible in the presence of an ignition source. The material can also become combustible in an oxygen enriched environment (oxygen concentrations greater than in air). Whether air-mixtures or oxygen-mixtures become combustible depends on temperature, pressure and oxygen concentration. ‣ Containers may explode when heated - Ruptured cylinders may rocket ‣ Fire exposed containers may vent contents through pressure relief devices. ‣ High concentrations of gas may cause asphyxiation without warning. ‣ May decompose explosively when heated or involved in fire. ‣ Contact with gas may cause burns, severe injury and/ or frostbite. Decomposition may produce toxic fumes of: ‣ carbon monoxide (CO) ‣ carbon dioxide (CO2) hydrogen chloride phosgene hydrogen fluoride ‣ other pyrolysis products typical of burning organic material. **Contains low boiling substance:** Closed containers may rupture due to pressure buildup under fire conditions.

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	‣ Avoid breathing vapour and any contact with liquid or gas. Protective equipment including respirator should be used. ‣ **DO NOT** enter confined spaces where gas may have accumulated. ‣ Increase ventilation.
Major Spills	‣ Clear area of all unprotected personnel and move upwind. ‣ Alert Emergency Authority and advise them of the location and nature of hazard. ‣ Wear breathing apparatus and protective gloves. ‣ Prevent by any means available, spillage from entering drains and water-courses. ‣ Remove leaking cylinders to a safe place. ‣ Fit vent pipes. Release pressure under safe, controlled conditions ‣ Burn issuing gas at vent pipes. ‣ DO NOT exert excessive pressure on valve; DO NOTattempt to operate damaged valve.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	· Consider use in closed pressurised systems, fitted with temperature, pressure and safety relief valves which are vented for safe dispersal. Use only properly specified equipment which is suitable for this product, its supply pressure and temperature · The tubing network design connecting gas cylinders to the delivery system should include appropriate pressure indicators and vacuum or suction lines.

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	· Fully-welded types of pressure gauges, where the bourdon tube sensing element is welded to the gauge body, are recommended. · Before connecting gas cylinders, ensure manifold is mechanically secure and does not containing another gas. ▸ **DO NOT** transfer gas from one cylinder to another.
Other information	Storage temperature: <45 deg.c> ▸ Cylinders should be stored in a purpose-built compound with good ventilation, preferably in the open. ▸ Such compounds should be sited and built in accordance with statutory requirements. ▸ The storage compound should be kept clear and access restricted to authorised personnel only. ▸ Cylinders stored in the open should be protected against rust and extremes of weather.

Conditions for safe storage, including any incompatibilities

Suitable container	▸ Cylinder: ▸ Ensure the use of equipment rated for cylinder pressure. ▸ Ensure the use of compatible materials of construction. ▸ Valve protection cap to be in place until cylinder is secured, connected. ▸ Cylinder must be properly secured either in use or in storage.
Storage incompatibility	▸ Avoid reaction with oxidising agents Haloalkanes: ▸ are highly reactive:some of the more lightly substituted lower members are highly flammable; the more highly substituted may be used as fire suppressants, not always with the anticipated results. ▸ may react with the lighter divalent metals to produce more reactive compounds analogous to Grignard reagents. ▸ may produce explosive compounds following prolonged contact with metallic or other azides ▸ may react on contact with potassium or its alloys - although apparently stable on contact with a wide rage of halocarbons, reaction products may be shock-sensitive and may explode with great violence on light impact; severity generally increases with the degree of halocarbon substitution and potassium-sodium alloys give extremely sensitive mixtures . BRETHERICK L.: Handbook of Reactive Chemical Hazards ▸ react with metal halides and active metals, eg. sodium (Na), potassium (K), lithium (Li),calcium (Ca), zinc (Zn), powdered aluminium (Al) and aluminium alloys, magnesium (Mg) and magnesium alloys. ▸ Avoid magnesium, aluminium and their alloys, brass and steel.

+	+	+	+	+	+	+

X — *Must not be stored together*
0 — *May be stored together with specific preventions*
+ — *May be stored together*

Note: Depending on other risk factors, compatibility assessment based on the table above may not be relevant to storage situations, particularly where large volumes of dangerous goods are stored and handled. Reference should be made to the Safety Data Sheets for each substance or article and risks assessed accordingly.

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
New Zealand Workplace Exposure Standards (WES)	chlorodifluoromethane	Chlorodifluoromethane	1000 ppm / 3540 mg/m3	Not Available	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.

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.

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Individual protection measures, such as personal protective equipment	
Eye and face protection	‣ Chemical goggles. ‣ Full face shield may be required for supplementary but never for primary protection of eyes. ‣ 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	‣ Neoprene gloves ‣ When handling sealed and suitably insulated cylinders wear cloth or leather gloves. ‣ Insulated gloves: ‣ NOTE: Insulated gloves should be loose fitting so that may be removed quickly if liquid is spilled upon them. Insulated gloves are not made to permit hands to be placed in the liquid; they provide only short-term protection from accidental contact with the liquid.
Body protection	See Other protection below
Other protection	‣ Protective overalls, closely fitted at neck and wrist. ‣ Eye-wash unit. ‣ Ensure availability of lifeline in confined spaces. ‣ Staff should be trained in all aspects of rescue work.

Respiratory protection

Type AX Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

- Positive pressure, full face, air-supplied breathing apparatus should be used for work in enclosed spaces if a leak is suspected or the primary containment is to be opened (e.g. for a cylinder change)
- Air-supplied breathing apparatus is required where release of gas from primary containment is either suspected or demonstrated.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Clear liquefied gas with slight ether-like odour; partly mixes with water.

Physical state	Liquified Gas	**Relative density (Water = 1)**	1.19 @ 25 deg.C
Odour	Not Available	**Partition coefficient n-octanol / water**	Not Available
Odour threshold	Not Available	**Auto-ignition temperature (°C)**	Not Available
pH (as supplied)	Neutral	**Decomposition temperature (°C)**	632
Melting point / freezing point (°C)	Not Available	**Viscosity (mm2/s)**	Not Available
Initial boiling point and boiling range (°C)	-40.8	**Molecular weight (g/mol)**	Not Applicable
Flash point (°C)	Not Applicable	**Taste**	Not Available
Evaporation rate	>1 CCL4 = 1	**Explosive properties**	Not Available
Flammability	Not Applicable	**Oxidising properties**	Not Available
Upper Explosive Limit (%)	Not Applicable	**Surface Tension (dyn/cm or mN/m)**	Not Available
Lower Explosive Limit (%)	Not Applicable	**Volatile Component (%vol)**	Not Available
Vapour pressure (kPa)	1044 @ 25 deg.C	**Gas group**	Not Available
Solubility in water	Partly miscible	**pH as a solution (1%)**	Not Available
Vapour density (Air = 1)	3.03 @ 20 deg.C	**VOC g/L**	Not Available
Heat of Combustion (kJ/g)	Not Available	**Ignition Distance (cm)**	Not Available
Flame Height (cm)	Not Available	**Flame Duration (s)**	Not Available
Enclosed Space Ignition Time Equivalent (s/m3)	Not Available	**Enclosed Space Ignition Deflagration Density (g/m3)**	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	‣ Unstable in the presence of incompatible materials. ‣ Product is considered stable.

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	‣ Hazardous polymerisation will not occur. ‣ Presence of elevated temperatures.
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

a) Acute Toxicity	Based on available data, the classification criteria are not met.
b) Skin Irritation/Corrosion	Based on available data, the classification criteria are not met.
c) Serious Eye Damage/Irritation	Based on available data, the classification criteria are not met.
d) Respiratory or Skin sensitisation	Based on available data, the classification criteria are not met.
e) Mutagenicity	Based on available data, the classification criteria are not met.
f) Carcinogenicity	Based on available data, the classification criteria are not met.
g) Reproductivity	Based on available data, the classification criteria are not met.
h) STOT - Single Exposure	Based on available data, the classification criteria are not met.
i) STOT - Repeated Exposure	Based on available data, the classification criteria are not met.
j) Aspiration Hazard	Based on available data, the classification criteria are not met.

Inhaled	Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual. Limited evidence or practical experience suggests that the material may produce irritation of the respiratory system, in a significant 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. Common, generalised symptoms associated with non-toxic gas inhalation include : ‣ central nervous system effects such as headache, confusion, dizziness, progressive stupor, coma and seizures; ‣ respiratory system complications may include tachypnoea and dyspnoea; ‣ cardiovascular effects may include circulatory collapse and arrhythmias; ‣ gastrointestinal effects may also be present and may include mucous membrane irritation and nausea and vomiting. Material is highly volatile and may quickly form a concentrated atmosphere in confined or unventilated areas. The vapour may displace and replace air in breathing zone, acting as a simple asphyxiant. This may happen with little warning of overexposure. Exposure to high concentrations of fluorocarbons may produce cardiac arrhythmias or cardiac arrest due sensitisation of the heart to adrenalin or noradrenalin. Deaths associated with exposures to fluorocarbons (specifically halogenated aliphatics) have occurred in occupational settings and in inhalation of bronchodilator drugs. Bronchospasm consistently occurs in human subjects inhaling fluorocarbons. At a measured concentration of 1700 ppm of one of the commercially available aerosols there is a biphasic change in ventilatory capacity, the first reduction occurring within a few minutes and the second delayed up to 30 minutes.
Ingestion	Overexposure is unlikely in this form. Not normally a hazard due to physical form of product. Considered an unlikely route of entry in commercial/industrial environments
Skin Contact	Limited 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. In common with other halogenated aliphatics, fluorocarbons may cause dermal problems due to a tendency to remove natural oils from the skin causing irritation and the development of dry, sensitive skin. They do not appear to be appreciably absorbed. Material on the skin evaporates rapidly and may cause tingling, chilling and even temporary numbness Vapourising liquid causes rapid cooling and contact may cause cold burns, frostbite, even through normal gloves. Frozen skin tissues are painless and appear waxy and yellow. Signs and symptoms of frost-bite may include "pins and needles", paleness followed by numbness, a hardening an stiffening of the skin, a progression of colour changes in the affected area, (first white, then mottled and blue and eventually black; on recovery, red, hot, painful and blistered). 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.

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Eye	Although the material is not classified as an eye irritant under Regulation (EC) No 1272/2008 (CLP), as amended, direct contact with the eye may produce transient discomfort characterised by tearing or conjunctival redness (as with windburn). Vapourising liquid causes rapid cooling and contact may cause cold burns, frostbite, even through normal gloves. Frozen skin tissues are painless and appear waxy and yellow. Signs and symptoms of frost-bite may include "pins and needles", paleness followed by numbness, a hardening an stiffening of the skin, a progression of colour changes in the affected area, (first white, then mottled and blue and eventually black; on recovery, red, hot, painful and blistered).
Chronic	Principal route of occupational exposure to the gas is by inhalation. It is generally accepted that the fluorocarbons are less toxic than the corresponding halogenated aliphatic based on chlorine. Repeated inhalation exposure to the fluorocarbon FC-11 does not produce pathologic lesions of the liver and other visceral organs in experimental animals. There has been conjecture in non-scientific publications that fluorocarbons may cause leukemia, cancer, sterility and birth defects; these have not been verified by current research. The high incidence of cancer, spontaneous abortion and congenital anomalies amongst hospital personnel, repeatedly exposed to fluorine-containing general anaesthetics, has caused some scientists to call for a lowering of the fluorocarbon exposure standard to 5 ppm since some are mutagens. Limited evidence exists, or practical experience predicts, that the material produces irritation of the respiratory system in a significant number of individuals following inhalation.

A-Gas R22	**TOXICITY**	**IRRITATION**
	Not Available	Not Available
chlorodifluoromethane	**TOXICITY**	**IRRITATION**
	Inhalation (Rat) LC50: 220000 ppm4h[2]	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*

CHLORODIFLUOROMETHANE	Chlorofluorocarbons may enter the human organism by inhalation, ingestion, or dermal contact. Inhalation is the most common and important route of entry, and exhalation is the most significant route of elimination from the body. Controlled studies with volunteer subjects and experimental animals have provided substantial data from exposures to a number of the chlorofluorocarbons. CFCs and HCFCs are known to sensitise the heart to adrenalin-induced arrhythmias. CFCs: · can be absorbed across the alveolar membrane, gastro- intestinal tract, or the skin; · are absorbed rapidly into the blood, following inhalation; · are absorbed into the blood at a decreasing rate as blood concentration increases; · once in the blood, are absorbed by various tissues; · will reach a stable blood level if exposure is sufficiently long, indicating an equilibrium between the air containing the chlorofluorocarbons and the blood; · are still absorbed by body tissue, after the initial blood level stabilization, and continue to enter the body. Studies with animals indicate that chlorofluorocarbons are rapidly absorbed after inhalation and are distributed by blood into practically all tissues of the body. The highest concentrations are usually found in fatty or lipid-containing tissues. For dichlorotrifloroethane (HCFC -123) and dichloropentafluoropropane (HCFC-225) Prolonged inhalation of high concentrations of HCFC-123 vapour may cause temporary nervous system depression with anesthetic effects such as dizziness, headache, confusion, incoordination, and loss of consciousness. With gross overexposure (greater than 20% concentration), a temporary alteration of the heart s electrical activity with irregular pulse, palpitations, or inadequate circulation may occur. Similar effects are observed in overexposure to CFC-11. Inhalation may cause liver effects with extended high-level exposures. Disinfection by products (DBPs) re formed when disinfectants such as chlorine, chloramine, and ozone react with organic and inorganic matter in water. The observations that some DBPs such as trihalomethanes (THMs), di-/trichloroacetic acids, and 3-chloro-4-(dichloromethyl)-5-hydroxy-2(5H)-furanone (MX) are carcinogenic in animal studies have raised public concern over the possible adverse health effects of DBPs. To date, several hundred DBPs have been identified. Numerous haloalkanes and haloalkenes have been tested for carcinogenic and mutagenic activities. n general, the genotoxic potential is dependent on the nature, number, and position of halogen(s) and the molecular size of the compound. The substance is classified by IARC as Group 3: **NOT** classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing.

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*

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SECTION 12 Ecological information

Toxicity

A-Gas R22	**Endpoint**	**Test Duration (hr)**	**Species**	**Value**	**Source**
	Not Available	Not Available	Not Available	Not Available	Not Available

chlorodifluoromethane	**Endpoint**	**Test Duration (hr)**	**Species**	**Value**	**Source**
	EC50	48h	Crustacea	433mg/l	2
	EC50(ECx)	96h	Algae or other aquatic plants	250mg/l	2
	EC50	96h	Algae or other aquatic plants	250mg/l	2

Legend:	*Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. US EPA, Ecotox database - Aquatic Toxicity Data 4. ECETOC Aquatic Hazard Assessment Data 5. NITE (Japan) - Bioconcentration Data 6. METI (Japan) - Bioconcentration Data 7. Vendor Data 8. User defined data*

On the basis of the available evidence concerning properties and predicted or observed environmental fate and behavior, the material may present a danger to the structure and/ or functioning of the stratospheric ozone layer.
DO NOT discharge into sewer or waterways.

Persistence and degradability

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

Bioaccumulative potential

Ingredient	Bioaccumulation
chlorodifluoromethane	LOW (LogKOW = 1.08)

Mobility in soil

Ingredient	Mobility
chlorodifluoromethane	LOW (Log KOC = 23.74)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	▸ Evaporate residue at an approved site. ▸ Return empty containers to supplier. If containers are marked non-returnable establish means of disposal with manufacturer prior to purchase. ▸ Ensure damaged or non-returnable cylinders are gas-free before disposal.

Ensure that the hazardous substance is disposed in accordance with the Hazardous Substances (Disposal) Notice 2017

Disposal Requirements

Not applicable as substance/ material is non hazardous.

SECTION 14 Transport information

Labels Required

Marine Pollutant	NO
HAZCHEM	2TE

Land transport (UN)

14.1. **UN number or ID number**	1018

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14.2. **UN proper shipping name**	REFRIGERANT GAS R 22; CHLORODIFLUOROMETHANE
14.3. **Transport hazard class(es)**	Class: 2.2 Subsidiary Hazard: Not Applicable
14.4. **Packing group**	Not Applicable
14.5. **Environmental hazard**	Not Applicable
14.6. **Special precautions for user**	Special provisions: Not Applicable Limited quantity: 120 ml

Air transport (ICAO-IATA / DGR)

14.1. **UN number**	1018
14.2. **UN proper shipping name**	Refrigerant gas R 22; Chlorodifluoromethane
14.3. **Transport hazard class(es)**	ICAO/IATA Class: 2.2 ICAO / IATA Subsidiary Hazard: Not Applicable ERG Code: 2L
14.4. **Packing group**	Not Applicable
14.5. **Environmental hazard**	Not Applicable
14.6. **Special precautions for user**	Special provisions: Not Applicable Cargo Only Packing Instructions: 200 Cargo Only Maximum Qty / Pack: 150 kg Passenger and Cargo Packing Instructions: 200 Passenger and Cargo Maximum Qty / Pack: 75 kg Passenger and Cargo Limited Quantity Packing Instructions: Forbidden Passenger and Cargo Limited Maximum Qty / Pack: Forbidden

Sea transport (IMDG-Code / GGVSee)

14.1. **UN number**	1018
14.2. **UN proper shipping name**	CHLORODIFLUOROMETHANE; REFRIGERANT GAS R 22
14.3. **Transport hazard class(es)**	IMDG Class: 2.2 IMDG Subsidiary Hazard: Not Applicable
14.4. **Packing group**	Not Applicable
14.5 **Environmental hazard**	Not Applicable
14.6. **Special precautions for user**	EMS Number: F-C, S-V Special provisions: Not Applicable Limited Quantities: 120 mL

14.7. Maritime transport in bulk according to IMO instruments

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

Not Applicable

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

Product name	Group
chlorodifluoromethane	Not Applicable

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
chlorodifluoromethane	Not Applicable

Continued...

SECTION 15 Regulatory information

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

This substance is to be managed using the conditions specified in an applicable Group Standard

HSR Number	Group Standard
Not Applicable	Not Applicable

Please refer to Section 8 of the SDS for any applicable tolerable exposure limit or Section 12 for environmental exposure limit.

chlorodifluoromethane is found on the following regulatory lists

EAEU Ozone-Depleting Substances Subject to Permit/Licensing for Import/Export - List C (Russian)
International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Not Classified as Carcinogenic
New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals
New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals - Classification Data
New Zealand Inventory of Chemicals (NZIoC)
New Zealand Workplace Exposure Standards (WES)

Additional Regulatory Information

Not Applicable

Hazardous Substance Location

Subject to the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Quantities
Not Applicable	Not Applicable

Certified Handler

Subject to Part 4 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Class of substance	Quantities
Not Applicable	Not Applicable

Refer Group Standards for further information

Maximum quantities of certain hazardous substances permitted on passenger service vehicles

Subject to Regulation 13.14 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Gas (aggregate water capacity in mL)	Liquid (L)	Solid (kg)	Maximum quantity per package for each classification
Not Applicable	Not Applicable	Not Applicable	Not Applicable	Not Applicable

Tracking Requirements

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (chlorodifluoromethane)
China - IECSC	Yes
Colombia - Colombia National Industrial Chemicals Inventory	No (chlorodifluoromethane)
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	All chemical substances in this product have been designated as TSCA Inventory 'Active'
Taiwan - TCSI	Yes
Mexico - INSQ	Yes

Continued...

National Inventory	Status
Vietnam - NCI	Yes
Russia - FBEPH	Yes
UAE - Control List (Banned/Restricted Substances)	Yes
Legend:	*Yes = All CAS declared ingredients are on the inventory* *No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.*

SECTION 16 Other information

Revision Date	06/03/2024
Initial Date	11/06/2008

SDS Version Summary

Version	Date of Update	Sections Updated
9.1	23/12/2022	Classification review due to GHS Revision change.
10.1	06/03/2024	Identification of the substance / mixture and of the company / undertaking - Supplier 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 Chemwatch Classification committee using available literature references.

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

Definitions and abbreviations

- PC—TWA: Permissible Concentration-Time Weighted Average
- PC—STEL: Permissible Concentration-Short Term Exposure Limit
- IARC: International Agency for Research on Cancer
- ACGIH: American Conference of Governmental Industrial Hygienists
- STEL: Short Term Exposure Limit
- TEEL: Temporary Emergency Exposure Limit。
- IDLH: Immediately Dangerous to Life or Health Concentrations
- ES: Exposure Standard
- OSF: Odour Safety Factor
- NOAEL: No Observed Adverse Effect Level
- LOAEL: Lowest Observed Adverse Effect Level
- TLV: Threshold Limit Value
- LOD: Limit Of Detection
- OTV: Odour Threshold Value
- BCF: BioConcentration Factors
- BEI: Biological Exposure Index
- DNEL: Derived No-Effect Level
- PNEC: Predicted no-effect concentration
- MARPOL: International Convention for the Prevention of Pollution from Ships
- IMSBC: International Maritime Solid Bulk Cargoes Code
- IGC: International Gas Carrier Code
- IBC: International Bulk Chemical Code

- AIIC: Australian Inventory of Industrial Chemicals
- DSL: Domestic Substances List
- NDSL: Non-Domestic Substances List
- IECSC: Inventory of Existing Chemical Substance in China
- EINECS: European INventory of Existing Commercial chemical Substances
- ELINCS: European List of Notified Chemical Substances
- NLP: No-Longer Polymers
- ENCS: Existing and New Chemical Substances Inventory
- KECI: Korea Existing Chemicals Inventory
- NZIoC: New Zealand Inventory of Chemicals
- PICCS: Philippine Inventory of Chemicals and Chemical Substances
- TSCA: Toxic Substances Control Act
- TCSI: Taiwan Chemical Substance Inventory
- INSQ: Inventario Nacional de Sustancias Químicas
- NCI: National Chemical Inventory
- FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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