

POTASSIUM HEXAFLUOROSILICATE 98%

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Section 1: Identification of the substance/mixture and of the company/undertaking

1.1. Product identifier

Product name: POTASSIUM HEXAFLUOROSILICATE 98%

CAS number: 16871-90-2

Product code: PC6294

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

1.3. Details of the supplier of the safety data sheet

Company name: Apollo Scientific Ltd

	Units 3 & 4
	Parkway
	Denton
	Manchester
	M34 3SG
	UK
Tel:	0161 337 9971
Fax:	0161 336 6932
Email:	david.tideswell@apolloscientific.co.uk

1.4. Emergency telephone number

Emergency tel: -

Section 2: Hazards identification

2.1. Classification of the substance or mixture

Classification under CLP: Acute Tox. 3: H301+H311+H331

Most important adverse effects: Toxic if swallowed, in contact with skin or if inhaled

2.2. Label elements

Label elements:

Hazard statements: H301+H311+H331: Toxic if swallowed, in contact with skin or if inhaled

Hazard pictograms: GHS06: Skull and crossbones



Signal words: Danger

Precautionary statements: P280: Wear protective gloves/protective clothing/eye protection/face protection. P301+P310: IF SWALLOWED: Immediately call a POISON CENTER. P302+P352: IF ON SKIN: Wash with plenty of water.

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2.3. Other hazards

PBT: This product is not identified as a PBT/vPvB substance.

Section 3: Composition/information on ingredients

3.1. Substances

Chemical identity: POTASSIUM FLUOROSILICATE

CAS number: 16871-90-2

Section 4: First aid measures

4.1. Description of first aid measures

Skin contact: Remove all contaminated clothes and footwear immediately unless stuck to skin	
	Drench the affected skin with running water for 10 minutes or longer if substance is still
	on skin. Transfer to hospital if there are burns or symptoms of poisoning.

- Eye contact: Bathe the eye with running water for 15 minutes. Transfer to hospital for specialist examination.
 - Ingestion: Wash out mouth with water. Do not induce vomiting. If conscious, give half a litre of water to drink immediately. If unconscious, check for breathing and apply artificial respiration if necessary. If unconscious and breathing is OK, place in the recovery position. Transfer to hospital as soon as possible.
 - Inhalation: Remove casualty from exposure ensuring one's own safety whilst doing so. If conscious, ensure the casualty sits or lies down. If unconscious and breathing is OK, place in the recovery position. If unconscious, check for breathing and apply artificial respiration if necessary. If breathing becomes bubbly, have the casualty sit and provide oxygen if available. Transfer to hospital as soon as possible.

4.2. Most important symptoms and effects, both acute and delayed

Skin contact:	t: There may be redness or whiteness of the skin in the area of exposure. Irritation or pain	
	may occur at the site of contact. Absorption through the skin may be fatal.	
Eye contact:	There may be severe pain. The eyes may water profusely.	
Ingestion: There may be soreness and redness of the mouth and throat. There may be vomiting		
	Convulsions may occur. There may be loss of consciousness.	
Inhalation:	There may be shortness of breath with a burning sensation in the throat. Absorption	
	through the lungs can occur causing symptoms similar to those of ingestion.	
	Convulsions may occur. There may be loss of consciousness.	
n of any immediate medical attention and special treatment needed		
pecial treatment:	Hydrofluoric (HF) acid burns require immediate and specialized first aid and medical	

4.3. Indication

Immediate / special treatment: Hydrofluoric (HF) acid burns require immediate and specialized first aid and medical treatment. Symptoms may be delayed up to 24 hours depending on the concentration of HF. After decontamination with water,

> further damage can occur due to penetration/ absorption of the fluoride ion. Treatment should be directed toward binding the fluoride ion as well as the effects of exposure.

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Skin exposures can be treated with a 2.5% calcium gluconate gel repeated until burning
ceases. More serious skin exposures may require subcutaneous calcium gluconate
except for digital areas unless the physician is experienced in this technique, due to the
potential for tissue injury from increased pressure. Absorption can readily occur
through the subungual areas and should be considered when undergoing
decontamination. Prevention of
absorption of the fluoride ion in cases of ingestion can be obtained by giving milk,
chewable calcium carbonate tablets or Milk of Magnesia to conscious victims.
Conditions such as hypoc hypomagnesemia and cardiac arrhythmias should be
monitored for, since they can occur after exposure.Consult a physician. Show this safety
data sheet to the doctor in attendance.

Section 5: Fire-fighting measures

5.1. Extinguishing media

Extinguishing media: Carbon dioxide, dry chemical powder, foam. Suitable extinguishing media for the surrounding fire should be used. Use water spray to cool containers.

5.2. Special hazards arising from the substance or mixture

Exposure hazards: Toxic. Sulphur oxides (SOx). Hydrogen fluoride (HF). Potassium oxides.

5.3. Advice for fire-fighters

Advice for fire-fighters: Wear self-contained breathing apparatus. Wear protective clothing to prevent contact with skin and eyes.

Section 6: Accidental release measures

6.1. Personal precautions, protective equipment and emergency procedures

Personal precautions: Notify the police and fire brigade immediately. If outside do not approach from downwind. If outside keep bystanders upwind and away from danger point. Mark out the contaminated area with signs and prevent access to unauthorised personnel. Do not attempt to take action without suitable protective clothing - see section 8 of SDS. Do not create dust.

6.2. Environmental precautions

Environmental precautions: Do not discharge into drains or rivers.

6.3. Methods and material for containment and cleaning up

Clean-up procedures: Clean-up should be dealt with only by qualified personnel familiar with the specific substance. Transfer to a closable, labelled salvage container for disposal by an appropriate method.

6.4. Reference to other sections

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Section 7: Handling and storage

7.1. Precautions for safe handling

Handling requirements: Avoid direct contact with the substance. Ensure there is exhaust ventilation of the area.

Avoid the formation or spread of dust in the air. Only use in fume hood.

7.2. Conditions for safe storage, including any incompatibilities

Storage conditions: Store in a cool, well ventilated area. Keep container tightly closed. Moisture sensitive.

Store under Argon.

Suitable packaging: Must only be kept in original packaging.

7.3. Specific end use(s)

Specific end use(s): No data available.

Section 8: Exposure controls/personal protection

8.1. Control parameters

Workplace exposure limits: No data available.

DNEL/PNEC Values

DNEL / PNEC No data available.

8.2. Exposure controls

Engineering measures:Ensure there is exhaust ventilation of the area.Respiratory protection:Self-contained breathing apparatus must be available in case of emergency. Particle
filter class P1 (EN143).Hand protection:Protective gloves.Eye protection:Safety glasses with side-shields. Ensure eye bath is to hand.Skin protection:Protective clothing.

Section 9: Physical and chemical properties

9.1. Information on basic physical and chemical properties

State:	Solid		
Evaporation rate:	No data available.		
Oxidising:	No data available.		
Solubility in water:	No data available.		
Viscosity:	No data available.		
Boiling point/range ℃:	No data available.	Melting point/range °C:	No data available.
Flammability limits %: lower:	No data available.	upper:	No data available.
Flash point ℃:	No data available.	Part.coeff. n-octanol/water:	No data available.
Autoflammability℃:	No data available.	Vapour pressure:	No data available.
Relative density:	No data available.	pH:	No data available.
VOC g/l:	No data available.		

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9.2. Other information

Other information: No data available.

Section 10: Stability and reactivity

10.1. Reactivity

Reactivity: Stable under recommended transport or storage conditions.

10.2. Chemical stability

Chemical stability: Stable under normal conditions.

10.3. Possibility of hazardous reactions

Hazardous reactions: Hazardous reactions will not occur under normal transport or storage conditions.

10.4. Conditions to avoid

Conditions to avoid: Heat.

10.5. Incompatible materials

Materials to avoid: Strong oxidising agents. Strong acids.

10.6. Hazardous decomposition products

Haz. decomp. products: For full list of hazardous decomposition products, refer to section 5 of this safety data

sheet.

Section 11: Toxicological information

11.1. Information on toxicological effects

Hazardous ingredients:

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ORL	MUS	LD50	70	mg/kg
ORL	RAT	LD50	156	mg/kg
SCU	FRG	LDLO	448	mg/kg

Relevant hazards for product:

Hazard	Route	Basis
Acute toxicity (ac. tox. 3)	INH DRM ING	Hazardous: calculated

Symptoms / routes of exposure

Skin contact: There may be redness or whiteness of the skin in the area of exposure. Irritation or pain may occur at the site of contact. Absorption through the skin may be fatal.
Eye contact: There may be severe pain. The eyes may water profusely.
Ingestion: There may be soreness and redness of the mouth and throat. There may be vomiting. Convulsions may occur. There may be loss of consciousness.

Inhalation: There may be shortness of breath with a burning sensation in the throat. Absorption

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through the lungs can occur causing symptoms similar to those of ingestion.

Convulsions may occur. There may be loss of consciousness.

Section 12: Ecological information

12.1. Toxicity

Ecotoxicity values: No data available.

12.2. Persistence and degradability

Persistence and degradability: No data available.

12.3. Bioaccumulative potential

Bioaccumulative potential: No data available.

12.4. Mobility in soil

Mobility: No data available.

12.5. Results of PBT and vPvB assessment

PBT identification: This product is not identified as a PBT/vPvB substance.

12.6. Other adverse effects

Other adverse effects: No data available.

Section 13: Disposal considerations

13.1. Waste treatment methods

Disposal operations: Transfer to a suitable container and arrange for collection by specialised disposal	
	company. MATERIAL SHOULD BE DISPOSED OF IN ACCORDANCE WITH LOCAL,
	STATE AND FEDERAL REGULATIONS
Disposal of packaging:	Dispose of as special waste in compliance with local and national regulations Observe
	all federal, state and local environmental regulations.
NB:	The user's attention is drawn to the possible existence of regional or national

regulations regarding disposal.

Section 14: Transport information

14.1. UN number

UN number: UN2655

14.2. UN proper shipping name

Shipping name: POTASSIUM FLUOROSILICATE

14.3. Transport hazard class(es)

Transport class: 6.1

14.4. Packing group

Packing group: III

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14.5. Environmental hazards

Environmentally hazardous: No

Marine pollutant: No

14.6. Special precautions for user

Tunnel code: E

Transport category: 2

Section 15: Regulatory information

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

Specific regulations: Not applicable.

15.2. Chemical Safety Assessment

Chemical safety assessment: A chemical safety assessment has not been carried out for the substance or the mixture by the supplier.

Section 16: Other information

Other information

Other information:	This safety data sheet is prepared in accordance with Commission Regulation (EU) No 2015/830.
	* Data predicted using computational software. The OECD QSAR-Toolbox for grouping
	chemicals into categories. Developed by LMC bulgaria.
	http://echa.europa.eu/support/oecd-qsar-toolbox
	~ Data predicted using computational software ACD/ToxSuite v 2.95.1 Copyright 1994-
	2009 ACD/labs, Copyright 2001-2009 Pharma Algorithms, Inc, Advanced Chemistry
	Development, Inc (ACD/Labs). http://www.acdlabs.com/products/pc_admet/tox/tox/
Phrases used in s.2 and s.3:	H301+H311+H331: Toxic if swallowed, in contact with skin or if inhaled
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	by those who have been fully trained in safety, laboratory and chemical handling
	procedures. The above information is believed to be correct to the best of our
	knowledge. The above information is believed to be correct to the best of our knowledge
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