

# Swancorp Group Pty Ltd

Chemwatch: 21890

Chemwatch Hazard Alert Code: 3

Version No: 8.1 Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements Issue Date: 20/06/2022 Print Date: 14/08/2023 L.GHS.AUS.EN.E

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

Product Identifier		
Product name	SODIUM MOLYBDATE	
Chemical Name	sodium molybdate	
Synonyms	Mo-O4.2Na; Na2MoO4; molybdic acid, disodium salt; disodium molybdate sodium molybdate (VI); sodium molybdate, anhydrous; sodium molybdate dihydrate; molybdate (MoO4)2-, disodium; EEC Number:2315517; Catalog Number: 1041; J.T. Baker 3764; Mallinckrodt 7782	
Chemical formula	MoO4·2Na·2H2O MoO4.2Na	
Other means of identification	Not Available	
CAS number	7631-95-0	

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

As a reagent in analytical chemistry, reagent for alkaloid testing. In metal finishing, brightening agent for zinc plating. Corrosion inhibitor. Additive Relevant identified uses as trace element for fertilizers and in animal feed supplements. Used in production of molybdate inorganic and organic toners, pigments.

## Details of the manufacturer or supplier of the safety data sheet

Registered company name	Swancorp Group Pty Ltd	
Address	123 Boundary Road Rocklea QLD 4106 Australia	
Telephone	+61 7 3276 7422	
Fax	+61 7 3276 8622	
Website	Not Available	
Email	Not Available	

## Emergency telephone number

Association / Organisation	CHEMWATCH EMERGENCY RESPONSE	CHEMWATCH EMERGENCY RESPONSE (24/7)
Emergency telephone numbers	+61 1800 951 288	+61 1800 951 288
Other emergency telephone numbers	+61 2 9186 1132	+61 3 9573 3188

## Once connected and if the message is not in your preferred language then please dial 01

## **SECTION 2 Hazards identification**

## Classification of the substance or mixture

Poisons Schedule	Not Applicable		
Classification <sup>[1]</sup>	Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 1, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Repeated Exposure Category 2		
Legend:	1. Classified by Chernwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI		

### Label elements

Hazard pictogram(s)
---------------------

Signal word Danger

## Hazard statement(s)

H302	Harmful if swallowed.	
H315	Causes skin irritation.	
H318	Causes serious eye damage.	
H335	May cause respiratory irritation.	
H373	May cause damage to organs through prolonged or repeated exposure.	

## Precautionary statement(s) Prevention

P260	Do not breathe dust/fume.	
P271	P271 Use only outdoors or in a well-ventilated area.	
P280	Wear protective gloves, protective clothing, eye protection and face protection.	
P264	P264 Wash all exposed external body areas thoroughly after handling.	
P270	Do not eat, drink or smoke when using this product.	

## Precautionary statement(s) Response

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/doctor/physician/first aider.
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider if you feel unwell.
P302+P352	IF ON SKIN: Wash with plenty of water.
P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P330	Rinse mouth.
P332+P313	If skin irritation occurs: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.

## 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 to authorised hazardous or special waste collection point in accordance with any local regulation.

## **SECTION 3 Composition / information on ingredients**

## Substances

CAS No		%[weight]	Name
7631-95-0		>=98	sodium molybdate
Legend:	end: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from Co * EU IOELVs available		

### Mixtures

See section above for composition of Substances

### **SECTION 4 First aid measures**

Description	of	first	aid	measures
-------------	----	-------	-----	----------

Description of first aid measur	
Eye Contact	<ul> <li>If this product comes in contact with the eyes:</li> <li>Immediately hold eyelids apart and flush the eye continuously with running water.</li> <li>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.</li> <li>Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.</li> <li>Transport to hospital or doctor without delay.</li> <li>Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
Skin Contact	<ul> <li>If skin contact occurs:</li> <li>Immediately remove all contaminated clothing, including footwear.</li> <li>Flush skin and hair with running water (and soap if available).</li> <li>Seek medical attention in event of irritation.</li> </ul>
Inhalation	<ul> <li>If fumes or combustion products are inhaled remove from contaminated area.</li> <li>Lay patient down. Keep warm and rested.</li> <li>Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>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.</li> <li>Transport to hospital, or doctor, without delay.</li> </ul>
Ingestion	<ul> <li>IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.</li> <li>For advice, contact a Poisons Information Centre or a doctor.</li> <li>Urgent hospital treatment is likely to be needed.</li> <li>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.</li> <li>If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist.</li> <li>If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS.</li> </ul> Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise: <ul> <li>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.</li></ul>

### Indication of any immediate medical attention and special treatment needed

As in all cases of suspected poisoning, follow the ABCDEs of emergency medicine (airway, breathing, circulation, disability, exposure), then the ABCDEs of toxicology (antidotes, basics, change absorption, change distribution, change elimination).

For poisons (where specific treatment regime is absent):

### BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
   Administer overgen by non-representer mask at 10 to 15 L/min
- 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 pumonary beden
   Monitor and treat, where necessary, for shock.
- Anticipate seizures.
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.

#### ADVANCED TREATMENT

- Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- + 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 Treat symptomatically.

### **SECTION 5 Firefighting measures**

#### Extinguishing media

- There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

### Special hazards arising from the substrate or mixture

Fire Incompatibility None known.

### Advice for firefighters

Fire Fighting	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear breathing apparatus plus protective gloves in the event of a fire.</li> <li>Prevent, by any means available, spillage from entering drains or water courses.</li> <li>Use fire fighting procedures suitable for surrounding area.</li> <li>DO NOT approach containers suspected to be hot.</li> <li>Cool fire exposed containers with water spray from a protected location.</li> <li>If safe to do so, remove containers from path of fire.</li> <li>Equipment should be thoroughly decontaminated after use.</li> </ul>
Fire/Explosion Hazard	<ul> <li>Non combustible.</li> <li>Not considered a significant fire risk, however containers may burn.</li> <li>May emit poisonous fumes.</li> <li>May emit corrosive fumes.</li> </ul>
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	<ul> <li>Remove all ignition sources.</li> <li>Clean up all spills immediately.</li> <li>Avoid contact with skin and eyes.</li> <li>Control personal contact with the substance, by using protective equipment.</li> <li>Use dry clean up procedures and avoid generating dust.</li> <li>Place in a suitable, labelled container for waste disposal.</li> </ul>
Major Spills	<ul> <li>Moderate hazard.</li> <li>CAUTION: Advise personnel in area.</li> <li>Alert Emergency Services and tell them location and nature of hazard.</li> <li>Control personal contact by wearing protective clothing.</li> <li>Prevent, by any means available, spillage from entering drains or water courses.</li> <li>Recover product wherever possible.</li> <li>IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal.</li> <li>ALWAYS: Wash area down with large amounts of water and prevent runoff into drains.</li> <li>If contamination of drains or waterways occurs, advise Emergency Services.</li> </ul>

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

## **SECTION 7 Handling and storage**

Precautions for safe handling	
Safe handling	<ul> <li>Avoid all personal contact, including inhalation.</li> <li>Wear protective clothing when risk of exposure occurs.</li> <li>Use in a well-ventilated area.</li> <li>Prevent concentration in hollows and sumps.</li> <li>DO NOT enter confined spaces until atmosphere has been checked.</li> <li>DO NOT allow material to contact humans, exposed food or food utensils.</li> <li>Avoid contact with incompatible materials.</li> <li>When handling, DO NOT eat, drink or smoke.</li> <li>Keep containers securely sealed when not in use.</li> <li>Avoid physical damage to containers.</li> <li>Always wash hands with soap and water after handling.</li> <li>Work clothes should be laundered separately. Launder contaminated clothing before re-use.</li> <li>Use good occupational work practice.</li> <li>Observe manufacturer's storage and handling recommendations contained within this SDS.</li> <li>Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.</li> </ul>
Other information	<ul> <li>Store in original containers.</li> <li>Keep containers securely sealed.</li> <li>Store in a cool, dry area protected from environmental extremes.</li> <li>Store away from incompatible materials and foodstuff containers.</li> <li>Protect containers against physical damage and check regularly for leaks.</li> <li>Observe manufacturer's storage and handling recommendations contained within this SDS.</li> <li>For major quantities:</li> <li>Consider storage in bunded areas - ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams).</li> <li>Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require consultation with local authorities.</li> </ul>

#### Conditions for safe storage, including any incompatibilities

Suitable container	<ul> <li>Polyethylene or polypropylene container.</li> <li>Check all containers are clearly labelled and free from leaks.</li> </ul>
Storage incompatibility	<ul> <li>Explodes on contact with molten magnesium. Violent reaction with interhalogens. Incandescent reaction with hot sodium, potassium or lithium.</li> <li>WARNING: Avoid or control reaction with peroxides. All <i>transition metal</i> peroxides should be considered as potentially explosive. For example transition metal complexes of alkyl hydroperoxides may decompose explosively.</li> <li>The pi-complexes formed between chromium(0), vanadium(0) and other transition metals (haloarene-metal complexes) and mono-or poly-fluorobenzene show extreme sensitivity to heat and are explosive.</li> <li>Avoid reaction with borohydrides or cyanoborohydrides</li> </ul>

## **SECTION 8 Exposure controls / personal protection**

### **Control parameters**

#### Occupational Exposure Limits (OEL)

#### INGREDIENT DATA

Source	Ingredient	Material name		TWA	STEL		Peak	Notes
Australia Exposure Standards	sodium molybdate	Molybdenum, soluble	compounds (as Mo)	5 mg/m3	Not Avail	lable	Not Available	Not Available
Emergency Limits								
Ingredient	TEEL-1		TEEL-2		TE	EEL-3		
sodium molybdate	3.8 mg/m3		34 mg/m3		21	10 mg/m3	3	
sodium molybdate	3.2 mg/m3		17 mg/m3		10	00 mg/m3	3	
Ingredient	Original IDLH			Revised IDL	u			

Ingredient	Original IDLH	Revised IDLH
sodium molybdate	1,000 mg/m3	Not Available

### MATERIAL DATA

It is the goal of the ACGIH (and other Agencies) to recommend TLVs (or their equivalent) for all substances for which there is evidence of health effects at airborne concentrations encountered in the workplace.

At this time no TLV has been established, even though this material may produce adverse health effects (as evidenced in animal experiments or clinical experience). Airborne concentrations must be maintained as low as is practically possible and occupational exposure must be kept to a minimum.

NOTE: The ACGIH occupational exposure standard for Particles Not Otherwise Specified (P.N.O.S) does NOT apply.

Sensory irritations 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.

An increased incidence of non-specific symptoms including headache, weakness, fatigue, anorexia and joint and muscle weakness has been reported to occur in mining and metallurgy workers exposed to 60-600 mg (as Mo). Some investigators have attributed gout and elevated uric acid concentration found in some Armenians to result from exposures to Armenian soils rich in molybdenum, whilst exposure has been implicated as a cause of bone disease amongst Indians. "These involvements are speculative". [US National Research Council]. As far as it is known, the recommended TLV-TWA incorporates a large margin of safety against potential pulmonary or systemic effects.

xposure controls				
Appropriate engineering controls	Engineering controls are used to remove a hazard or place a be highly effective in protecting workers and will typically be i The basic types of engineering controls are: Process controls which involve changing the way a job activit Enclosure and/or isolation of emission source which keeps a "adds" and "removes" air in the work environment. Ventilation ventilation system must match the particular process and che Employers may need to use multiple types of controls to prev. • Local exhaust ventilation is required where solids are har proportion will be powdered by mutual friction. • If in spite of local exhaust an adverse concentration of the Such protection might consist of: (a): particle dust respirators, if necessary, combined with an a (b): filter respirators with absorption cartridge or canister of the (c): fresh-air hoods or masks. Air contaminants generated in the workplace possess varying circulating air required to effectively remove the contaminant. Type of Contaminant: direct spray, spray painting in shallow booths, drum filling, or generation into zone of rapid air motion) grinding, abrasive blasting, tumbling, high speed wheel ger of very high rapid air motion). Within each range the appropriate value depends on:	ndependent of worker interactions to provide this high levels of process is done to reduce the risk. selected hazard "physically" away from the worker and we are contaminant if designed pro- emical or contaminant in use. vent employee overexposure. Indled as powders or crystals; even when particulates are e substance in air could occur, respiratory protection sho absorption cartridge; he right type; g "escape" velocities which, in turn, determine the "captu conveyer loading, crusher dusts, gas discharge (active	vel of protection. rentilation that strategically perly. The design of a relatively large, a certain uld be considered.	
	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		
Individual protection measures, such as personal protective equipment	accordingly, after reference to distance from the contaminatin 4-10 m/s (800-2000 f/min) for extraction of crusher dusts gen producing performance deficits within the extraction apparatu more when extraction systems are installed or used.	erated 2 metres distant from the extraction point. Other r	nechanical considerations,	
Eye and face protection	<ul> <li>Safety glasses with side shields.</li> <li>Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent]</li> <li>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].</li> </ul>			
Skin protection	See Hand protection below			
	The selection of suitable gloves does not only depend on the manufacturer. Where the chemical is a preparation of several and has therefore to be checked prior to the application. The exact break through time for substances has to be obtain making a final choice. Personal hygiene is a key element of effective hand care. Glk washed and dried thoroughly. Application of a non-perfumed Suitability and durability of glove type is dependent on usage • frequency and duration of contact, • chemical resistance of glove material, • glove thickness and • dexterity	I substances, the resistance of the glove material can no ned from the manufacturer of the protective gloves and h oves must only be worn on clean hands. After using glove moisturiser is recommended.	t be calculated in advance as to be observed when	

	<ul> <li>Poor when glove material degrades</li> <li>For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.</li> <li>It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.</li> <li>Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task.</li> <li>Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:</li> <li>Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of.</li> <li>Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential</li> <li>Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.</li> <li>Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.</li> <li>polychloroprene.</li> <li>hitrife rubber.</li> <li>butyl rubber.</li> <li>butyl rubber.</li> <li>butyl rubber.</li> <li>butyl rubber.</li> <li>polyvinyl chloride.</li> <li>Gloves should be examined for wear and/ or degradation constantly.</li> </ul>
Body protection	See Other protection below
Other protection	<ul> <li>Overalls.</li> <li>P.V.C apron.</li> <li>Barrier cream.</li> <li>Skin cleansing cream.</li> <li>Eye wash unit.</li> </ul>

#### Respiratory protection

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

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	P1 Air-line*	-	PAPR-P1 -
up to 50 x ES	Air-line**	P2	PAPR-P2
up to 100 x ES	-	P3	-
		Air-line*	-
100+ x ES	-	Air-line**	PAPR-P3

\* - Negative pressure demand \*\* - Continuous flow

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

· Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.

. The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).

· Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.

· Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program. • Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)

· Use approved positive flow mask if significant quantities of dust becomes airborne

· Try to avoid creating dust conditions.

## **SECTION 9** Physical and chemical properties

#### Information on basic physical and chemical properties

Small white odourless scales or flakes; very soluble in water. Available as dihydrate CAS 10102-40-6, and anhydrous CAS 7631-95-0. Readily Appearance soluble, solubility = 56% @ 20C and 84% @ 100C.

Physical state	Divided Solid	Relative density (Water = 1)	3.28
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Applicable
pH (as supplied)	Not Applicable	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	687	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Applicable	Molecular weight (g/mol)	205.92 anhydrous
Flash point (°C)	Non Combustible	Taste	Not Available
Evaporation rate	Non Vol. @ 38C	Explosive properties	Not Available
Flammability	Non Combustible	Oxidising properties	Not Available

Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	Nil
Vapour pressure (kPa)	Negligible	Gas group	Not Available
Solubility in water	Soluble	pH as a solution (1%)	9-10 (5% soln.)
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

# SECTION 10 Stability and reactivity

See section 7
<ul> <li>Unstable in the presence of incompatible materials.</li> <li>Product is considered stable.</li> <li>Hazardous polymerisation will not occur.</li> </ul>
See section 7
See section 7
See section 7
See section 5

# **SECTION 11 Toxicological information**

## Information on toxicological effects

information on toxicological er	
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. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled. If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures. Bronchial and alveolar exudate are apparent in animals exposed to molybdenum by inhalation. Molybdenum fume may produce bronchial irritation and moderate fatty changes in liver and kidney.
Ingestion	Ingestion may cause abdominal cramps, with hypertension (high blood pressure). 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. Ingestion of large doses may result in severe distress, cramping, vomiting and hypertension. Molybdenum is rapidly excreted from the body as the molybdate and does not accumulate in mammals. The biological half-life is of the order of hours in experimental animals and weeks in humans. Molybdenum is of biological importance as an essential trace element in the Mo-flavoprotein enzyme, xanthine oxidase. It is also necessary for nitrogen-fixation by soil bacteria; livestock poisoning has been recorded in animals feeding on herbage containing high levels of molybdenum. Signs of molybdenum poisoning include loss of appetite, listlessness, diarrhoea and reduced growth rate. Anaemia is characteristic of molybdenum toxicity with low haemoglobin concentration and reduced red blood cell count. Livers and kidneys of severely poisoned animals show fatty degeneration. Other symptoms include achromotrichia (loss of hair pigment), testicular degeneration, poor conception and deficient lactation, dyspneea, incoordination and irritation of the muccuus membranes. Molybdenum depresses liver sulfide oxidase activity and the resulting sulfide accumulation leads to the formation of highly insoluble cupric sulfide and the subsequent appearance of copper deficiency. Symptoms of molybdenosis described above are similar to those of hypocuprosis.
Skin Contact	Chafing contact with wet skin may cause rash, which is difficult to heal. 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.
Eve	When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.
Chronic	Repeated or long-term occupational exposure is likely to produce cumulative health effects involving organs or biochemical systems. Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Long term exposure to high dust concentrations may cause changes in lung function (i.e. pneumoconiosis) caused by particles less than 0.5 micron penetrating and remaining in the lung. A prime symptom is breathlessness. Lung shadows show on X-ray. Persons, exposed for long periods to molybdenum oxides, suffer from anaemia. Animals exposed to certain insoluble molybdenum compounds show anorexia, diarrhoea, weight loss, listlessness, and liver and kidney damage. Molybdenum disturbs bone metabolism, giving rise to lameness, bone joint abnormalities, osteoporosis and high serum phosphatase levels. Cattle, rabbits, and chicks on high dietary levels of molybdenum exhibited deformities of joints of the extremities. Low molybdenum intake has been attributed to the high incidence of oesophageal cancer in South Africa among the Bantu of Transkei, in China and in Russia. Chronic exposure of workers in Russian molybdenum-copper plant resulted in a fall in the albumin/globulin ratio owing to a rise in globulins (particularly alpha-globulins) which is interpreted as evidence of liver dysfunction with hyperbilirubinaemia. Hepatotoxic effects are also found in animals given molybdenum salts with a rise in alpha-globulin levels, hypoalbuminaemia and increased serum bilirubin reported. Other reported biochemical effects include an early depletive effect on tissue nicotinamide nucleotides, hyperaminoaciduria, reduction in red blood cell life-span and hyper-thyroidism. Industrial exposure to some insoluble molybdenum compounds is thought to have resulted in an increased incidence of weakness, fatigue, anorexia, headache and joint and muscular pain. Under the conditions of a 2-year inhalation study* there was equivocal evidence of carcinogenic activity of molybden

carcinogenic activity in female B6C3F1 mice National Toxicology Program: Technical Report Series 462, April 1997	Exposure of male and female rats to molybden degeneration of the olfactory epithelium (female Exposure of female and male mice to molybde cellular inflammation (males), hyaline degenerat squamous metaplasia of the epiglottis, and hyp Guinea pigs exposed to molybdenum trioxide of weight loss, diarrhoea, muscular incoordination generated MoO2 fume under about the same e mortality with the dust, and no mortality when the Exposure of male and female rats to molybden and severity of chronic alveolar inflammation in exposure to the material resulted in alveolar/ bi (squamous metaplasia) were considered to be of mice to molybdenum trioxide was associated carcinoma or adenoma in both sexes. Chronic those observed in rats. Molybdenum trioxide was not mutagenic in any chromosomal aberrations in cultured Chinese F enzymes. Pneumoconiosis has been described in experint The mechanism of molybdenum trioxide action nose and larynx of rats and in the nose, larynx response to chronic exposure. The US Department of Health and Human Sem based on a marginally significant positive trend activity in female F344/N rats; that there was set	a. There was no evidence of carcinogenic activity in female rats exposed to 10, 30 and 100 mg/m3. num trioxide by inhalation resulted in increased incidences of chronic alveolar inflammation, hyaline ales), hyaline degeneration of the respiratory epithelium and squamous metaplasia of the epiglottis. enum trioxide resulted in an increased incidence of metaplasia of the alveolar epithelium, histiocyte ration of the respiratory epithelium, hyaline degeneration of the olfactory epithelium (females), reperplasia of the larynx. dust for 1 hour daily at 250 mg/m3 showed extreme irritation. Symptoms include loss of appetite, on and loss of hair. Of the 51 animals exposed, 26 died after the tenth exposure. Exposure to freshly exposure conditions proved unexpectedly less toxic, with only 8.3% mortality compared with 51% the exposure level was reduced to about one-third (57 mg Mo/m3). Explanation for this unexpected ution and elimination of the large surface area fume particle. [Patty's] num trioxide resulted in the development of respiratory system lesions. In the lung, the incidence increased with increasing exposure concentration in male and female rats. In some male rats, bronchiolar adenomas or carcinomas. Lesions in the nose (hyaline degeneration) and larynx e a non-specific defensive or adaptive response to chronic inhalation exposure. Inhalation exposure conducted with dive sister chromatid exchanges or hamster ovary cells in vitro. All tests were conducted with or without S9 metabolic activation imental animals exposed sub-chronically to molybdenum trioxide. n in lung carcinogenicity is not known; the material is not mutagenic. Non-neoplastic lesions of the x and lungs of mice were apparently due to the development of a more durable epithelium in rvices (1) concluded that there was equivocal evidence of carcinogenic activity in male F344/N rats d of alveolar/ bronchiolar adenoma or carcinoma; that there was no evidence of carcinogenic sof excercine activity in male B6C3F1 mice and that the
	 5	rt Series 462, April 1997

	TOXICITY	IRRITATION	
	dermal (rat) LD50: >2000 mg/kg <sup>[1]</sup>	Not Available	
sodium molybdate	Inhalation(Rat) LC50: >1.93 mg/l4h <sup>[1]</sup>		
	Oral (Dog) LD50; 250 mg/kg <sup>[2]</sup>		
Legend:	<ol> <li>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</li> </ol>		

Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.

🌶 – Data available to make classification

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 r	not available or does not fill the criteria for classification

### **SECTION 12 Ecological information**

	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	26mg/l	2
sodium molybdate	EC50	48h	Crustacea	34.13-46.87mg/l	4
	LC50	96h	Fish	>79.8mg/l	4
	NOEC(ECx)	672h	Crustacea	0.67mg/l	2

Based on the high concentration of molybdenum in all analysed waste types, the exposure of the environment to molybdenum is regarded as significant. The limited amount of data regarding its toxicity makes it impossible to evaluate the potential for adverse environmental and health effects from molybdenum exposure. Molybdenum cause adverse effects in ruminant animals. Livestock have been injured by forage grown on solis with excessive geochemically-derived molybdenum. Soil molybdenum is a potentially toxic element, but no cases have been reported of molybdenum toxicity to animals from consumption of forage grown on sludge-amended soils. In pot studies, where clover was grown on alkaline soils containing up to 16 kg of molybdenum per ha, concentrations in the plant tissue reached levels that could be harmful to animals if the clover were to make up a substantial portion of the diet for an extended period of time.

Molybdenum is generally found in two oxidation states in nature, Mo(IV) and Mo(VI). In oxidising environments Mo(VI) dominates and it is commonly present as the oxyanion molybdate (MoO4,2-)

In a laboratory experiment it was found that Mo was lost from solution under reducing conditions and remobilised under oxidizing conditions, and hypothesised that MoS2, a low-solubility mineral, formed in the system.

In this study it was also found that Fe minerals were important sinks for Mo accumulation in reducing sediments. It has been proposed that under reducing conditions and with the reduction of sulfate, molybdate is converted to thiomolybdate (MoS4,2-) which then binds to Fe, AI, and organic matter phases a via sulfur bridges. This mechanism could also account for decreased Mo solubility under reducing conditions.

Another study in wetland found that Mo accumulated in the sediments with most of the accumulation occurring in the top 2 cm and decreasing with depth. It appears that Mo accumulation (as well as As and V accumulation) or retention in the surface sediments is dependent on the depth of the overlying water column and correspondingly on redox status. DO NOT discharge into sewer or waterways

## Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
sodium molybdate	HIGH	HIGH
Bioaccumulative potentia	al	
Ingredient	Bioaccumulation	
sodium molybdate	LOW (LogKOW = 2.229)	
Mobility in soil		
Ingredient	Mobility	
sodium molybdate	LOW (KOC = 48.64)	

### **SECTION 13 Disposal considerations**

Waste treatment methods	<ul> <li>Containers may still present a chemical hazard/ danger when empty.</li> <li>Return to supplier for reuse/ recycling if possible.</li> <li>Otherwise:</li> <li>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.</li> <li>Where possible retain label warnings and SDS and observe all notices pertaining to the product.</li> <li>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.</li> <li>A Hierarchy of Controls seems to be common - the user should investigate: <ul> <li>Reduction</li> <li>Rescycling</li> <li>Disposal (if all else fails)</li> </ul> </li> <li>This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. 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. In most instances the supplier of the material should be consulted.</li> <li>DON Tailow wash water from cleaning or process equipment to enter drains.</li> <li>It may be necessary to collect all wash water for treatment before disposal.</li> <li>In all cases disposal to sever may be subject to local laws and regulations and these should be considered first.</li> <li>Where in doubt contact the responsible authority.</li> </ul>
	In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
	<ul> <li>Bury residue in an authorised landfill.</li> <li>Recycle containers if possible, or dispose of in an authorised landfill.</li> </ul>

### **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

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

-		
Product name	Group	
sodium molybdate	Not Available	
Transport in bulk in acco	ordance with the IGC Code	
Product name	Ship Type	
sodium molybdate	Not Available	

## **SECTION 15 Regulatory information**

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

### sodium molybdate is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

### **National Inventory Status**

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (sodium molybdate)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	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	20/06/2022
Initial Date	12/05/2005

#### **SDS Version Summary**

Version	Date of Update	Sections Updated
6.1	28/05/2009	Toxicological information - Acute Health (eye), Toxicological information - Acute Health (inhaled), Toxicological information - Acute Health (skin), Toxicological information - Acute Health (swallowed), Toxicological information - Chronic Health, Hazards identification - Classification, Disposal considerations - Disposal, Exposure controls / personal protection - Engineering Control, Ecological Information - Environmental, Exposure controls / personal protection - Exposure Standard, Firefighting measures - Fire Fighter (extinguishing media), Firefighting measures - Fire Fighter (fire fighting), Firefighting measures - Fire Fighter (fire incompatibility), First Aid measures - First Aid (inhaled), First Aid measures - First Aid (swallowed), Handling and storage - Handling Procedure, Exposure controls / personal protection - Personal Protection (bter), Exposure controls / personal protection - Personal Protection (bter), Exposure controls / personal protection - Personal Protection (bter), Exposure controls / personal protection - Personal Protection (hands/feet), Accidental release measures - Spills (major), Accidental release measures - Spills (minor), Handling and storage - Storage (suitable container), Identification of the substance / mixture and of the company / undertaking - Supplier Information, Identification of the substance / mixture and of the company / undertaking - Synoyms, Toxicological information - Toxicity and Irritation (Other)
8.1	20/06/2022	Expiration. Review and Update

#### 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

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 This document is copyright.

Apart from any fair dealing for the purposes of private study, research, review or criticism, as permitted under the Copyright Act, no part may be reproduced by any process without written permission from CHEMWATCH. TEL (+61 3) 9572 4700.

