

QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE

Quantum Agrosiences Holdings Pty Ltd

Chemwatch: 9046-79

Version No: 2.1

Safety Data Sheet according to Work Health and Safety Regulations (Hazardous Chemicals) 2023 and ADG requirements

Chemwatch Hazard Alert Code: 3

Initial Date: 13/07/2026

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Print Date: 13/07/2026

S.GHS.AUS.EN.E

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

Product Identifier

Product name	QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE
Chemical Name	Not Applicable
Synonyms	APVMA Approval No: 95805/147215
Proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (contains prothioconazole)
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	Fungicide. Use according to manufacturer's directions.
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Details of the manufacturer or importer of the safety data sheet

Registered company name	Quantum Agrosiences Holdings Pty Ltd
Address	Suite 2, Level 7, 330 Collins Street, Melbourne, Victoria 3000 Australia
Telephone	1300 658 988
Fax	Not Available
Website	www.quantumag.au
Email	vincent@quantumag.au

Emergency telephone number

Association / Organisation	CHEMWATCH EMERGENCY RESPONSE (24/7)
Emergency telephone number(s)	+61 1800 951 288 (ID#: 9046-79)
Other emergency telephone number(s)	+61 3 9573 3188

SECTION 2 Hazards identification

Classification of the substance or mixture

Poisons Schedule	S5
Classification ^[1]	Reproductive Toxicity Category 1B, Hazardous to the Aquatic Environment Long-Term Hazard Category 1
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)	
Signal word	Danger

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Hazard statement(s)

H360Fd	May damage fertility. Suspected of damaging the unborn child.
H410	Very toxic to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P202	Do not handle until all safety precautions have been read and understood.
P280	Wear protective gloves and protective clothing.
P273	Avoid release to the environment.

Precautionary statement(s) Response

P308+P313	IF exposed or concerned: Get medical advice/ attention.
P391	Collect spillage.

Precautionary statement(s) Storage

P405	Store locked up.
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Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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No further product hazard information.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
178928-70-6	42.66	<u>prothioconazole</u>
1327-43-1	1-<10	<u>magnesium aluminosilicate</u>
2634-33-5	0.01-<0.15	<u>1,2-benzisothiazoline-3-one</u>
Not Available	Balance	Ingredients determined not to be hazardous

Legend: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 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 this product comes in contact with the eyes: ▶ Wash out immediately with fresh running water. ▶ Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. ▶ Seek medical attention without delay; if pain persists or recurs seek medical attention. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	If skin contact occurs: ▶ Immediately remove all contaminated clothing, including footwear. ▶ Flush skin and hair with running water (and soap if available). ▶ Seek medical attention in event of irritation.
Inhalation	▶ If fumes, aerosols or combustion products are inhaled remove from contaminated area. ▶ Other measures are usually unnecessary.
Ingestion	▶ IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. ▶ For advice, contact a Poisons Information Centre or a doctor. ▶ Urgent hospital treatment is likely to be needed. ▶ In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. ▶ If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist. ▶ If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS.

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Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:

- ▶ **INDUCE** vomiting with fingers down the back of the throat, **ONLY IF CONSCIOUS**. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.

NOTE: Wear a protective glove when inducing vomiting by mechanical means.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.
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 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.
- ▶ **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

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility	▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
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Advice for firefighters

Fire Fighting	▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear full body protective clothing with breathing apparatus. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Use water delivered as a fine spray to control fire and cool adjacent area. ▶ Avoid spraying water onto liquid pools. ▶ DO NOT approach containers suspected to be hot. ▶ Cool fire exposed containers with water spray from a protected location. ▶ If safe to do so, remove containers from path of fire.
Fire/Explosion Hazard	▶ Combustible. ▶ Slight fire hazard when exposed to heat or flame. ▶ Heating may cause expansion or decomposition leading to violent rupture of containers. ▶ On combustion, may emit toxic fumes of carbon monoxide (CO). ▶ May emit acrid smoke. ▶ Mists containing combustible materials may be explosive. Combustion products include: ▶ carbon dioxide (CO2) hydrogen chloride phosgene

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	nitrogen oxides (NOx) sulfur oxides (SOx) metal oxides ▶ other pyrolysis products typical of burning organic material.
HAZCHEM	•3Z

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	Environmental hazard - contain spillage. It is recommended that areas handling final finished product have cytotoxic spill kits available. Spill kits should include: ▶ impermeable body covering, ▶ shoe covers, ▶ latex and utility latex gloves, ▶ goggles, ▶ approved respirator (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent), see Section 8, ▶ disposable dust pan and scoop, ▶ absorbent towels, ▶ spill control pillows, ▶ disposable sponges, ▶ sharps container, ▶ disposable garbage bag and ▶ hazardous waste label Where spills are treated with loose absorbents, such as vermiculite, ensure dust exposure is strictly avoided. To avoid accidental exposure due to waste handling of cytotoxics: ▶ Place waste residue in a segregated sealed plastic container. ▶ Used syringes, needles and sharps should not be crushed, clipped, recapped, but placed directly into an approved sharps container. ▶ Dispose of any cleanup materials and waste residue according to all applicable laws and regulations e.g. secure chemical landfill disposal. ▶ Clean up all spills immediately. ▶ Avoid breathing vapours and contact with skin and eyes. ▶ Control personal contact with the substance, by using protective equipment. ▶ Contain and absorb spill with sand, earth, inert material or vermiculite. ▶ Wipe up. ▶ Place in a suitable, labelled container for waste disposal.
Major Spills	▶ Clean up all spills immediately. ▶ Avoid breathing dust and contact with skin and eyes. ▶ Wear protective clothing, gloves, safety glasses and dust respirator. ▶ Wet residue with water to prevent dusting ▶ Sweep up, shovel up or ▶ Vacuum up (consider explosion-proof machines designed to be grounded during storage and use). ▶ Place spilled material in clean, dry, sealable, labelled container. Environmental hazard - contain spillage.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	▶ DO NOT allow clothing wet with material to stay in contact with skin Australian Standard (AS2639) and the National Institute of Health (USA) recommends that the preparation of injectable antineoplastic drugs should be performed in a Class II laminar flow biological safety cabinet and that personnel preparing drugs of this class should wear appropriate personal protective gear. Emphasise controls on containment. ▶ Avoid skin contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ Prevent concentration in hollows and sumps. ▶ DO NOT enter confined spaces until atmosphere has been checked. ▶ Avoid smoking, naked lights or ignition sources. ▶ Avoid contact with incompatible materials.
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	- When handling, DO NOT eat, drink or smoke. - Keep containers securely sealed when not in use. - Avoid physical damage to containers. - Always wash hands with soap and water after handling. - Work clothes should be laundered separately. - Use good occupational work practice. - Observe manufacturer's storage and handling recommendations contained within this SDS. - Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.
Other information	- Store in original containers. - Keep containers securely sealed. - No smoking, naked lights or ignition sources. - Store in a cool, dry, well-ventilated area. - Store away from incompatible materials and foodstuff containers. - Protect containers against physical damage and check regularly for leaks. - Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	- Glass container is suitable for laboratory quantities - Metal can or drum - Packaging as recommended by manufacturer. - Check all containers are clearly labelled and free from leaks.
Storage incompatibility	Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Not Available

Exposure controls

Appropriate engineering controls	For potent pharmacological agents: Solutions Handling: - Solutions can be handled outside a containment system or without local exhaust ventilation during procedures with no potential for aerosolisation. If the procedures have a potential for aerosolisation, an air-purifying respirator is to be worn by all personnel in the immediate area. - Solutions used for procedures where aerosolisation may occur (e.g., vortexing, pumping) are to be handled within a containment system or with local exhaust ventilation. - In situations where this is not feasible (may include animal dosing), an air-purifying respirator is to be worn by all personnel in the immediate area. If using a ventilated enclosure that has not been validated, wear a half-mask respirator equipped with HEPA cartridges until the enclosure is validated for use. - Ensure gloves are protective against solvents in use. Unless written procedures, specific to the workplace are available, the following is intended as a guide: For Laboratory-scale handling of Substances assessed to be toxic by inhalation. Quantities of up to 25 grams may be handled in Class II biological safety cabinets*; Quantities of 25 grams to 1 kilogram may be handled in Class II biological safety cabinets* or equivalent containment systems; Quantities exceeding 1 kg may be handled either using specific containment, a hood or Class II biological safety cabinet*. - HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapours. - The need for respiratory protection should also be assessed where incidental or accidental exposure is anticipated. Dependent on levels of contamination, PAPR, full face air purifying devices with P2 or P3 filters or air supplied respirators should be evaluated. When handling: Quantities of up to 25 grams, an approved respirator with HEPA filters or cartridges should be considered; Quantities of 25 grams to 1 kilogram, a half-face negative pressure, full negative pressure, or powered helmet-type air purifying respirator should be considered. Quantities in excess of 1 kilogram, a full face negative pressure, helmet-type air purifying, or supplied air respirator should be considered. Written procedures, specific to a particular work-place, may replace these recommendations * For Class II Biological Safety Cabinets, Types B2 or B3 should be considered. Where only Class I, open fronted Cabinets are available, glove panels may be added, Laminar flow cabinets do not provide sufficient protection when handling these materials unless especially designed to do so. Pilot Plant and Production - Wear appropriate gloves; lab coat, nylon coveralls or disposable Tyvek suit; safety glasses, safety shoes, and disposable booties. Use good manufacturing practices (i.e., cGMPs). - Protective garment (coveralls, Tyvek, lab coat) is not to be worn outside the work area. - Clean/dirty/decontamination areas are to be established. - Negative/positive air pressure relationships and buffer zones required (i.e., ante-room/degowning room/airlock). - Area access is to be restricted. - High-energy operations such as milling, particle sizing, spraying or fluidising should be done within an approved emission control or containment system. - Develop cleaning procedures and techniques that limit potential exposure
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Individual protection measures, such as personal protective equipment	
Eye and face protection	▶ Chemical protective goggles with full seal.[AS/NZS 1337.1, EN166 or national equivalent] ▶ Shielded mask (gas-type). ▶ 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].
Skin protection	See Hand protection below
Hands/feet protection	NOTE: ▶ The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact. ▶ Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed. The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. 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. Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: · frequency and duration of contact, · chemical resistance of glove material, · glove thickness and · dexterity Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent). · When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended. · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended. · Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use. · Contaminated gloves should be replaced. As defined in ASTM F-739-96 in any application, gloves are rated as: · Excellent when breakthrough time > 480 min · Good when breakthrough time > 20 min · Fair when breakthrough time < 20 min · Poor when glove material degrades For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended. 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. 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. Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example: · 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. · 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 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. ▶ Rubber gloves (nitrile or low-protein, powder-free latex, latex/ nitrile). Employees allergic to latex gloves should use nitrile gloves in preference. ▶ Double gloving should be considered. ▶ PVC gloves. ▶ Change gloves frequently and when contaminated, punctured or torn. ▶ Wash hands immediately after removing gloves. ▶ Protective shoe covers. [AS/NZS 2210] ▶ Head covering. ▶ Butyl rubber gloves · Nitrile rubber gloves (Note: Nitric acid penetrates nitrile gloves in a few minutes.)
Body protection	See Other protection below
Other protection	▶ When handling antineoplastic materials, it is recommended that a disposable work-uniform (such as Tyvek or closed front surgical-type gown with knit cuffs) is worn. ▶ Potentially contaminated bodily fluids should be handled in accordance with local standards or codes of practice (appendix 10 of 'Cytotoxic Drugs and Related Waste' - Workcover New South Wales, HSE Information Sheet MISC615, OSHA Technical Manual (OTM) Section VI: Chapter 2) ▶ For quantities up to 500 grams a laboratory coat may be suitable.

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- ▶ For quantities up to 1 kilogram a disposable laboratory coat or coverall of low permeability is recommended. Coveralls should be buttoned at collar and cuffs.
- ▶ For quantities over 1 kilogram and manufacturing operations, wear disposable coverall of low permeability and disposable shoe covers.
- ▶ For manufacturing operations, air-supplied full body suits may be required for the provision of advanced respiratory protection.
- ▶ Eye wash unit.
- ▶ Ensure there is ready access to an emergency shower.
- ▶ For Emergencies: Vinyl suit

Respiratory protection

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

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	A-AUS / Class1	-
up to 50	1000	-	A-AUS / Class 1
up to 50	5000	Airline *	-
up to 100	5000	-	A-2
up to 100	10000	-	A-3
100+			Airline**

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

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

- ▶ Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- ▶ The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- ▶ Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Off-white to white liquid; partly mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.118-1.218
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	5-8	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	Not Applicable	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Partly miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	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

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Enclosed Space Ignition Time Equivalent (s/m3)	Not Available	Enclosed Space Ignition Deflagration Density (g/m3)	Not Available
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SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Information on toxicological effects

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	There is sufficient evidence to classify this material as toxic to reproductivity
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	The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual.
Skin Contact	There is some evidence to suggest that this material can cause inflammation of the skin on contact in some persons. Open cuts, abraded or irritated skin should not be exposed to this material. Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.
Eye	There is some evidence to suggest that this material can cause eye irritation and damage in some persons.
Chronic	Ample evidence exists from experimentation that reduced human fertility is directly caused by exposure to the material. Ample evidence exists, from results in experimentation, that developmental disorders are directly caused by human exposure to the material. Based on experience with animal studies, exposure to the material may result in toxic effects to the development of the foetus, at levels which do not cause significant toxic effects to the mother. Triazole pesticides are the products of plant, fungal and animal bioconversion. They are toxic and are metabolised into variable products depending on the nature of the parent compound. Studies done with animals showed that they may be slightly irritating to the skin, but severely irritating to the eye. They affect the nervous, reproductive and blood systems, and have been shown to developmental toxicity. Limited evidence predicts that they are not likely to cause genetic damage but may cause cancers especially of the liver and thyroid. Azole fungicides show broad antifungal activity, and can be used to prevent or cure fungal infections. They are therefore important in agricultural production.

QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE	TOXICITY	IRRITATION
	Not Available	Not Available
prothioconazole	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[2]	Not Available
	Oral (Rat) LD50: >6200 mg/kg ^[2]	

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magnesium aluminosilicate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >2000 mg/kg ^[1]	Not Available
	Inhalation (Rat) LC50: >2.08 mg/l4h ^[1]	
1,2-benzisothiazoline-3-one	Oral (Rat) LD50: >2000 mg/kg ^[1]	
	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[1]	Eye: adverse effect observed (irreversible damage) ^[1]
	Oral (Rat) LD50: 454 mg/kg ^[1]	Skin (Human - man): 0.05%
		Skin (Human): 1%/1H
		Skin (Human): 5%/48H - Mild
		Skin: no adverse effect observed (not irritating) ^[1]

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

PROTHIOCONAZOLE

Prothioconazole has low acute toxicity by oral, dermal, and inhalation routes. It is not a dermal sensitizer, or a skin or eye irritant. Prothioconazole- desthio also has low acute toxicity by oral, dermal, and inhalation routes. It is not a dermal sensitizer, or a skin irritant, but it is a slight eye irritant. Subchronic studies show that the target organs at the LOAEL include the liver, kidney, urinary bladder, thyroid and blood. Significant clinical chemistry findings were also made. NOAEL/ LOAEL values across the family of chemicals (i.e., prothioconazole, and prothioconazole-desthio and prothioconazole sulfonic acid potassium salt metabolites) in the toxicity database indicate that prothioconazole-desthio is a most toxic chemical. In addition to the target organs and effects observed in the subchronic studies (i.e., liver, kidney, urinary bladder, thyroid, haematology and clinical chemistry), chronic toxicity at the LOAEL also included body weight and food consumption changes, and toxicity to the lymphatic and GI systems. The relative potency of prothioconazole-desthio was greater than prothioconazole.

The acute toxicity of prothioconazole is low, the oral LD50 being > 6200 mg/kg bw in rats. At this dose, there were no deaths and clinical signs were limited to decreased motility and diarrhoea 1-6 h after dosing. The dermal LD50 in rats was > 2000 mg/kg bw and the inhalation LC50, also in rats, was > 4.9 mg/L for a 4-h exposure. Prothioconazole is not irritating to rabbit skin and eyes and is not sensitizing either in the Buehler skin patch test in guinea-pigs or in the local lymph node assay in mice.

Initial studies with repeated doses showed that prothioconazole could be unstable when formulated with diet, hence most studies were performed using dosing by gavage. A 4-week study in rats given prothioconazole by different dosing routes established that plasma concentrations in rats dosed by gavage at 1000 mg/kg bw per day were 3-6-fold those in rats given diets containing prothioconazole at 10000 ppm, equivalent to 1000 mg/kg bw per day, and this was consistent with the observation of more marked effects in rats dosed by gavage.

The liver was consistently identified as a target organ in short-term studies in rats, mice and dogs, although there were some species differences in the hepatic effects observed. Increased liver weights and increased activities of several liver enzymes were observed in mice, rats (particularly females) and dogs. Microscopic lesions were also observed in the liver, including an increase in pigmented material in dogs, centrilobular fatty change and focal necrosis in mice and cytoplasmic changes and centrilobular hepatocellular hypertrophy in rats and mice. Some of these effects were consistent with induction of hepatic enzymes. None of the effects recorded in the liver persisted after 4- and 8-week recovery periods in rats and dogs, respectively. The kidney was the primary target organ in dogs and was also identified as a target organ in rats, but not in mice. The effects on the kidneys consisted of increased weights and changes in histology, namely increased incidence and severity of basophilic tubules and tubular dilatation in rats, and interstitial fibrosis and inflammation in dogs. These findings did not persist after a recovery period in rats, but there was only partial recovery in dogs. In rats, these kidney changes correlated with greatly increased water intakes, indicating disturbance of kidney function and systemic water homeostasis.

The following NOAELs were derived from short-term studies in which prothioconazole was administered orally:

- . In a 14 week study in mice dosed by gavage, the NOAEL was 25 mg/kg bw per day on the basis of increased liver weights and various histological changes in the liver at 100 mg/kg bw per day;
- . In studies of up to 14 weeks in rats dosed by gavage, the NOAEL was 100 mg/kg bw per day on the basis of increased water consumption, decreased urine output, increased liver weights in females, and histological changes in the liver and kidney at 500 mg/kg bw per day;
- . In 13-week and 1-year studies in dogs dosed by gavage, the overall NOAEL was 25 mg/kg bw per day on the basis of minimal histological changes in the kidneys at 40 mg/kg bw per day.

-

In long-term studies in rats and mice dosed by gavage, the primary target organs were the liver and kidney. There was no evidence for any carcinogenic potential in rats or mice. The hepatic effects observed in rats were increased incidences of eosinophilic or clear-cell foci. The other liver effects observed in rats and mice (increased weights, centrilobular hypertrophy with cytoplasmic changes) were consistent with induction of hepatic enzymes. There was slight alteration in the concentrations of plasma thyroid hormones in rats, but there was no associated thyroid histopathology.

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-

Prothioconazole was toxic to the reproductive system and to developing offspring at a dose that was accompanied by toxicity in parental rats.

The NOAEL for maternal toxicity was 80 mg/kg bw per day on the basis of reduced body-weight gain, increased water

Continued...

QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE

consumption, reduced food consumption and clinical chemical indications for functional impairment of liver and kidney function at 750 mg/kg bw per day. The NOAEL for developmental toxicity was 80 mg/kg bw per day on the basis of a statistically significant increase in the incidence of rudimentary supernumerary 14th ribs at 726 mg/kg bw per day.

Prothioconazole is unlikely to cause neurotoxicity in humans

There were no indications of immunotoxicity in general studies of toxicity in dogs, rats and mice.

* APVMA Report

Studies in the rat and mouse, using both prothioconazole and prothioconazole-desthio, showed no evidence of carcinogenicity. The data show that dosing was adequate, except in the rat cancer study using prothioconazole, where the dosing was considered too high. The data indicate that prothioconazole and the three metabolites evaluated (i.e., prothioconazole-desthio, prothioconazole sulfonic acid potassium salt, and prothioconazole-deschloro) variously produce pre-natal developmental effects at levels equal to or below maternally toxic levels. Prothioconazole-desthio is the most toxic orally and dermally, with LOAELs significantly below that of the other chemicals. The rabbit is the more sensitive species. Lastly, prothioconazole-desthio is a developmental neurotoxicant, producing changes in brain morphometrics and increases in the occurrence of peripheral nerve lesions in the neonate. A NOAEL was not determined, since these observations were looked for only at the high dose level. Reproduction studies in the rat, conducted using prothioconazole and prothioconazole-desthio, suggested that these chemicals may not be primary reproductive toxicants. Reproductive and offspring toxicities were observed only in the presence of parental toxicity. Indeed, the parental LOAELs are lower. The data show that prothioconazole-desthio is more toxic by an order of magnitude. The nature of parental toxicity is similar to what was observed in the subchronic studies, such as body weight and food consumption changes, liver effects, etc. Reproductive effects included decreases in reproductive indices such as those that indicate pup survival and growth. Offspring toxicity was manifested by decreased pup weights and malformations such as cleft palate

It is conceivable that the high potency of prothioconazole as an agricultural fungicide is enhanced due to intracellular metabolism of the relatively inactive prothioconazole in the pathogenic fungi to the highly active desthio form and in the host.

Treatment of *C. albicans* cells with prothioconazole, prothioconazole-desthio, and voriconazole resulted in CYP51 inhibition, as evidenced by the accumulation of 14 α -methylated sterol substrates (lanosterol and eburicol) and the depletion of ergosterol. Inhibitor binding properties of prothioconazole, prothioconazole-desthio, and voriconazole with CaCYP51 were compared.

Prothioconazole-desthio and voriconazole bind noncompetitively to CaCYP51 in the expected manner of azole antifungals (with type II inhibitors binding to haeme as the sixth ligand), while prothioconazole binds competitively and does not exhibit classic inhibitor binding spectra. Inhibition of CaCYP51 activity in a cell-free assay demonstrated that prothioconazole-desthio is active, whereas prothioconazole does not inhibit CYP51 activity. Extracts from *C. albicans* grown in the presence of prothioconazole were found to contain prothioconazole-desthio, leading to the conclusion that the antifungal action of prothioconazole can be attributed to prothioconazole-desthio

The desthio metabolite was found almost exclusively in the faeces and represented between 3.5% and 17.7% of the administered dose. The systemic proportion of prothioconazole-desthio was very low; not more than about 0.07% of the administered dose was found in the urine. The S- or O-glucuronide conjugates were the principle systemic metabolites and were found in amounts of up to 7.7% of the administered dose in rat urine. These conjugates were also overall the most abundant, occurring at about 46% of the administered dose in bile, followed by the parent compound, prothioconazole (about 1-22%), and prothioconazole-desthio (about 0.4-18%).

An EFSA report states that prothioconazole-desthio is more toxic than the parent compound.

An ADI of 0.01 mg/kg bw/day was set based on the NOAEL of 1.1 mg/kg bw /day (liver histopathology and reduced weight gain in the rat carcinogenicity study), applying a 100 fold assessment factor.

1,2-BENZISOTHIAZOLINE-3-ONE

The following information refers to contact allergens as a group and may not be specific to this product.

Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

In light of potential adverse effects, and to ensure a harmonised risk assessment and management, the EU regulatory framework for biocides has been established with the objective of ensuring a high level of protection of human and animal health and the environment. To this aim, it is required that risk assessment of biocidal products is carried out before they can be placed on the market. A central element in the risk assessment of the biocidal products are the utilization instructions that defines the dosage, application method and amount of applications and thus the exposure of humans and the environment to the biocidal substance. Humans may be exposed to biocidal products in different ways in both occupational and domestic settings. Many biocidal products are intended for industrial sectors or professional uses only, whereas other biocidal products are commonly available for private use by non-professional users. In addition, potential exposure of non-users of biocidal products (i.e. the general public) may occur indirectly via the environment, for example through drinking water, the food chain, as well as through atmospheric and residential exposure. Particular attention should be paid to the exposure of vulnerable sub-populations, such as the elderly, pregnant women, and children. Also pets and other domestic animals can be exposed indirectly following the application of biocidal products. Furthermore, exposure to biocides may vary in terms of route (inhalation, dermal contact, and ingestion) and pathway (food, drinking water, residential, occupational) of exposure, level, frequency and duration.

The predominant fate of the thiazole ring is oxidative ring scission catalysed by cytochrome P450 (CYP) and formation of the corresponding α -dicarbonyl metabolites and thioamide derivatives. The well-established toxicity associated with thioamides and thioureas has led to the speculation that thiazole toxicity is attributed to ring scission yielding the corresponding thioamide metabolite. Ring opening has also been observed in benzothiazoles. For instance, benzothiazole itself is converted to S-methylmercaptoaniline.

No significant acute toxicological data identified in literature search.

Acute toxicity data show that 1,2-benzisothiazoline-3-one (BIT) is moderately toxic by the oral and dermal routes but that this chemical is a severe eye irritant. Irritation to the skin from acute data show only mild skin irritation, but repeated dermal application indicated a more significant skin irritation response.

The neurotoxicity observed in the rat acute oral toxicity study (piloerection and upward curvature of the spine at 300 mg/kg and above; decreased activity, prostration, decreased abdominal muscle tone, reduced righting reflex, and decreased rate and depth of breathing at 900 mg/kg) and the acute dermal toxicity study (upward curvature of the spine was observed in increased

QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE

incidence, but this was absent after day 5 post-dose at a dose of 2000 mg/kg) were felt to be at exposures in excess of those expected from the use pattern of this pesticide and that such effects would not be observed at estimated exposure doses.

Subchronic oral toxicity studies showed systemic effects after repeated oral administration including decreased body weight, increased incidence of forestomach hyperplasia, and non-glandular stomach lesions in rats. In dogs, the effects occurred at lower doses than in rats, and included alterations in blood chemistry (decreased plasma albumin, total protein, and alanine aminotransferase) and increased absolute liver weight.

Developmental toxicity studies were conducted in rats with maternal effects including decreased body weight gain, decreased food consumption, and clinical toxicity signs (audible breathing, haircoat staining of the anogenital region, dry brown material around the nasal area) as well as increased mortality. Developmental effects consisted of increases in skeletal abnormalities (extra sites of ossification of skull bones, unossified sternebrae) but not external or visceral abnormalities.

Reproductive toxicity: In a two-generation reproduction study, parental toxicity was observed at 500 ppm and was characterized by lesions in the stomach. In pups, toxic effects were reported at 1000 ppm and consisted of preputial separation in males and impaired growth and survival in both sexes. The reproduction study did not show evidence of increased susceptibility of offspring.

Acute Toxicity	✗	Carcinogenicity	✗
Skin Irritation/Corrosion	✗	Reproductivity	✓
Serious Eye Damage/Irritation	✗	STOT - Single Exposure	✗
Respiratory or Skin sensitisation	✗	STOT - Repeated Exposure	✗
Mutagenicity	✗	Aspiration Hazard	✗

Legend: ✗ – Data either not available or does not fill the criteria for classification
✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
prothioconazole	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48h	Crustacea	1.482-1.795mg/L	4
	EC50(ECx)	96h	Algae or other aquatic plants	0.024-0.044mg/L	4
	EC50	96h	Algae or other aquatic plants	0.024-0.044mg/L	4
	LC50	96h	Fish	1.346-4.189mg/L	4
magnesium aluminosilicate	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	410mg/l	2
	EC50	48h	Crustacea	>10000mg/l	2
	NOEC(ECx)	96h	Fish	<1.4mg/l	2
1,2-benzisothiazoline-3-one	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	0.07mg/L	2
	EC50	48h	Crustacea	0.097mg/L	4
	NOEC(ECx)	72h	Algae or other aquatic plants	0.04mg/L	2
	LC50	96h	Fish	0.067-0.29mg/L	4
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				

Very toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

DO NOT discharge into sewer or waterways.

Persistence and degradability

QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE

Ingredient	Persistence: Water/Soil	Persistence: Air
	No Data available for all ingredients	No Data available for all ingredients

Bioaccumulative potential

Ingredient	Bioaccumulation
prothioconazole	MEDIUM (LogKOW = 4.05)

Mobility in soil

Ingredient	Mobility
	No Data available for all ingredients

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

- ▶ Reduction
- ▶ Reuse
- ▶ Recycling
- ▶ Disposal (if all else fails)

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

- ▶ Antineoplastic (cytotoxic) wastes must be packed directly, ready for incineration, into colour-coded, secure, labelled, leak-proof containers sufficiently robust to withstand handling without breaking, bursting or leaking.
- ▶ Containers of special design are available for particular needs (such as disposal of sharps) and should be used.
- ▶ Once filled and closed, such containers must never be re-opened.
- ▶ Immediate containers must bear a nationally accepted symbol or device depicting cytotoxic substances and be labelled with the words: CYTOTOXIC WASTE - INCINERATE in a style of lettering approved by the national/ state authority.
- ▶ Where policies and procedures permit the merging of cytotoxic wastes with medical waste in an outer container used for medical waste, cytotoxic waste must first be placed in identifiable colour-coded/ labelled cytotoxic containers prior to merging.
- ▶ Management procedures must ensure that merged medical and cytotoxic waste is subjected to the incineration requirements appropriate for the total destruction of the cytotoxic waste.

WASTE STORAGE OF CYTOTOXIC WASTES

For the storage of cytotoxic waste, segregated or merged with medical waste, provide:

- ▶ special storage areas with adequate lighting.
- ▶ waste security and restriction of access to authorised persons.
- ▶ storage areas designed to facilitate easy routine cleaning and maintenance to hygienic standards, or post-spill decontamination.
- ▶ storage of cytotoxic waste in standard, identifying bins or other appropriate containers.

COLLECTION OF CYTOTOXIC WASTES

- ▶ Procedures for the collection of cytotoxic wastes, which are compatible with existing operational needs, and which protect workers, other people and the environment, must be developed.
- ▶ Waste must be removed from the site by contractors whose workers have been instructed in the protective methods to be used against the hazards involved, and who comply with the safe work practices established by internal and/or national/ state policies. Contractors must instruct, train and direct their personnel in the safe and legal handling of cytotoxic wastes. Contractor's personnel should observe the operating procedures of the waste-generator.
- ▶ Transport of cytotoxic wastes, through the community, must comply with the appropriate national/ state codes.

DESTRUCTION OF CYTOTOXIC WASTES

- ▶ Destruction of cytotoxic wastes should be carried out in multi-chambered incinerators, licensed for this purpose, operating at 1100 deg. C. or more, with a residence time of at least 1 second.
- ▶ Operators must be trained in handling procedures and hazards involved with handling the waste.
- ▶ Waste which arrives at the incinerator inappropriately packaged should **NOT** be returned to the waste generator. An authorised representative of the waste generator must attend the incinerator site to rectify the situation.
- ▶ **DO NOT allow wash water from cleaning or process equipment to enter drains.**
- ▶ It may be necessary to collect all wash water for treatment before disposal.
- ▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- ▶ Where in doubt contact the responsible authority.
- ▶ Containers may still present a chemical hazard/ danger when empty.
- ▶ Return to supplier for reuse/ recycling if possible.

Otherwise:

- ▶ If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- ▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product.

SECTION 14 Transport information

QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE

Labels Required

	
Marine Pollutant	
HAZCHEM	•3Z

Land transport (ADG)

14.1. UN number or ID number	3082				
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (contains prothioconazole)				
14.3. Transport hazard class(es)	<table> <tr> <td>Class</td><td>9</td></tr> <tr> <td>Subsidiary Hazard</td><td>Not Applicable</td></tr> </table>	Class	9	Subsidiary Hazard	Not Applicable
Class	9				
Subsidiary Hazard	Not Applicable				
14.4. Packing group	III				
14.5. Environmental hazard	Environmentally hazardous				
14.6. Special precautions for user	<table> <tr> <td>Special provisions</td><td>274 331 335 375 AU01</td></tr> <tr> <td>Limited quantity</td><td>5 L</td></tr> </table>	Special provisions	274 331 335 375 AU01	Limited quantity	5 L
Special provisions	274 331 335 375 AU01				
Limited quantity	5 L				

Environmentally Hazardous Substances meeting the descriptions of UN 3077 or UN 3082

are not subject to this Code when transported by road or rail in;

(a) packagings;

(b) IBCs; or

(c) any other receptacle not exceeding 500 kg(L).

- Australian Special Provisions (SP AU01) - ADG Code 7th Ed.

Air transport (ICAO-IATA / DGR)

14.1. UN number	3082														
14.2. UN proper shipping name	Environmentally hazardous substance, liquid, n.o.s. (contains prothioconazole)														
14.3. Transport hazard class(es)	<table> <tr> <td>ICAO/IATA Class</td><td>9</td></tr> <tr> <td>ICAO / IATA Subsidiary Hazard</td><td>Not Applicable</td></tr> <tr> <td>ERG Code</td><td>9L</td></tr> </table>	ICAO/IATA Class	9	ICAO / IATA Subsidiary Hazard	Not Applicable	ERG Code	9L								
ICAO/IATA Class	9														
ICAO / IATA Subsidiary Hazard	Not Applicable														
ERG Code	9L														
14.4. Packing group	III														
14.5. Environmental hazard	Environmentally hazardous														
14.6. Special precautions for user	<table> <tr> <td>Special provisions</td><td>A97 A158 A197 A215</td></tr> <tr> <td>Cargo Only Packing Instructions</td><td>964</td></tr> <tr> <td>Cargo Only Maximum Qty / Pack</td><td>450 L</td></tr> <tr> <td>Passenger and Cargo Packing Instructions</td><td>964</td></tr> <tr> <td>Passenger and Cargo Maximum Qty / Pack</td><td>450 L</td></tr> <tr> <td>Passenger and Cargo Limited Quantity Packing Instructions</td><td>Y964</td></tr> <tr> <td>Passenger and Cargo Limited Maximum Qty / Pack</td><td>30 kg G</td></tr> </table>	Special provisions	A97 A158 A197 A215	Cargo Only Packing Instructions	964	Cargo Only Maximum Qty / Pack	450 L	Passenger and Cargo Packing Instructions	964	Passenger and Cargo Maximum Qty / Pack	450 L	Passenger and Cargo Limited Quantity Packing Instructions	Y964	Passenger and Cargo Limited Maximum Qty / Pack	30 kg G
Special provisions	A97 A158 A197 A215														
Cargo Only Packing Instructions	964														
Cargo Only Maximum Qty / Pack	450 L														
Passenger and Cargo Packing Instructions	964														
Passenger and Cargo Maximum Qty / Pack	450 L														
Passenger and Cargo Limited Quantity Packing Instructions	Y964														
Passenger and Cargo Limited Maximum Qty / Pack	30 kg G														

Sea transport (IMDG-Code / GGVSee)

14.1. UN number	3082				
14.2. UN proper shipping name	ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (contains prothioconazole)				
14.3. Transport hazard class(es)	<table> <tr> <td>IMDG Class</td><td>9</td></tr> <tr> <td>IMDG Subsidiary Hazard</td><td>Not Applicable</td></tr> </table>	IMDG Class	9	IMDG Subsidiary Hazard	Not Applicable
IMDG Class	9				
IMDG Subsidiary Hazard	Not Applicable				

Continued...

QUANTUM PROTHIOCONAZOLE 480 SC FUNGICIDE

14.4. Packing group	III	
14.5 Environmental hazard	Marine Pollutant	
14.6. Special precautions for user	EMS Number	F-A, S-F
	Special provisions	274 335 375 969
	Limited Quantities	5 L

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
prothioconazole	Not Applicable
magnesium aluminosilicate	Not Applicable
1,2-benzisothiazoline-3-one	Not Applicable

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
prothioconazole	Not Applicable
magnesium aluminosilicate	Not Applicable
1,2-benzisothiazoline-3-one	Not Applicable

SECTION 15 Regulatory information

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

prothioconazole is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

magnesium aluminosilicate is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

1,2-benzisothiazoline-3-one is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

Additional Regulatory Information

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	No (prothioconazole)
Canada - DSL	No (prothioconazole)
Canada - NDSL	No (prothioconazole; magnesium aluminosilicate; 1,2-benzisothiazoline-3-one)
China - IECSC	No (prothioconazole)
Europe - EINEC / ELINCS / NLP	No (prothioconazole)
Japan - ENCS	No (prothioconazole; magnesium aluminosilicate)
Korea - KECI	No (prothioconazole)
New Zealand - NZIoC	Yes
Philippines - PICCS	No (prothioconazole)
USA - TSCA	TSCA Inventory 'Active' substance(s) (magnesium aluminosilicate; 1,2-benzisothiazoline-3-one); No (prothioconazole)
Taiwan - TCSI	Yes
Mexico - INSQ	No (prothioconazole)
Vietnam - NCI	Yes

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National Inventory	Status
Russia - FBEPH	No (prothioconazole; magnesium aluminosilicate)
UAE - Control List (Banned/Restricted Substances)	No (prothioconazole; magnesium aluminosilicate; 1,2-benzisothiazoline-3-one)
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	13/07/2026
Initial Date	13/07/2026

SDS Version Summary

Version	Date of Update	Sections Updated
2.1	13/07/2026	Toxicological information - Acute Health (eye), Toxicological information - Acute Health (inhaled), Toxicological information - Acute Health (skin), Toxicological information - Acute Health (swallowed), First Aid measures - Advice to Doctor, Toxicological information - Chronic Health, Hazards identification - Classification, Disposal considerations - Disposal, Exposure controls / personal protection - Engineering Control, Ecological Information - Environmental, Firefighting measures - Fire Fighter (extinguishing media), Firefighting measures - Fire Fighter (fire/explosion hazard), Firefighting measures - Fire Fighter (fire fighting), Firefighting measures - Fire Fighter (fire incompatibility), First Aid measures - First Aid (eye), First Aid measures - First Aid (inhaled), First Aid measures - First Aid (skin), First Aid measures - First Aid (swallowed), Handling and storage - Handling Procedure, Composition / information on ingredients - Ingredients, Stability and reactivity - Instability Condition, Exposure controls / personal protection - Personal Protection (other), Exposure controls / personal protection - Personal Protection (Respirator), Exposure controls / personal protection - Personal Protection (eye), Exposure controls / personal protection - Personal Protection (hands/feet), Accidental release measures - Spills (major), Accidental release measures - Spills (minor), Handling and storage - Storage (storage incompatibility), Handling and storage - Storage (storage requirement), Handling and storage - Storage (suitable container), Transport information - Transport, Transport Information, Name

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

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- 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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