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| **UN/SCEGHS/39/INF.32** |
| **Committee of Experts on the Transport of Dangerous Goods and on the Globally Harmonized System of Classification and Labelling of Chemicals**  **Sub-Committee of Experts on the Globally Harmonized System of Classification and Labelling of Chemicals 2 December 2020**  **Thirty-ninth session**  Geneva, 9-11 December 2020  Item 3 (f) of the provisional agenda  **Classification criteria and related hazard communication:**  **Practical classification issues** |

Proposal to address issues from the programme of work for the practical classification issues correspondence group

Transmitted by the expert from the United States of America on behalf of the informal correspondence group

Purpose

1. The purpose of this paper is to present editorial amendments to the proposals presented in ST/SG/AC.10/C.4/2020/14. Following the review of ST/SG/AC.10/C.4/2020/14, members of the working group identified typographical errors in Examples 4 and 5. The proposed amendments to the examples are shown as **bold, underline** to indicate the new text and **~~bold, strikethrough~~** for the deleted text.

Amendments to example 4

2. Rationale (d), second paragraph, last sentence: “Thus, both studies support including the **~~immunue system~~ thymus** as a target organ”.

Rationale (d), third paragraph, first sentence: “Classification via application of criteria using the guidance values provided in GHS Tables 3.9.1 and 3.9.2 is possible for the nervous **system** and **~~immune system~~** **thymus** effects.”

Rationale (d), third paragraph, last sentence: “The effects seen in the thymus (and to a lesser extent in the spleen) ……. criteria with the central nervous system and the **~~immune system~~** **thymus** as the specific target organs/systems.”

Amendments to example 5

3. Rationale (a), last sentence: “It can be rationalized that the cause of mortality via the oral route is similar to the inhalation route and therefore the dose response relationship……. showing no mortality **~~(assumed to be secondary to systemic effects)~~** at 1 mg/L and 100% at the next higher dose of 2 mg/L, resulting in a Category 3 classification for the oral route.”