Muscimol
sc-200460

Material Safety Data Sheet

Hazard Alert Code Key:
- 
- 
- 

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME
Muscimol

STATEMENT OF HAZARDOUS NATURE

NFPA

SUPPLIER
Santa Cruz Biotechnology, Inc.
2145 Delaware Avenue
Santa Cruz, California 95060
800.457.3801 or 831.457.3800

EMERGENCY:
ChemWatch
Within the US & Canada: 877-715-9305
Outside the US & Canada: +800 2436 2255
(1-800-CHEMCALL) or call +613 9573 3112

SYNONYMS
C4-H6-N2-O2, "3-isoxazolol, 5-(aminomethyl)-", 5-aminomethyl-3-hydroxyisoxazolone, 5-(aminomethyl)-3-isoxazolone, 5-(aminomethyl)-3-(2H)-isoxazolone, 5-aminomethyl-3-isoxazole, 3-hydroxy-5-aminomethylisoxazole, 3-hydroxy-5-aminomethylisoxazole-agarin, "botenic acid decarboxylate", "pantherin/agarin/ insecticide/ pesticide", "RCRA Waste No.: P007", "mushroom Group V (5) toxin", "Amanita muscaria, pantherina isoxazole derivative", "GABA receptor agonist"

Section 2 - HAZARDS IDENTIFICATION

CHEMWATCH HAZARD RATINGS

<table>
<thead>
<tr>
<th>Hazard</th>
<th>Min</th>
<th>Max</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flammability</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Toxicity</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Body Contact</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Reactivity</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Chronic</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

CANADIAN WHMIS SYMBOLS

Min/Nil=0
Low=1
Moderate=2
High=3
Extreme=4
EMERGENCY OVERVIEW
RISK
Toxic by inhalation, in contact with skin and if swallowed.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED
- Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual.
- Isozoleacetic derivatives such as ibotenic acid and muscimol are alkaloids extracted from certain toxic mushrooms (Group V mushroom toxins). Ibotenic acid exhibits potent neuroexcitory activity. Human volunteers ingesting muscimol (7.5 to 10 mg) showed symptoms within an hour. These lasted for 3 to 4 hours with a few effects persisting for about 10 hours with a hangover appearing on the following day. Subjects became inactive and experienced mild fatigue (the mushrooms also cause an initial drowsiness, stupor or sleep). Other symptoms included mild nausea and vomiting, muscle spasms in the extremities, various emotional changes (elation and excitement or fear and withdrawal) and distorted perceptions of space and time. Hallucinations rarely occur.

In the Pacific northwest the Panther mushroom is consumed for recreational purposes. Only rarely do ibotenic acid containing mushrooms contain sufficient of the toxic alkaloid, muscarine, to produce cholinergic effects. Deaths from these mushrooms are rare but children may react in dangerous and unpredictable ways (convulse for example). Many toxicologists are of the opinion that muscimol and ibotenic acid are the intoxicants responsible for pyschomotor reactions experienced by Siberian tribesmen who consumed mushrooms in religious rites and the "soma" consumed by Vedic priests of ancient India to attain ecstasy and immortality. Popularisation of this idea and related ethnopharmacologic theories has lead to the deliberate consumption of muscimol-containing mushrooms by present day generations to explore altered states of consciousness. Iboteenic acid and muscimol (isoxazole derivatives) can be detected in the urine, within 1 hour of ingestion. Certain eastern Asian users drink urine of isoxazole users to obtain the same effect.

The mechanisms by which ibotenic acid and muscimol alter central neural activity may be related to structural similarities to the amino acids glutamic acid and gamma-aminobutyric acid (GABA) respectively. Both GABA and glutamic acid are putative central neurotransmitters. In contrast to the both ibotenic acid and muscimol neither of these amino acids cross the blood-brain barrier to an appreciable extent. When introduced directly to the brain (intrathecally) glutamic acid activates spinal interneurons in a fashion similar to ibotenic acid. Conversely intrathecal GABA and muscimol inhibit the firing of some central neurones. Systemic administration of ibotenic acid and muscimol to laboratory animals produces central inhibition of motor activity with little change to peripheral autonomic activity. Both compounds induce EEG alterations in cats, rabbits and rats and thus within the central nervous system both ibotenic acid and muscimol behave as false neurotransmitters.

- The material may mimic the actions of the major inhibitory neurotransmitter of the brain, GABA, (gamma-aminobutyric acid) in inhibiting the electrical activity of certain elements of the nervous system. GABA is a putative amino-acid, produced within certain neurones (presynaptic cells) and is released into the synapse, between neurones, on the arrival of an action potential; GABA then interacts with post-synaptic neurones, slowing their rate of firing.

Certain GABA congener may produce lightheadedness, ataxia, mood elevation and muscle incoordination. Side-effects of uptake of GABA analogues and congener (such as the isoxazole derivative, muscimol, isolated from hallucinogenic mushrooms), by neurones, may include dizziness, ataxia, euphoria, muscle twitches, and initial psychic stimulations followed by dream-filled sleep. More severe ingestions may produce visual disturbances, fever, confusion, myoclonus, mydriasis, seizures and coma. Residual headache may persist for several days. The congener muscimol is structurally related to GABA, crosses the blood-brain barrier easily, in contrast to GABA, and inhibits the firing of some central neurones. GABA, when introduced directly to the brain by injection (i.e. intrathecally), produces the same effect and similar outcomes to those produced by muscimol.

Another amino-acid, with a similar structure to both GABA and muscimol, is ibotenic acid (also derived from mushrooms). Effects of ingestion are similar to those produced by muscimol. Iboteenic acid, however, binds to a different receptor, NMDA, which is normally activated by the putative neurotransmitter glutamic acid but now is inhibited by the action of ibotenic acid. NMDA receptors, in contrast to GABA receptors, when activated, normally cause neurones to fire. Systemic administration of ibotenic acid and muscimol to laboratory animals produces central inhibition of motor activity with little change to peripheral autonomic activity. Both compounds induce EEG changes in cats, rabbits and rats and thus within the central nervous system both compounds behave as false inhibitory neurotransmitters.

GABA and its congener inhibit the excitation of cells, of neurological origin, by allowing anions, such as chloride, to enter the cell thus altering the electric potential of the cell. The GABA receptor acts as a gateway for influx of chloride ion. One subtype of receptor for GABA, the GABA-A receptor also contains binding sites for anxiolytic barbiturates, benzodiazepines, neurosteroids and, probably, ethanol. These anxiolytic groups potentiate the function of the chloride channels linked to the receptor.

The whole receptor complex can be formed only by the interaction of several individual subunits, each of which is a membrane-spanning protein. Several different types of subunit have been identified and named the alpha-, beta-, and delta- subunits. The receptor may be made from any of up to five possible combinations of these subunits so that the number of possible subtypes of GABA-A receptor is huge and may, in part, explain their variable response to each anxiolytic agent. However, receptors made from any of these subunits are similar to those produced by muscimol-containing mushrooms, by neurones, on the arrival of an action potential; GABA then interacts with post-synaptic neurones, slowing their rate of firing.

EYE
- Although the material is not thought to be an irritant, direct contact with the eye may cause transient discomfort characterized by tearing or conjunctival redness (as with windburn). Slight abrasive damage may also result.

SKIN
- Skin contact with the material may produce toxic effects; systemic effects may result following absorption.
- The material is not thought to be a skin irritant (as classified using animal models). Abrasive damage however, may result from prolonged...
Treat symptomatically.

During the first 2-days.

Oral poisonings due to Amanita spp are appear to be related to the amatoxins rather than the phallotoxins which appear to be degraded in the gastrointestinal tract. Phallotoxin injury is probably related to contamination by amatoxins (alpha-amanitin for example is lethal in rats at 0.1 mg/kg - man is said to be more susceptible). Such poisonings may respond to the following treatment regime:

- If spontaneous vomiting has not been extensive and productive, induce emesis with Syrup of Ipecac and/or perform gastric lavage with water or potassium permanganate solution (1:5000). Save the gastric contents.
- Intravenous infusions of glucose when and if hypoglycaemia appears.
- Meperidine (Demerol) for the control of pain. Morphine is best avoided because it may delay purging.
- Correct dehydration and shock by the intravenous administration of replacement fluids.
- Intravenous infusions of glucose when and if hypoglycaemia appears.
- To promote amatoxin excretion and to limit renal involvement, try to maintain a brisk urine flow during the first two days, if necessary by using mannitol.
- Early extracorporeal haemodialysis or better haemoperfusion over activated charcoal is also judged worthwhile during the first three days to eliminate the toxin.
- Intravenous corticosteroids have been recommended, e.g., 20-40 mg dexamethasone daily, in the hope of inhibiting toxin fixation in the liver. This form of therapy has not been demonstrated objectively.
- Another experimental regime that is alleged to protect the liver is the intravenous infusion of large doses of penicillin G (250 mg/kg daily) during the first 2-days.
- A trial with intravenous thioctic acid (alpha-lipoic acid) may or may not be useful.
- Digitalis may be given a trial if hypotension persists after rehydration is completed.
- Institute supportive therapy for impending and hepatic insufficiencies.

GOSSELIN, SMITH & HODGE: Clinical Toxicology of Commercial Products, 5th Ed. Treat symptomatically.

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### Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

<table>
<thead>
<tr>
<th>NAME</th>
<th>CAS RN</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>muscimol</td>
<td>2763-96-4</td>
<td>&gt;98</td>
</tr>
</tbody>
</table>

### Section 4 - FIRST AID MEASURES

**SWALLOWED**

- If SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. · Where Medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:

**EYE**

- If this product comes in contact with the eyes: · Immediately hold eyelids apart and flush the eye continuously with 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.

**SKIN**

- If skin or hair contact occurs: · Quickly but gently, wipe material off skin with a dry, clean cloth. · Immediately remove all contaminated clothing, including footwear.

**INHALED**

- If fumes or combustion products are inhaled remove from contaminated area. · Lay patient down. Keep warm and rested.

**NOTES TO PHYSICIAN**

- Mushroom poisoning (due to Amanita spp.) and other Group V mushroom toxin poisonings

**Risk Assessment**

- Inhalation of dusts, generated by the material, during the course of normal handling, may produce toxic effects.
- The material is not thought to produce respiratory irritation (as classified using animal models); nevertheless inhalation of dusts, or fume, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress.
- 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.

**Chronic Health Effects**

- Long-term exposure to the product is not thought to produce chronic effects adverse to the health (as classified using animal models); nevertheless exposure by all routes should be minimized as a matter of course.
- 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.
Section 5 - FIRE FIGHTING MEASURES

<table>
<thead>
<tr>
<th>Property</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vapour Pressure (mmHg)</td>
<td>Negligible</td>
</tr>
<tr>
<td>Upper Explosive Limit (%)</td>
<td>Not available.</td>
</tr>
<tr>
<td>Specific Gravity (water=1)</td>
<td>Not available</td>
</tr>
<tr>
<td>Lower Explosive Limit (%)</td>
<td>Not available.</td>
</tr>
</tbody>
</table>

**EXTINGUISHING MEDIA**
- Water spray or fog.
- Foam.

**FIRE FIGHTING**
- Alert Emergency Responders and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.

When any large container (including road and rail tankers) is involved in a fire, consider evacuation by 800 metres in all directions.

**GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS**
- Combustible solid which burns but propagates flame with difficulty.
- Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust may burn rapidly and fiercely if ignited.
- Combustion products include: carbon monoxide (CO), carbon dioxide (CO2), nitrogen oxides (NOx), other pyrolysis products typical of burning organic material.
- May emit poisonous fumes.

**FIRE INCOMPATIBILITY**
- Avoid contamination with oxidizing agents i.e. nitrates, oxidizing acids, chlorine bleaches, pool chlorine etc. as ignition may result.

**PERSONAL PROTECTION**
- Glasses:
- Gloves:
- Respirator:

Particulate

Section 6 - ACCIDENTAL RELEASE MEASURES

**MINOR SPILLS**
- Clean up waste regularly and abnormal spills immediately.
- Avoid breathing dust and contact with skin and eyes.
- Wear protective clothing, gloves, safety glasses and dust respirator.
- Use dry clean up procedures and avoid generating dust.
- Vacuum up or sweep up. NOTE: Vacuum cleaner must be fitted with an exhaust micro filter (HEPA type) (consider explosion-proof machines designed to be grounded during storage and use).
- Dampen with water to prevent dusting before sweeping.
- Place in suitable containers for disposal.

**MAJOR SPILLS**
- Clear area of personnel and move upwind.
- Alert Emergency Responders and tell them location and nature of hazard.

Section 7 - HANDLING AND STORAGE

**PROCEDURE FOR HANDLING**
- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source.
- Do NOT cut, drill, grind or weld such containers.
- In addition ensure such activity is not performed near full, partially empty or empty containers without appropriate workplace safety authorisation or permit.

**RECOMMENDED STORAGE METHODS**
- Glass container.
- Lined metal can, Lined metal pail/drum
- Plastic pail.
- For low viscosity materials
  - Drums and jerricans must be of the non-removable head type.
  - Where a can is to be used as an inner package, the can must have a screwed enclosure.
- All inner and sole packagings for substances that have been assigned to Packaging Groups I or II on the basis of inhalation toxicity criteria, must be hermetically sealed.

**STORAGE REQUIREMENTS**
- Store in original containers.
Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

<table>
<thead>
<tr>
<th>Source</th>
<th>Material</th>
<th>TWA ppm</th>
<th>TWA mg/m³</th>
<th>STEL ppm</th>
<th>STEL mg/m³</th>
<th>Peak ppm</th>
<th>Peak mg/m³</th>
<th>TWA F/CC</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>US - California Permissible Exposure Limits for Chemical Contaminants</td>
<td>muscimol (Particulates not otherwise regulated Respirable fraction)</td>
<td></td>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>(n)</td>
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<tr>
<td>US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants</td>
<td>muscimol (Particulates not otherwise regulated Respirable fraction)</td>
<td></td>
<td>5</td>
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<td></td>
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<tr>
<td>US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants</td>
<td>muscimol (Particulates not otherwise regulated (PNOR)(f)-Respirable fraction)</td>
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<td>5</td>
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<tr>
<td>US - Michigan Exposure Limits for Air Contaminants</td>
<td>muscimol (Particulates not otherwise regulated, Respirable dust)</td>
<td></td>
<td>5</td>
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<td>Canada - Prince Edward Island Occupational Exposure Limits</td>
<td>muscimol (Particles (Insoluble or Poorly Soluble) [NOS] Inhalable particles)</td>
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<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>See Appendix B current TLV/BEI Book</td>
</tr>
</tbody>
</table>

PERSONAL PROTECTION

RESPIRATOR

Particulate
Consult your EHS staff for recommendations

EYE

- Chemical protective goggles with full seal
- 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 lens 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].

HANDS/FEET

- Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: such as:
  - Frequency and duration of contact,
  - Chemical resistance of glove material,
  - Glove thickness and
  - Dexterity

- Keep containers securely sealed.
Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739).

- 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) 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) is recommended.
- Contaminated gloves should be replaced.
- 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). Employees allergic to latex gloves should use nitrile gloves in preference.
- Double gloving should be considered.
- PVC gloves.
- Protective shoe covers.
- Head covering.

OTHER

- For quantities up to 500 grams a laboratory coat may be suitable.
- 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.

ENGINEERING CONTROLS

- For potent pharmacological agents:
  - Powders
  - To prevent contamination and overexposure, no open handling of powder should be allowed.
  - Powder handling operations are to be done in a powders weighing hood, a glove box, or other equivalent ventilated containment system.
  - In situations where these ventilated containment hoods have not been installed, a non-ventilated enclosed containment hood should be used.
  - Pending changes resulting from additional air monitoring data, up to 300 mg can be handled outside of an enclosure provided that no grinding, crushing or other dust-generating process occurs.
  - An air-purifying respirator should be worn by all personnel in the immediate area in cases where non-ventilated containment is used, where significant amounts of material (e.g., more than 2 grams) are used, or where the material may become airborne (as through grinding, etc.).
  - Powder should be put into solution or a closed or covered container after handling.
  - 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.

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 vapors.

### Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

<table>
<thead>
<tr>
<th>Property</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Solubility in water (g/L)</td>
<td>Miscible</td>
</tr>
<tr>
<td>Viscosity</td>
<td>Miscible</td>
</tr>
<tr>
<td>Flash Point (°F)</td>
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</tr>
<tr>
<td>Decomposition Temp (°F)</td>
<td>Not Available</td>
</tr>
<tr>
<td>Autoignition Temp (°F)</td>
<td>Not available</td>
</tr>
<tr>
<td>Upper Explosive Limit (%)</td>
<td>Not available</td>
</tr>
<tr>
<td>Lower Explosive Limit (%)</td>
<td>Not available</td>
</tr>
<tr>
<td>Volatile Component (%vol)</td>
<td>Negligible</td>
</tr>
<tr>
<td>Evaporation Rate</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

Solid.

Mixes with water.
APPEARANCE
White powder; mixes with water.

Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY
· Presence of incompatible materials.
· Product is considered stable.

STORAGE INCOMPATIBILITY
· Avoid oxidizing agents, acids, acid chlorides, acid anhydrides.
For incompatible materials - refer to Section 7 - Handling and Storage.

Section 11 - TOXICOLOGICAL INFORMATION

MUSCIMOL

TOXICITY AND IRRITATION
MUSCIMOL:

TOXICITY

IRRITATION
Oral (rat) LD50: 45 mg/kg Nil Reported
Intravenous (None) None: rat LD540 4.5 mg/kg
Intraperitoneal (mouse) LD50: 2.5 mg/kg
Subcutaneous (mouse) LD50: 3.8 mg/kg
Intravenous (mouse) LD50: 5.62 mg/kg
Sleep, hallucinations, changes in motor activity, ataxia, dyspnea, nausea and vomiting recorded.

Section 12 - ECOLOGICAL INFORMATION

This material and its container must be disposed of as hazardous waste.

Ecotoxicity

<table>
<thead>
<tr>
<th>Ingredient</th>
<th>Persistence: Water/Soil</th>
<th>Persistence: Air</th>
<th>Bioaccumulation</th>
<th>Mobility</th>
</tr>
</thead>
<tbody>
<tr>
<td>muscimol</td>
<td>HIGH</td>
<td>LOW</td>
<td>HIGH</td>
<td>HIGH</td>
</tr>
</tbody>
</table>

Section 13 - DISPOSAL CONSIDERATIONS

US EPA Waste Number & Descriptions
B. Component Waste Numbers
When muscimol is present as a solid waste as a discarded commercial chemical product, off-specification species, as a container residue, or a spill residue, use EPA waste number P007 (waste code T).

Disposal Instructions
All waste must be handled in accordance with local, state and federal regulations.
· Puncture containers to prevent re-use and bury at an authorized landfill.
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. 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.
DO NOT allow wash water from cleaning equipment to enter drains. Collect all wash water for treatment before disposal.
· Recycle wherever possible.
· Consult manufacturer for recycling options or consult Waste Management Authority for disposal if no suitable treatment or disposal facility can be identified.
Section 14 - TRANSPORTATION INFORMATION

DOT:
Symbols: None Hazard class or Division: 6.1
Identification Numbers: UN1544 PG: II
Label Codes: 6.1 Special provisions: IB8, IP2, IP4, T3, TP33
Packaging: Exceptions: 153 Packaging: Non- bulk: 212
Packaging:Exceptions: 153 Quantity limitations: 25 kg
Passenger aircraft/rail:
Quantity Limitations: Cargo 100 kg Vessel stowage: Location: A
aircraft only:
Vessel stowage: Other: None
Hazardous materials descriptions and proper shipping names:
Alkaloids, solid, n.o.s. or Alkaloid salts, solid, n.o.s. poisonous

Air Transport IATA:
ICAO/IATA Class: 6.1 ICAO/IATA Subrisk: None
UN/ID Number: 1544 Packing Group: II
Special provisions: A3
Cargo Only
Packing Instructions: 615 Maximum Qty/Pack: 100 kg
Passenger and Cargo Passenger and Cargo
Packing Instructions: 613 Maximum Qty/Pack: 25 kg
Passenger and Cargo Limited Quantity Passenger and Cargo Limited Quantity
Packing Instructions: Y613 Maximum Qty/Pack: 1 kg
Shipping Name: ALKALOIDS, SOLID, N.O.S. *(CONTAINS
MUSCIMOL)*

Maritime Transport IMDG:
IMDG Class: 6.1 IMDG Subrisk: None
UN Number: 1544 Packing Group: II
EMS Number: F-A , S-A Special provisions: 43 274
Limited Quantities: 500 g
Shipping Name: ALKALOIDS, SOLID, N.O.S. or ALKALOIDS SALTS, SOLID, N.O.S.

Section 15 - REGULATORY INFORMATION

muscimol (CAS: 2763-96-4) is found on the following regulatory lists;

Section 16 - OTHER INFORMATION

ND
Substance CAS Suggested codes muscimol 2763- 96- 4

Reasonable care has been taken in the preparation of this information, but the author makes no warranty of merchantability or any other warranty, expressed or implied, with respect to this information. The author makes no representations and assumes no liability for any direct, incidental or consequential damages resulting from its use.
For additional technical information please call our toxicology department on +800 CHEMCALL.

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.
A list of reference resources used to assist the committee may be found at:
www.chemwatch.net/references.

The (M)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.

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