

# Salicylic acid

sc-203374

Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:

EXTREME

HIGH

MODERATE

LOW

## Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

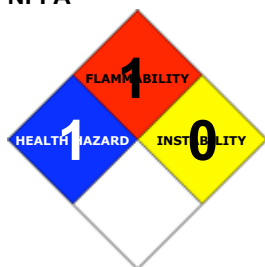
### PRODUCT NAME

Salicylic acid

### STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

### NFPA



### SUPPLIER

Company: Santa Cruz Biotechnology, Inc.

Address:

2145 Delaware Ave

Santa Cruz, CA 95060

Telephone: 800.457.3801 or 831.457.3800

Emergency Tel: CHEMWATCH: From within the US and Canada:

877-715-9305

Emergency Tel: From outside the US and Canada: +800 2436 2255

(1-800-CHEMCALL) or call +613 9573 3112

### PRODUCT USE

Manufacture of methyl salicylate, acetyl salicylic acid (aspirin) and other salicylates; perfumes and dyes. As a reagent in analytical chemistry. A preservative of food products, but its use is forbidden in some countries.

### SYNONYMS

C7-H6-O3, HOC6H4COOH, "2-hydroxybenzoic acid", "2-hydroxybenzoic acid", "o-hydroxybenzoic acid", "o-hydroxybenzoic acid", "2-hydroxy benzoic acid", "2-hydroxy benzoic acid", "benzoic acid, 2-hydroxy", "benzoic acid, 2-hydroxy", "orthohydroxybenzoic acid", Keralyt, "Retarder W", SA, SAX, 10230

## Section 2 - HAZARDS IDENTIFICATION

### CANADIAN WHMIS SYMBOLS



### EMERGENCY OVERVIEW

#### RISK

Harmful if swallowed.

Risk of serious damage to eyes.

Irritating to respiratory system and skin.

# Salicylic acid

sc-203374

Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:

EXTREME

HIGH

MODERATE

LOW

## POTENTIAL HEALTH EFFECTS

### ACUTE HEALTH EFFECTS

#### SWALLOWED

- Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual.
- High oral doses of salicylates, such as aspirin, may cause a mild burning pain in the throat and stomach, causing vomiting. This is followed (within hours) by deep, rapid breathing, tiredness, nausea and further vomiting, thirst and diarrhea. The central nervous system is first stimulated, and then depression from failure occurs. Stimulation produces vomiting, hyperventilation, headache, ringing in the ears, confusion, behavior and mood changes, and generalized convulsions. Respiratory failure and cardiovascular collapse can result in death. There may also be sweating, skin eruptions, internal bleeding, kidney failure and inflamed pancreas. There may be bloody stools, purple skin spots or blood in the vomit. Many of these symptoms are due to disturbances in blood chemistry. A dose of 300 mg/kg can cause serious effects while 500 mg/kg can be lethal.
- Non-steroidal anti-inflammatory drug (NSAID) overdose may produce nausea, vomiting, indigestion and upper abdominal pain. Other effects may include drowsiness, dizziness, confusion, disorientation, lethargy, "pins and needles", intense headache, blurred vision, ringing in the ears, muscle twitching, convulsions, stupor and coma. There have been other reported effects, such as sweating, decreased urination frequency or absence of urine, increased heart rate, low or high blood pressure and kidney damage.

#### EYE

- If applied to the eyes, this material causes severe eye damage.

#### SKIN

- The material may cause mild but significant inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterized by redness, swelling and blistering.
- 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.
- Skin contact with the material may produce severely toxic effects; systemic effects may result following absorption and these may be fatal.

#### INHALED

- The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage.
- 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 respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

There is limited evidence that, skin contact with this product is more likely to cause a sensitization reaction in some persons compared to the general population.

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. Prime symptom is breathlessness; lung shadows show on X-ray.

Chronic exposure to salicylates produce problems with metabolism, central system disturbances, or kidney damage. Those with pre-existing damage to the eye, skin or kidney are especially at risk. Hypersensitive reactions can occur, especially in people with asthma. These symptoms include itchy wheals and other skin eruptions, an inflamed nose, shortness of breath and serious narrowing of the airways (which can even cause death). Chronic exposure to parabens by skin contact, ingestion or injection can cause hypersensitive reactions. There may be cross-sensitivity between different species, so people can develop allergic symptoms if they were sensitized by other chemicals. Symptoms include acute narrowing of the airways, hives (itchy wheal), swelling, running nose and blurred vision. There may be anaphylactic shock and rash.

Prolonged use of non-steroidal analgesics damages the lining of the gastrointestinal tract, causing ulcers and bleeding. There may be diarrhea or constipation, perforations causing serious infection, and blood in the vomit or stools. Kidney damage can result in blood or pus in the urine, changes in urine chemistry, change in the frequency of urination, insufficiency of kidney function, destruction of the kidney lining and kidney inflammation. Occasionally, the liver may be affected, causing inflammation (hepatitis) and jaundice. There may be changes in blood cell distribution, and disturbance in platelet function. Sensitivity to light may occur. Anaphylactic-like syndrome is characterized by rash with redness, spots and blisters, itching, and fainting. The eyes, ears and urinary tract can all be affected. Asthma and anemia may be exacerbated. These drugs can cause circulatory defects in the fetus and newborn. Once the kidney has been damaged, there is an increased likelihood that cancers could develop there.

Chronic exposure can cause metabolic disturbances and damage to the kidney or pancreas.

Persons with pre-existing skin disorders, eye problems or impaired kidney function may be more susceptible to the effects of the substance.

## Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

# Salicylic acid

sc-203374






## Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
------------------------	---------	------	----------	-----

### HAZARD RATINGS

		Min	Max	
Flammability:	1			
Toxicity:	4			
Body Contact:	4			
Reactivity:	1			
Chronic:	2			

Min/Nil=0  
Low=1  
Moderate=2  
High=3  
Extreme=4



NAME	CAS RN	%
salicylic acid	69-72-7	> 98

## 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:
- For advice, contact a Poisons Information Center or a doctor.
- Urgent hospital treatment is likely to be needed.
- If conscious, give water to drink.
- 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.
- 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 MSDS 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 MSDS.

### 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.
- Continue flushing until advised to stop by the Poisons Information Center or a doctor, or for at least 15 minutes.
- Transport to hospital or doctor without delay.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

### SKIN

- If skin or hair contact occurs:
- Immediately flush body and clothes with large amounts of water, using safety shower if available.
- Quickly remove all contaminated clothing, including footwear.
- Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Center.
- Transport to hospital, or doctor.

### INHALED

- 
- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.
- Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
- Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.
- Transport to hospital, or doctor, without delay.

### NOTES TO PHYSICIAN

# Salicylic acid

sc-203374

## Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
------------------------	---------	------	----------	-----

### ■ for salicylate intoxication:

- Pending gastric lavage, use emetics such as syrup of Ipecac or delay gastric emptying and absorption by swallowing a slurry of activated charcoal. Do not give ipecac after charcoal.
- Gastric lavage with water or perhaps sodium bicarbonate solution (3%-5%). Mild alkali delays salicylate absorption from the stomach and perhaps slightly from the duodenum.
- Saline catharsis with sodium or magnesium sulfate (15-30 gm in water).
- Take an immediate blood sample for an appraisal of the patients acid-base status. A pH determination on an anaerobic sample of arterial blood is best. An analysis of the plasma salicylate concentrations should be made at the same time. Laboratory controls are almost essential for the proper management of severe salicylism.
- In the presence of an established acidosis, alkali therapy is essential, but at least in an adult, alkali should be withheld until its need is demonstrated by chemical analysis. The intensity of treatment depends on the intensity of acidosis. In the presence of vomiting, intravenous sodium bicarbonate is the most satisfactory of all alkali therapy.
- Correct dehydration and hypoglycemia (if present) by the intravenous administration of glucose in water or in isotonic saline. The administration of glucose may also serve to remedy ketosis which is often seen in poisoned children.
- Even patients without hypoglycemia, infusions of glucose adequate to produce distinct hyperglycemia are recommended to prevent glucose depletion in the brain. This recommendation is based on impressive experimental data in animals.
- Renal function should be supported by correcting dehydration and incipient shock. Overhydration is not justified. An alkaline urine should be maintained by the administration of alkali if necessary with care to prevent a severe systemic alkalosis. As long as urine remains alkaline (pH above 7.5), administration of an osmotic diuretic such as mannitol or perhaps THAM is useful, but one must be careful to avoid hypokalemia. Supplements of potassium chloride should be included in parenteral fluids
- Small doses of barbiturates, diazepam, paraldehyde, or perhaps other sedatives (but probably not morphine) may be required to suppress extreme restlessness and convulsions.
- For hyperpyrexia, use sponge baths.

The presence of petechiae or other signs of hemorrhagic tendency calls for large Vitamin K dose and perhaps ascorbic acid. Minor transfusions may be necessary since bleeding in salicylism is not always due to a prothrombin effect.

- Haemodialysis and hemoperfusion have proved useful in salicylate poisoning, as have peritoneal dialysis and exchange transfusions, but alkaline diuretic therapy is probably sufficient except in fulminating cases.

[GOSSELIN, et al.: Clinical Toxicology of Commercial Products]

The mechanism of the toxic effect involves metabolic acidosis, respiratory alkalosis, hypoglycemia, and potassium depletion. Salicylate poisoning is characterized by extreme acid-base disturbances, electrolyte disturbances and decreased levels of consciousness. There are differences between acute and chronic toxicity and a varying clinical picture which is dependent on the age of the patient and their kidney function. The major feature of poisoning is metabolic acidosis due to "uncoupling of oxidative phosphorylation" which produces an increased metabolic rate, increased oxygen consumption, increased formation of carbon dioxide, increased heat production and increased utilization of glucose. Direct stimulation of the respiratory center leads to hyperventilation and respiratory alkalosis. This leads to compensatory increased renal excretion of bicarbonate which contributes to the metabolic acidosis which may coexist or develop subsequently. Hypoglycemia may occur as a result of increased glucose demand, increased rates of tissue glycolysis, and impaired rate of glucose synthesis. NOTE: Tissue glucose levels may be lower than plasma levels. Hyperglycemia may occur due to increased glycogenolysis. Potassium depletion occurs as a result of increased renal excretion as well as intracellular movement of potassium. Salicylates competitively inhibit vitamin K dependent synthesis of factors II, VII, IX, X and in addition, may produce a mild dose dependent hepatitis.

Salicylates are bound to albumin. The extent of protein binding is concentration dependent (and falls with higher blood levels). This, and the effects of acidosis, decreasing ionization, means that the volume of distribution increases markedly in overdose as does CNS penetration. The extent of protein binding (50-80%) and the rate of metabolism are concentration dependent. Hepatic clearance has zero order kinetics and thus the therapeutic half-life of 2-4.5 hours but the half-life in overdose is 18-36 hours. Renal excretion is the most important route in overdose. Thus when the salicylate concentrations are in the toxic range there is increased tissue distribution and impaired clearance of the drug.

HyperTox 3.0 <http://www.ozemail.com.au/~ouad/SALI0001.HTA>.

## Section 5 - FIRE FIGHTING MEASURES

Vapour Pressure (mmHG):	< 0.133 @ 20 C
Upper Explosive Limit (%):	Not available.
Specific Gravity (water=1):	1.443
Lower Explosive Limit (%):	1.1

### EXTINGUISHING MEDIA

- 
- Foam.
- Dry chemical powder.

# Salicylic acid

sc-203374

## Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
------------------------	---------	------	----------	-----

- BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog - Large fires only.

### FIRE FIGHTING

- 
- Alert Emergency Responders and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- 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.
- 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.
- Equipment should be thoroughly decontaminated after use.

### 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.
- Dry dust can be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport.
- Build-up of electrostatic charge may be prevented by bonding and grounding.
- Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.

Combustion products include: carbon monoxide (CO), carbon dioxide (CO<sub>2</sub>), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

May emit corrosive 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:

Chemical goggles.

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

- Moderate hazard.

- CAUTION: Advise personnel in area.
- Alert Emergency Responders and tell them location and nature of hazard.
- Control personal contact by wearing protective clothing.
- Prevent, by any means available, spillage from entering drains or water courses.
- Recover product wherever possible.
- IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal.
- ALWAYS: Wash area down with large amounts of water and prevent runoff into drains.

# Salicylic acid

sc-203374

## Material Safety Data Sheet



*The Power is Question*

Hazard Alert Code Key:	<b>EXTREME</b>	<b>HIGH</b>	<b>MODERATE</b>	<b>LOW</b>
------------------------	----------------	-------------	-----------------	------------

- If contamination of drains or waterways occurs, advise emergency services.

### ACUTE EXPOSURE GUIDELINE LEVELS (AEGL) (in ppm)

AEGL 1: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience notable discomfort, irritation, or certain asymptomatic nonsensory effects. However, the effects are not disabling and are transient and reversible upon cessation of exposure.

AEGL 2: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience irreversible or other serious, long-lasting adverse health effects or an impaired ability to escape.

AEGL 3: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience life-threatening health effects or death.

## Section 7 - HANDLING AND STORAGE

### PROCEDURE FOR HANDLING

- 
- Avoid all personal 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.
- DO NOT allow material to contact humans, exposed food or food utensils.
- Avoid contact with incompatible materials.
- 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.
- Launder contaminated clothing before re-use.
- Use good occupational work practice.
- Observe manufacturer's storing and handling recommendations.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.

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.
- Polyethylene or polypropylene container.
- Check all containers are clearly labelled and free from leaks.

### STORAGE REQUIREMENTS

- 
- Store in original containers.
- Keep containers securely sealed.
- 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 storing and handling recommendations.

### SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS

# Salicylic acid

sc-203374

## Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:

EXTREME

HIGH

MODERATE

LOW



X: Must not be stored together

O: May be stored together with specific preventions

+: May be stored together

## Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

### EXPOSURE CONTROLS

The following materials had no OELs on our records

- salicylic acid: CAS:69-72-7

### MATERIAL DATA

#### SALICYLIC ACID:

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

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

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

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- cause inflammation
- cause increased susceptibility to other irritants and infectious agents
- lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and
- accclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

Airborne particulate or vapor must be kept to levels as low as is practicably achievable given access to modern engineering controls and monitoring hardware. Biologically active compounds may produce idiosyncratic effects which are entirely unpredictable on the basis of literature searches and prior clinical experience (both recent and past).

### PERSONAL PROTECTION



Consult your EHS staff for recommendations

#### EYE

- When handling very small quantities of the material eye protection may not be required.



# Salicylic acid

sc-203374

## Material Safety Data Sheet



*The Power is Question*

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
------------------------	---------	------	----------	-----

For laboratory, larger scale or bulk handling or where regular exposure in an occupational setting occurs:

- Chemical goggles
- Face shield. Full face shield may be required for supplementary but never for primary protection of eyes
- 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

- Elbow length PVC gloves.

NOTE: The material may produce skin sensitization in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.

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

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.

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- polychloroprene
- nitrile rubber
- butyl rubber
- fluorocautchouc
- polyvinyl chloride

Gloves should be examined for wear and/ or degradation constantly.

- 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
- 
- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory . These may be government mandated or vendor recommended.
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a



# Salicylic acid

sc-203374

## Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
------------------------	---------	------	----------	-----

complete respiratory protection program.

- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

### RESPIRATOR

Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
10 x PEL	P1	-	PAPR-P1
	Air-line*	-	-
50 x PEL	Air-line**	P2	PAPR-P2
100 x PEL	-	P3	-
	-	Air-line*	-
100+ x PEL	-	Air-line**	PAPR-P3

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

Explanation of Respirator Codes:

Class 1 low to medium absorption capacity filters.

Class 2 medium absorption capacity filters.

Class 3 high absorption capacity filters.

PAPR Powered Air Purifying Respirator (positive pressure) cartridge.

Type A for use against certain organic gases and vapors.

Type AX for use against low boiling point organic compounds (less than 65°C).

Type B for use against certain inorganic gases and other acid gases and vapors.

Type E for use against sulfur dioxide and other acid gases and vapors.

Type K for use against ammonia and organic ammonia derivatives

Class P1 intended for use against mechanically generated particulates of sizes most commonly encountered in industry, e.g. asbestos, silica.

Class P2 intended for use against both mechanically and thermally generated particulates, e.g. metal fume.

Class P3 intended for use against all particulates containing highly toxic materials, e.g. beryllium.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required.

Use appropriate NIOSH-certified respirator based on informed professional judgement. In conditions where no reasonable estimate of exposure can be made, assume the exposure is in a concentration IDLH and use NIOSH-certified full face pressure demand SCBA with a minimum service life of 30 minutes, or a combination full facepiece pressure demand SAR with auxiliary self-contained air supply. Respirators provided only for escape from IDLH atmospheres shall be NIOSH-certified for escape from the atmosphere in which they will be used.

### ENGINEERING CONTROLS

■ Enclosed local exhaust ventilation is required at points of dust, fume or vapor generation.

HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapors.

Barrier protection or laminar flow cabinets should be considered for laboratory scale handling.

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.

Fume-hoods and other open-face containment devices are acceptable when face velocities of at least 1 m/s (200 feet/minute) are achieved.

Partitions, barriers, and other partial containment technologies are required to prevent migration of the material to uncontrolled areas. For non-routine emergencies maximum local and general exhaust are necessary. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Air Speed:
solvent, vapors, etc. evaporating from tank (in still air)	0.25-0.5 m/s (50-100 f/min.)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)
direct spray, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood-local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be

# Salicylic acid

sc-203374

## Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key: **EXTREME** **HIGH** **MODERATE** **LOW**

adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2.5 m/s (200-500 f/min.) for extraction of gases discharged 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

## Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

### PHYSICAL PROPERTIES

Solid.

Does not mix with water.

Sinks in water.

State	Divided solid	Molecular Weight	138.12
Melting Range (°F)	314.6 - 321.8	Viscosity	Not Applicable
Boiling Range (°F)	411.8 @ 2.67 kPa	Solubility in water (g/L)	Partly miscible
Flash Point (°F)	314.6 (TCC)	pH (1% solution)	2.4 (0.2%)
Decomposition Temp (°F)	Not available.	pH (as supplied)	Not applicable
Autoignition Temp (°F)	1013	Vapour Pressure (mmHG)	< 0.133 @ 20 C
Upper Explosive Limit (%)	Not available.	Specific Gravity (water=1)	1.443
Lower Explosive Limit (%)	1.1	Relative Vapor Density (air=1)	4.8
Volatile Component (%vol)	Not available.	Evaporation Rate	Not available

### APPEARANCE

White to light tan powder or crystals. Darkens on exposure to light and/or air over a long term. Odourless to slight phenolic odour. Slightly soluble and sinks in water. Soluble in alcohol, acetone, chloroform, ether and oils. Solubility increases in hot water or water with sodium phosphate, borax, alkali acetates or citrates. Sublimes at 76 C.

## Section 10 - CHEMICAL STABILITY

### CONDITIONS CONTRIBUTING TO INSTABILITY

- 
- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerization will not occur.

### STORAGE INCOMPATIBILITY

- - Avoid strong acids, bases.
- Avoid reaction with oxidizing agents.
- Salicylic acid
- reacts with strong oxidisers, organic nitrites (such as ethyl nitrite), iodine, iron salts, lead diacetate
  - is incompatible with sulfuric acid, alkalis, ammonia, aliphatic amines, alkanolamines, isocyanates, alkylene oxides, epichlorohydrin

For incompatible materials - refer to Section 7 - Handling and Storage.

## Section 11 - TOXICOLOGICAL INFORMATION

salicylic acid

### TOXICITY AND IRRITATION

■ unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

TOXICITY	IRRITATION
Oral (man) LDLo: 50 mg/kg*	Skin (rabbit): 500 mg/24h - Mild

# Salicylic acid

sc-203374

## Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
------------------------	---------	------	----------	-----

Oral (rat) LD50: 891 mg/kg

Eye (rabbit): 100 mg - SEVERE

Oral (rat) TDLo: 1400 mg/kg\*\* [\*BDH], [\*\*Extal]

Dermal (man) TDLo: 57 mg/kg

Intraperitoneal (Rat) LD50: 157 mg/kg

Oral (Mouse) LD50: 480 mg/kg

Intraperitoneal (Mouse) LD50: 300 mg/kg

Subcutaneous (Mouse) LD: 520 mg/kg

Intravenous (Mouse) LD50: 184 mg/kg

Oral (Cat) LD50: 400 mg/kg

Oral (Rabbit) LD50: 1300 mg/kg

■ Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

### For certain benzyl derivatives:

All members of this group (benzyl, benzoate and 2-hydroxybenzoate (salicylate) esters) contain a benzene ring bonded directly to an oxygenated functional group (aldehyde or ester) that is hydrolysed and/or oxidised to a benzoic acid derivative. As a stable animal metabolite, benzoic acid derivatives are efficiently excreted primarily in the urine. These reaction pathways have been reported in both aquatic and terrestrial species. The similarity of their toxicologic properties is a reflection their participation in these common metabolic pathways.

In general, members of this group are rapidly absorbed through the gastrointestinal tract, metabolised primarily in the liver, and excreted in the urine either unchanged or as conjugates of benzoic acid derivatives. At high doses, conjugation pathways (e.g., glycine) may be saturated; in which case, free benzoic acid is excreted unchanged. Absorption, distribution and excretion studies have been conducted several members of this group and structural relatives. These substances exhibit remarkably similar patterns of pharmacokinetics and metabolism. The benzyl, benzoate, and 2-hydroxybenzoate (salicylate) esters which comprise this category are hydrolysed to the corresponding alcohols and carboxylic acids. The benzyl alcohol and benzaldehyde derivatives are oxidised to the corresponding benzoic acid derivatives that are subsequently excreted unchanged or as glycine or glucuronic acid conjugates. If methoxy or phenolic functional groups are present on the benzene ring, additional minor metabolic options become available. O-demethylation yields the corresponding phenol that is subsequently excreted as the glucuronic acid or sulfate conjugates. At high dose levels, gut microflora may act to produce minor amounts of reduction metabolites.

Acute toxicity: Oral LD50 values ranged from 887 to greater than 5,000 mg/kg bw demonstrating the low to moderate toxicity of these compounds.

Repeat dose toxicity: Overall, numerous repeat-dose studies using various routes of exposure have been conducted in different animal species with members of this chemical category or their close structural relatives. It is important to note that all the benzyl derivatives in this category are eventually metabolised to a common metabolite, benzoic acid, and are rapidly excreted in the urine as benzoic acid or as its glycine, sulfate, or glucuronic acid conjugate. For this reason, the repeat-dose studies currently available provide adequate support for the safety of the benzyl derivatives. Moreover, the levels at which no adverse effects were reported were sufficiently high to accommodate any potential differences among the members of the category.

Reproductive toxicity: Several reproductive toxicity studies have been conducted with representatives of this group and produced no evidence of reproductive toxicity. As with the repeat-dose studies, the benzyl derivatives generally follow the similar metabolic pathways and the studies conducted provide an adequate database for this endpoint. In addition, the dose levels tested provide margins of safety large enough to accommodate any differences among the group.

Developmental toxicity: Representative substances from this group were tested for developmental toxicity with uniform results, and indicated no teratogenic potential in the absence of maternal toxicity. Again, the representative substances undergo similar metabolism to the entire benzyl derivative group and therefore, provide an adequate representation for this endpoint.

Genetic toxicity: Overall, in vitro and in vivo genotoxicity studies have been conducted with substances representing the structural characteristics of the benzyl category. The results of these studies were predominantly negative demonstrating a low order of genotoxic

# Salicylic acid

sc-203374

## Material Safety Data Sheet



The Power is Question

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
------------------------	---------	------	----------	-----

potential.. Limited positive and/or equivocal findings have been reported for 3 aldehydes and benzyl acetate, but, in most cases, other studies of the same endpoint with same test substance show no activity. Most importantly, in vivo studies on benzaldehyde derivatives and closely related benzyl esters have all yielded negative results. These negative in vivo genotoxicity assays are supported by the lack of tumorigenicity in chronic animal studies with representatives of this group.

Data available for more than 100 in vitro genotoxicity assays for 9 members of the category and five metabolic precursors or metabolites of benzyl derivatives indicate a low genotoxic potential for members of this chemical category

Equivocal results have been reported mainly for aromatic aldehydes in the MLA and ABS assays.

## Section 12 - ECOLOGICAL INFORMATION

Refer to data for ingredients, which follows:

SALICYLIC ACID:

■ log Pow (Verschuereen 1983):	2.21/2.26
■ BOD5:	0.95 (41%)
■ COD:	1.58 (100%)
■ ThOD:	1.623

■ For salicylic acid:

log Kow : 0.35-2.26

BOD5: 0.95,41%

COD : 1.58,100%

ThOD : 1.623

BOD = 141%, 5 days

Environmental fate:

Due to the chemical structure of salicylic acid volatilisation and bioconcentration are not expected to be important environmental fate processes. Biodegradation is expected to be the dominant removal mechanism of salicylic acid from soil and water. It may also undergo photochemical degradation in sunlit environmental media

In air, it is expected to exist in both the vapor and particulate phase. Vapor phase reaction with photochemically produced hydroxyl radicals may be important (estimated half-life of 1.2 days). Removal by wet and dry deposition can also occur..

This chemical is not likely to bioconcentrate.

Biodegradable

Ecotoxicity:

Daphnia EC50 (24 h): 180 mg/l

Algae EC50 (72 h): 60 mg/l

Dangerous to aquatic life in high concentrations.

■ For certain benzyl derivatives:

Environmental fate:

All members of this group (benzyl, benzoate and 2-hydroxybenzoate (salicylate) esters) contain a benzene ring bonded directly to an oxygenated functional group (aldehyde or ester) that is hydrolysed and/or oxidised to a benzoic acid derivative:

Photodegradation: The calculated half lives for hydroxyl radical reactions range from 4.7 to 64.5 hours. The calculated photodegradation half-lives for three benzaldehyde derivatives in this chemical category are in the narrow range from 4.7 hours for m-methoxy-p-hydroxybenzaldehyde to 7.2 hours for the less substituted derivative benzaldehyde. The relative half-lives reflect the increased reactivity of a phenolic OH group. The half-lives for the aldehydes are shorter than those for the corresponding benzyl and benzoate esters in this category (12.7 for methyl benzoate to 64.5 hours for methyl p-methylbenzoate). Generally, the carboxylate function of the ester is more stable to reaction with hydroxyl radicals than The calculated half lives for hydroxyl radical reactions range from 4.7 to 64.5 hours. The calculated photodegradation half-lives for three benzaldehyde derivatives in this chemical category are in the narrow range from 4.7 hours for m-methoxy-phydroxybenzaldehyde to 7.2 hours for the less substituted derivative benzaldehyde . The relative half-lives reflect the increased reactivity of a phenolic OH group. The half-lives for the aldehydes are shorter than those for the corresponding benzyl and benzoate esters in this category (12.7 for methyl benzoate to 64.5 hours for methyl p-methylbenzoate). Generally, the carboxylate function of the ester is more stable to reaction with hydroxyl radicals than is the aldehyde function. The presence of an aromatic phenol function capable of undergoing ready hydrogen abstraction of the phenolic hydroxyl group decreases predicted photodegradation half-lives. Therefore, the methyl, pentyl and benzyl esters of 2-hydroxybenzoic acid have calculated half-lives of 11.6, 7.6, and 7.4 hours, respectively

Stability in Water: Benzaldehydes in this group cannot hydrolyse. However, they are likely to be slowly oxidized to their corresponding acids. The calculated hydrolysis half-lives for esters range from 20 days at pH 8 and 198 days at pH 7 for benzyl acetate to 1.1 years at pH 8 and 10.8 years at pH 7 for methyl p-methylbenzoate. Benzyl acetate, like several other benzyl esters, was shown to be 50% hydrolysed in 2 hours at pH 7.5 in the presence of pancreatin in an in vitro simulation experiment . These esters are all expected to be readily hydrolysed in vivo.

Biodegradation: All are readily and ultimately biodegradable using a standard OECD 301B test or 301F protocol. The parent acid benzoic acid, its sodium salt, and 2-hydroxybenzoic acid were all readily biodegradable in a COD (chemical oxygen demand) test. Since hydrolysis of the esters and ready oxidation of the aldehydes yields corresponding acid derivatives, the data on benzoic acid, its sodium salt, and

# Salicylic acid

sc-203374

## Material Safety Data Sheet



The Power is Question

<b>Hazard Alert Code Key:</b>	<b>EXTREME</b>	<b>HIGH</b>	<b>MODERATE</b>	<b>LOW</b>
-------------------------------	----------------	-------------	-----------------	------------

2-hydroxybenzoic acid validate the observations that the aldehydes and esters in this chemical category are readily biodegradable.

### Ecotoxicity:

Experimental data indicate a low to moderate toxicity for the benzyl derivatives. Benzyl esters and 2-hydroxybenzoate esters (salicylates) exhibit higher acute toxicity to fish than do benzoate esters or benzaldehyde derivatives. Measured values for benzyl and salicylate esters are in the 1-5 mg/l range with salicylates being slightly more toxic. Benzoate ester and benzaldehyde derivatives exhibit 96-hour LC50 values above 10 mg/L

Benzaldehyde derivatives exhibit lower acute toxicity compared to the parent substance.

Fish LC50 (14-d): guppy 0.17 mg/l (benzaldehyde)

Fish LC50 (96 h): guppy 88-116 mg/l (m-methoxy-p-hydroxybenzaldehyde)

Fish LC50 (96 h): 13-23.5 mg/l (benzaldehyde, p-methoxybenzaldehyde, m-methoxy-p-hydroxybenzaldehyde; estimated values).

Acute toxicity for aquatic invertebrates parallels that for fish in the benzyl chemical category. Benzoate esters exhibit moderate experimental and calculated acute toxicity to invertebrates.

■ DO NOT discharge into sewer or waterways.

### Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
salicylic acid	LOW		LOW	HIGH

## Section 13 - DISPOSAL CONSIDERATIONS

### 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.
- Dispose of by: Burial in a licensed land-fill or Incineration in a licensed apparatus (after admixture with suitable combustible material)
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

## Section 14 - TRANSPORTATION INFORMATION

NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS: DOT, IATA, IMDG

## Section 15 - REGULATORY INFORMATION

**salicylic acid (CAS: 69-72-7) is found on the following regulatory lists;**

"Canada Domestic Substances List (DSL)", "Canada Ingredient Disclosure List (SOR/88-64)", "Canada Toxicological Index Service - Workplace Hazardous Materials Information System - WHMIS (English)", "Canada Toxicological Index Service - Workplace Hazardous Materials Information System - WHMIS (French)", "International Council of Chemical Associations (ICCA) - High Production Volume List", "OECD Representative List of High Production Volume (HPV) Chemicals", "US DOE Temporary Emergency Exposure Limits (TEELs)", "US EPA High Production Volume Program Chemical List", "US FDA Indirect Food Additives: Adhesives and Components of Coatings - Substances for Use Only as Components of Adhesives - Adhesives", "US Food Additive Database", "US Toxic Substances Control Act (TSCA) - Inventory"

# Salicylic acid

sc-203374

Material Safety Data Sheet



*The Power is Question*

Hazard Alert Code Key:

EXTREME

HIGH

MODERATE

LOW

## Section 16 - OTHER INFORMATION

### LIMITED EVIDENCE

- Skin contact may produce severe health damage\*.
- Cumulative effects may result following exposure\*.
- Possible skin sensitizer\*.

\* (limited evidence).

*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 mixture 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](http://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.

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

Issue Date: Nov-19-2008

Print Date: May-12-2010