Iron(III) chloride

sc-215192

Material Safety Data Sheet

Hazard Alert Code Key: EXTREME HIGH MODERATE LOW

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME
Iron(III) chloride

STATEMENT OF HAZARDOUS NATURE

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

SYNONYMS
Cl3-Fe, FeCl3, "ferric trichloride", "ferric perchloride", "iron chloride", "iron trichloride, anhydrous", "iron perchloride", "iron (III) chloride, anhydrous", "Flores Martis", "iron trichloride", "iron sesquichloride, solid", "ferric chloride, anhydrous", "iron chloride, solid", "ferric chloride solid, anhydrous", "anhydrous ferric chloride", "Ikon ferric chloride"

Section 2 - HAZARDS IDENTIFICATION

CHEMWATCH HAZARD RATINGS

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<th>Min</th>
<th>Max</th>
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<tr>
<td>Chronic:</td>
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CANADIAN WHMIS SYMBOLS
EMERGENCY OVERVIEW

RISK
Harmful if swallowed.
Contact with water liberates toxic gas.
Causes burns.
Risk of serious damage to eyes.

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.
- The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.
- Ingestion of acidic corrosives may produce burns around and in the mouth, the throat and esophagus. Immediate pain and difficulties in swallowing and speaking may also be evident. Swelling of the epiglottis may make it difficult to breathe which may result in suffocation. More severe exposure may result in vomiting blood and thick mucus, shock, abnormally low blood pressure, fluctuating pulse, shallow respiration and clammy skin, inflammation of stomach wall, and rupture of esophageal tissue. Untreated shock may eventually result in kidney failure. Severe cases may result in perforation of the stomach and abdominal cavity with consequent infection, rigidity and fever. There may be severe narrowing of the esophageal or pyloric sphincters; this may occur immediately or after a delay of weeks to years. There may be coma and convulsions, followed by death due to infection of the abdominal cavity, kidneys or lungs.
- Iron poisoning results in pain in the upper abdomen and vomiting, and is followed hours later by shock, in severe cases coma and death. Iron toxicity increases in proportion to their solubility in the gastrointestinal tract. There is often vomiting of blood due to dilation of capillaries and bleeding from the walls of the gastrointestinal system. A watery diarrhea can occur, often leading to cardiovascular collapse after fluid and mineral loss and there can be a relapse marked by profound metabolic acidosis after several hours of apparent recovery. There may also be liver damage. Symptoms of poisoning include metallic taste, restlessness, lethargy, loss of muscle tone, coma, pallor or cyanosis (blue-gray skin), fast and weak pulse, low blood pressure, hyperventilation, shock, vasomotor instability and cardiovascular collapse. There may be inflammation, swelling and bleeding from the lungs, convulsions, jaundice, low blood sugar, multiple blood clotting defects, kidney damage with absence of urine, damage to the pancreas, vascular damage, blood loss, shock and vascular collapse. Survivor can display stomach scarring, obstruction or narrowing of digestive tract sphincters, liver hardening or nervous system effects.

EYE
- The material can produce chemical burns to the eye following direct contact. Vapors or mists may be extremely irritating.
- If applied to the eyes, this material causes severe eye damage.
- Direct eye contact with acid corrosives may produce pain, tears, sensitivity to light and burns. Mild burns of the epithelia generally recover rapidly and completely. Severe burns produce long-lasting and possibly irreversible damage. The appearance of the burn may not be apparent for several weeks after the initial contact. The cornea may ultimately become deeply opaque resulting in blindness.

SKIN
- The material can produce chemical burns following direct contact with the skin.
- Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue.
- 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.

INHALED
- If inhaled, this material can irritate the throat and lungs of some persons.
- The material is not thought to produce adverse health effects following inhalation (as classified using animal models). Nevertheless, adverse effects have been produced following exposure of animals by at least one other route and the material may still produce health damage following entry through wounds, lesions or abrasions. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.
- Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue.
- 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.

CHRONIC HEALTH EFFECTS
- Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis.
- Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.
- Overexposure to respirable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may
include decreased vital lung capacity, chest infections
Repeated exposures, in an occupational setting, to high levels of fine-divided dusts may produce a condition known as pneumoconiosis which is the lodgement of any inhaled dusts in the lung irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50,000 inch), are present. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion (exertional dyspnea), increased chest expansion, weakness and weight loss. As the disease progresses the cough produces a stringy mucous, vital capacity decreases further and shortness of breath becomes more severe. Other signs or symptoms include altered breath sounds, diminished lung capacity, diminished oxygen uptake during exercise, emphysema and pneumothorax (air in lung cavity) as a rare complication.
Removing workers from possibility of further exposure to dust generally leads to halting the progress of the lung abnormalities. Where worker-exposure potential is high, periodic examinations with emphasis on lung dysfunctions should be undertaken.
Dust inhalation over an extended number of years may produce pneumoconiosis. Pneumoconiosis is the accumulation of dusts in the lungs and the tissue reaction in its presence. It is further classified as being of noncollagenous or collagenous types. Noncollagenous pneumoconiosis, the benign form, is identified by minimal stromal reaction, consists mainly of reticulin fibres, an intact alveolar architecture and is potentially reversible.
Chronic excessive intake of iron have been associated with damage to the liver and pancreas. People with a genetic disposition to poor control over iron are at an increased risk. Iron overload in men may lead to diabetes, joint inflammation, liver cancer, heart irregularities and problems with other organs.
Repeated or prolonged exposure to acids may result in the erosion of teeth, swelling and or ulceration of mouth lining. Irritation of airways to lung, with cough, and inflammation of lung tissue often occurs. Chronic exposure may inflame the skin or conjunctiva.

### Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

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<th>NAME</th>
<th>CAS RN</th>
<th>%</th>
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<td>&gt; 99</td>
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### Section 4 - FIRST AID MEASURES

**SWALLOWED**
- For advice, contact a Poisons Information Center or a doctor at once.
- Urgent hospital treatment is likely to be needed.
- If swallowed do NOT induce vomiting.
- If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
- Observe the patient carefully.
- Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.
- Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.
- Transport to hospital or doctor without delay.

**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.

**NOTES TO PHYSICIAN**
- For acute or short term repeated exposures to strong acids:
  - Airway problems may arise from laryngeal edema and inhalation exposure. Treat with 100% oxygen initially.
  - Respiratory distress may require cricothyroidotomy if endotracheal intubation is contraindicated by excessive swelling.
  - Intravenous lines should be established immediately in all cases where there is evidence of circulatory compromise.
  - Strong acids produce a coagulation necrosis characterized by formation of a coagulum (eschar) as a result of the dessicating action of
the acid on proteins in specific tissues.

INGESTION:
- Immediate dilution (milk or water) within 30 minutes post ingestion is recommended.
- Do not attempt to neutralize the acid since exothermic reaction may extend the corrosive injury.
- Be careful to avoid further vomit since re-exposure of the mucosa to the acid is harmful. Limit fluids to one or two glasses in an adult.
- Charcoal has no place in acid management.
- Some authors suggest the use of lavage within 1 hour of ingestion.

SKIN:
- Skin lesions require copious saline irrigation. Treat chemical burns as thermal burns with non-adherent gauze and wrapping.
- Deep second-degree burns may benefit from topical silver sulfadiazine.

EYE:
- Eye injuries require retraction of the eyelids to ensure thorough irrigation of the conjunctival cul-de-sacs. Irrigation should last at least 20-30 minutes. Do not use neutralizing agents or any other additives. Several liters of saline are required.
- Cycloplegic drops, (1% cyclopentolate for short-term use or 5% homatropine for longer term use) antibiotic drops, vasoconstrictive agents or artificial tears may be indicated dependent on the severity of the injury.
- Steroid eye drops should only be administered with the approval of a consulting ophthalmologist.

[Ellenhorn and Barceloux: Medical Toxicology]

Section 5 - FIRE FIGHTING MEASURES

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<th>Property</th>
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<td>Upper Explosive Limit (%)</td>
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<td>Specific Gravity (water=1)</td>
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<td>Lower Explosive Limit (%)</td>
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EXTINGUISHING MEDIA

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

FIRE FIGHTING

- Alert Emergency Responders 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 fire fighting procedures suitable for surrounding 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

- Non combustible.
- Not considered to be a significant fire risk.
- Acids may react with metals to produce hydrogen, a highly flammable and explosive gas.
- Heating may cause expansion or decomposition leading to violent rupture of rigid containers.
- May emit corrosive, poisonous fumes. May emit acrid smoke.

Decomposition may produce toxic fumes of: hydrogen chloride, metal oxides.

FIRE INCOMPATIBILITY

- None known.

PERSONAL PROTECTION

Glasses:
- Safety Glasses.
- Full face- shield.

Gloves:

Respirator:
- Particulate

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- Remove all ignition sources.
● Clean up all spills immediately.
● Avoid contact with skin and eyes.
● Control personal contact by using protective equipment.
● Use dry clean up procedures and avoid generating dust.
● Place in a suitable, labelled container for waste disposal.

MAJOR SPILLS

● Clear area of personnel and move upwind.
● Alert Emergency Responders 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.
● Consider evacuation.
● Stop leak if safe to do so.
● Contain spill with sand, earth or vermiculite.
● Collect recoverable product into labeled containers for recycling.
● Neutralize/decontaminate residue.
● Collect solid residues and seal in labeled drums for disposal.
● After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
● If contamination of drains or waterways occurs, advise emergency services.

PROTECTIVE ACTIONS FOR SPILL

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FOOTNOTES

1 PROTECTIVE ACTION ZONE is defined as the area in which people are at risk of harmful exposure. This zone assumes that random changes in wind direction confines the vapour plume to an area within 30 degrees on either side of the predominant wind direction, resulting in a crosswind protective action distance equal to the downwind protective action distance.  
2 PROTECTIVE ACTIONS should be initiated to the extent possible, beginning with those closest to the spill and working away from the site in the downwind direction. Within the protective action zone a level of vapour concentration may exist resulting in nearly all unprotected persons becoming incapacitated and unable to take protective action and/or incurring serious or irreversible health effects.
3 INITIAL ISOLATION ZONE is determined as an area, including upwind of the incident, within which a high probability of localised wind reversal may expose nearly all persons without appropriate protection to life-threatening concentrations of the material.
4 SMALL SPILLS involve a leaking package of 200 litres (55 US gallons) or less, such as a drum (jerrycan or box with inner containers). Larger packages leaking less than 200 litres and compressed gas leaking from a small cylinder are also considered "small spills". LARGE SPILLS involve many small leaking packages or a leaking package of greater than 200 litres, such as a cargo tank, portable tank or a "one-tonne" compressed gas cylinder.
6 IERG information is derived from CANUTEC - Transport Canada.

ACUTE EXPOSURE GUIDELINE LEVELS (AEGEL) (in ppm)

AEGEL 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.

AEGEL 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.

AEGEL 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.
- Avoid contact with moisture.
- 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.

RECOMMENDED STORAGE METHODS

- DO NOT use aluminum or galvanized containers.
- Check regularly for spills and leaks.
- Lined metal can, Lined metal pail/drum
- Plastic pail
- Polyliner drum
- Packing as recommended by manufacturer.
- Check all containers are clearly labeled and free from leaks.

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.

For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.):
- Removable head packaging;
- Cans with friction closures and
- low pressure tubes and cartridges may be used.

- Where combination packages are used, and the inner packages are of glass, porcelain or stoneware, there must be sufficient inert cushioning material in contact with inner and outer packages unless the outer packaging is a close fitting molded plastic box and the substances are not incompatible with the plastic.

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

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

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<th>Source</th>
<th>Material</th>
<th>TWA ppm</th>
<th>TWA mg/m³</th>
<th>STEL ppm</th>
<th>STEL mg/m³</th>
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<td>US ACGIH Threshold Limit Values (TLV)</td>
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**MATERIAL DATA**

**FERRIC CHLORIDE:**

- 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
- acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

The recommended TLV is thought to reduce the likelihood of respiratory irritation and skin irritation from exposure to aerosols and mists of soluble iron salts.

**PERSONAL PROTECTION**

Consult your EHS staff for recommendations

**EYE**

- Chemical goggles.
- Full face shield.
- Contact lenses pose a special hazard; soft lenses may absorb irritants and all lenses concentrate them.

**HANDS/FEET**

- Wear chemical protective gloves, eg. PVC.
- Wear safety footwear or safety gumboots, eg. Rubber.
- 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.

**OTHER**

- Overalls.
- PVC Apron.
- PVC protective suit may be required if exposure severe.
- Eyewash unit.
- Ensure there is ready access to a safety shower.

**RESPIRATOR**

<table>
<thead>
<tr>
<th>Protection Factor</th>
<th>Half-Face Respirator</th>
<th>Full-Face Respirator</th>
<th>Powered Air Respirator</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 x PEL</td>
<td>P1</td>
<td>-</td>
<td>PAPR-P1</td>
</tr>
<tr>
<td>50 x PEL</td>
<td>Air-line*</td>
<td>P2</td>
<td>PAPR-P2</td>
</tr>
<tr>
<td>100 x PEL</td>
<td>-</td>
<td>P3</td>
<td>-</td>
</tr>
<tr>
<td>100+ x PEL</td>
<td>-</td>
<td>Air-line**</td>
<td>PAPR-P3</td>
</tr>
</tbody>
</table>

* - 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
- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.
- If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered. Such protection might consist of:
  (a): particle dust respirators, if necessary, combined with an absorption cartridge;
  (b): filter respirators with absorption cartridge or canister of the right type;
  (c): fresh-air hoods or masks
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.

<table>
<thead>
<tr>
<th>Type of Contaminant:</th>
<th>Air Speed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)</td>
<td>1-2.5 m/s (200-500 f/min.)</td>
</tr>
<tr>
<td>grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).</td>
<td>2.5-10 m/s (500-2000 f/min.)</td>
</tr>
</tbody>
</table>

Within each range the appropriate value depends on:

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

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 adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 4-10 m/s (800-2000 f/min) for extraction of crusher dusts generated 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.
Mixes with water.
Corrosive.
Acid.
Contact with water liberates toxic gas.

<table>
<thead>
<tr>
<th>State</th>
<th>Divided solid</th>
<th>Molecular Weight</th>
<th>162.20</th>
</tr>
</thead>
<tbody>
<tr>
<td>Melting Range (°F)</td>
<td>572 approx.</td>
<td>Viscosity</td>
<td>Not Applicable</td>
</tr>
<tr>
<td>Boiling Range (°F)</td>
<td>599-606.2</td>
<td>Solubility in water (g/L)</td>
<td>Miscible</td>
</tr>
<tr>
<td>Flash Point (°F)</td>
<td>Not applicable</td>
<td>pH (1% solution)</td>
<td>1-2 approx.</td>
</tr>
<tr>
<td>Decomposition Temp (°F)</td>
<td>Not Available</td>
<td>pH (as supplied)</td>
<td>Not applicable</td>
</tr>
<tr>
<td>Autoignition Temp (°F)</td>
<td>Not available.</td>
<td>Vapor Pressure (mmHg)</td>
<td>0.975 @ 194 C</td>
</tr>
<tr>
<td>Upper Explosive Limit (%)</td>
<td>Not applicable</td>
<td>Specific Gravity (water=1)</td>
<td>2.90 @ 25 C</td>
</tr>
<tr>
<td>Lower Explosive Limit (%)</td>
<td>Not applicable</td>
<td>Relative Vapor Density (air=1)</td>
<td>Not available.</td>
</tr>
<tr>
<td>Volatile Component (%vol)</td>
<td>Not available</td>
<td>Evaporation Rate</td>
<td>Not available.</td>
</tr>
</tbody>
</table>

APPEARANCE
Black-brown solid, leaflets or plates. Very hygroscopic. Soluble in water, alcohol, glycerol, methanol, acetone and ether. In presence of moisture, is corrosive to most metals and alloys.
Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- Contact with alkaline material liberates heat

STORAGE INCOMPATIBILITY

- WARNING: Avoid or control reaction with peroxides. All transition metal peroxides should be considered as potentially explosive. For example transition metal complexes of alkyl hydroperoxides may decompose explosively.
- The pi-complexes formed between chromium(0), vanadium(0) and other transition metals (haloarene-metal complexes) and mono-or poly-fluorobenzene show extreme sensitivity to heat and are explosive.
- Avoid reaction with borohydrides or cyanoborohydrides
- Reacts with water or steam to produce toxic and corrosive fumes
- Avoid strong bases.
- Inorganic acids are generally soluble in water with the release of hydrogen ions. The resulting solutions have pH's of less than 7.0.
- Inorganic acids neutralize chemical bases (for example: amines and inorganic hydroxides) to form salts.
- Neutralization can generate dangerously large amounts of heat in small spaces.
- The dissolution of inorganic acids in water or the dilution of their concentrated solutions with additional water may generate significant heat.
- The addition of water to inorganic acids often generates sufficient heat in the small region of mixing to cause some of the water to boil explosively. The resulting "bumping" can spatter the acid.
- Inorganic acids react with active metals, including such structural metals as aluminum and iron, to release hydrogen, a flammable gas.
- Inorganic acids can initiate the polymerization of certain classes of organic compounds.
- Inorganic acids react with cyanide compounds to release gaseous hydrogen cyanide.
- Inorganic acids generate flammable and/or toxic gases in contact with dithiocarbamates, isocyanates, mercaptans, nitriles, nitriles, sulfides, and strong reducing agents. Additional gas-generating reactions occur with sulfites, nitriles, thiosulfates (to give H2S and SO3), dithionites (SO2), and even carbonates.
- Acids often catalyze (increase the rate of) chemical reactions.
- Metals and their oxides or salts may react violently with chlorine trifluoride. Chlorine trifluoride is a hypergolic oxidizer. It ignites on contact (without external source of heat or ignition) with recognized fuels - contact with these materials, following an ambient or slightly elevated temperature, is often violent and may produce ignition. The state of subdivision may affect the results.

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

Section 11 - TOXICOLOGICAL INFORMATION

FERRIC CHLORIDE

TOXICITY AND IRRITATION

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

<table>
<thead>
<tr>
<th>TOXICITY</th>
<th>IRRITATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral (rat) LD50: 450 mg/kg</td>
<td>Nil Reported</td>
</tr>
<tr>
<td>Oral (mouse) LD50: 895 mg/kg</td>
<td></td>
</tr>
</tbody>
</table>

- The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.
- Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergic 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 respiratory tract irritation, and result in damage to the lung including reduced lung function.
- 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.

Section 12 - ECOLOGICAL INFORMATION

Refer to data for ingredients, which follows:

FERRIC CHLORIDE:

- Daphnia magna EC50 (48hr.) (mg/l): 15 (96hr)
- Algae IC50 (72hr.) (mg/l): 1

- Prevent, by any means available, spillage from entering drains or watercourses.
- Although inorganic chloride ions are not normally considered toxic they can exist in effluents at acutely toxic levels (chloride >3000 mg/l).
The resulting salinity can exceed the tolerances of most freshwater organisms. Inorganic chlorine eventually finds its way into the aqueous compartment and as such is bioavailable. Incidental exposure to inorganic chloride may occur in occupational settings where chemicals management policies are improperly applied. The toxicity of chloride salts depends on the counter-ion (cation) present; that of chloride itself is unknown. Chloride toxicity has not been observed in humans except in the special case of impaired sodium chloride metabolism, e.g. in congestive heart failure. Healthy individuals can tolerate the intake of large quantities of chloride provided that there is a concomitant intake of fresh water.

Although excessive intake of drinking-water containing sodium chloride at concentrations above 2.5 g/litre has been reported to produce hypertension, this effect is believed to be related to the sodium ion concentration. Chloride concentrations in excess of about 250 mg/litre can give rise to detectable taste in water, but the threshold depends upon the associated cations. Consumers can, however, become accustomed to concentrations in excess of 250 mg/litre. No health-based guideline value is proposed for chloride in drinking-water.

In humans, 88% of chloride is extracellular and contributes to the osmotic activity of body fluids. The electrolyte balance in the body is maintained by adjusting total dietary intake and by excretion via the kidneys and gastrointestinal tract. Chloride is almost completely absorbed in normal individuals, mostly from the proximal half of the small intestine. Normal fluid loss amounts to about 1.5-2 liters/day, together with about 4 g of chloride per day. Most (90 - 95%) is excreted in the urine, with minor amounts in faeces (4-8%) and sweat (2%). Chloride increases the electrical conductivity of water and thus increases its corrosivity. In metal pipes, chloride reacts with metal ions to form soluble salts thus increasing levels of metals in drinking-water. In lead pipes, a protective oxide layer is built up, but chloride enhances galvanic corrosion. It can also increase the rate of pitting corrosion of metal pipes.

DO NOT discharge into sewer or waterways.

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>ferric chloride</td>
<td>HIGH</td>
<td>LOW</td>
<td>LOW</td>
<td>HIGH</td>
</tr>
</tbody>
</table>

GESAMP/EHS COMPOSITE LIST - GESAMP Hazard Profiles

Section 13 - DISPOSAL CONSIDERATIONS

US EPA Waste Number & Descriptions
A. General Product Information
Corrosivity characteristic: use EPA hazardous waste number D002 (waste code C)
Reactivity characteristic: use EPA hazardous waste number D003 (waste code R).

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 re-use 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.
- Treat and neutralize at an approved treatment plant.
- Treatment should involve: Mixing or slurrying in water Neutralization with soda-lime or soda-ash followed by: Burial in a licensed land-fill or Incineration in a licensed apparatus (after admixture with suitable combustible material)
Decontaminate empty containers with 5% aqueous sodium hydroxide or soda ash, followed by water. Observe all label safeguards until containers are cleaned and destroyed.

Section 14 - TRANSPORTATION INFORMATION

DOT:
Symbols: None  Hazard class or Division: 8
Identification Numbers: UN1773  PG: III
Label Codes: 8  Special provisions: IB8, IP3, T1, TP33
Packaging: Exceptions: 154  Packaging: Non-bulk: 213
Packaging: Exceptions: 154  Quantity limitations: Passenger aircraft/rail: 25 kg
Quantity Limitations: Cargo aircraft only: 100 kg  Vessel stowage: Location: A
Vessel stowage: Other: None

Hazardous materials descriptions and proper shipping names:
Ferric chloride, anhydrous

Air Transport IATA:
ICAO/IATA Class: 8  ICAO/IATA Subrisk: None
UN/ID Number: 1773  Packing Group: III
Special provisions: None

Air transport may be forbidden if this material is flammable, corrosive or toxic gases may be released under normal conditions of transport.

Shipping Name: FERRIC CHLORIDE, ANHYDROUS

Maritime Transport IMDG:
IMDG Class: 8  IMDG Subrisk: None
UN Number: 1773  Packing Group: III
EMS Number: F-A, S-B  Special provisions: None
Limited Quantities: 5 kg  Shipping Name: FERRIC CHLORIDE, ANHYDROUS

Section 15 - REGULATORY INFORMATION

REGULATIONS
ferric chloride (CAS: 7705-08-0,58694-80-7) is found on the following regulatory lists;
Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

- Cumulative effects may result following exposure*.
  * (limited evidence).

Ingredients with multiple CAS Nos

<table>
<thead>
<tr>
<th>Ingredient Name</th>
<th>CAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>ferric chloride</td>
<td>7705-08-0, 58694-80-7</td>
</tr>
</tbody>
</table>

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- 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.

- 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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Issue Date: Jan-31-2008
Print Date: Sep-9-2010