

# N-Methyl-N-propargylbenzylamine

sc-236062



The Power is Question

## Material Safety Data Sheet

Hazard Alert Code  
Key:

EXTREME

HIGH

MODERATE

LOW

## Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

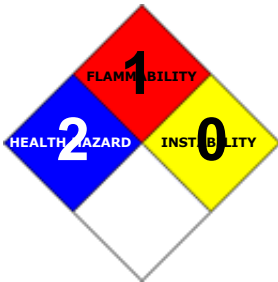
### PRODUCT NAME

N-Methyl-N-propargylbenzylamine

### 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

A monoamine oxidase inhibitor used in the treatment of resistant hypertension (antihypertensive agent) and is claimed to have a beneficial effect on the mood of the patient. may be given with a thiazide diuretic which reduces the oedema sometimes produced by paraglyline. CAUTION: Monoamine oxidase inhibitors may modify behaviour and state of alertness; exposed individuals taking charge of vehicles or machinery should be warned of the hazards

### SYNONYMS

C11-H13-N, C6H5CH2N(CH3)CH2CCH, N-methyl-N-propargylbenzylamine, N-methyl-N-propargylbenzylamine, benzylmethylpropynylamine, N-benzyl-N-methyl-2-propynylamine, N-benzyl-N-methyl-2-propynylamine, N-methyl-N-(2-propynyl)benzylamine, N-methyl-N-(2-propynyl)benzylamine, paraglyline, paragylamine, "monoamine oxidase inhibitor (MAOI) antihypertensive"

## Section 2 - HAZARDS IDENTIFICATION

### CANADIAN WHMIS SYMBOLS



### EMERGENCY OVERVIEW

#### RISK

Harmful if swallowed.

#### POTENTIAL HEALTH EFFECTS

#### ACUTE HEALTH EFFECTS

## SWALLOWED

- Accidental ingestion of the material may be damaging to the health of the individual.
- Monoamine oxidase inhibitors (MAOIs) cause low blood pressure, dizziness, drowsiness, weakness and tiredness, dry mouth, constipation, other digestive disturbances (including nausea and vomiting) and swelling. Other symptoms include agitation and tremors, sleep disturbance, blurred vision, difficulty urinating, convulsions, skin rash, loss of white blood cells, sexual disturbances and weight gain. There may be psychiatric changes such as elevated mood, confusion and hallucinations, and there can also be jaundice and death of liver tissue. Symptoms may be delayed for several hours. Other effects include increased blood pressure, spasticity and brisk reflexes, sweating, elevated temperature, dilated pupils, urinary retention, convulsions and peripheral collapse. Severe and often fatal increases in blood pressure can occur if the MAOI is given at the same time as certain foods including cheese, broad beans, game, certain alcoholic beverages and other foods containing certain proteins. These reactions can cause severe headache, bleeding to the brain and acute heart failure.

## EYE

- Although the liquid is not thought to be an irritant, direct contact with the eye may produce transient discomfort characterized by tearing or conjunctival redness (as with windburn).

## SKIN

- The liquid may be miscible with fats or oils and may degrease the skin, producing a skin reaction described as non-allergic contact dermatitis. The material is unlikely to produce an irritant dermatitis as described in EC Directives .
- Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.
- 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.

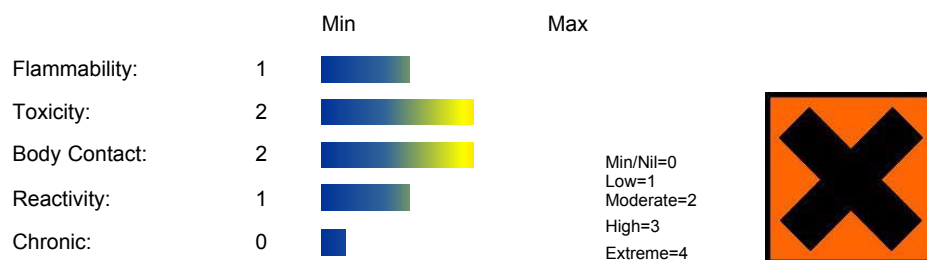
## INHALED

- The material is not thought to produce respiratory irritation (as classified using animal models). Nevertheless inhalation of vapors, fumes or aerosols, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress.
- Inhalation of vapors or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.

## CHRONIC HEALTH EFFECTS

### Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

#### HAZARD RATINGS



NAME	CAS RN	%
pargyline	555-57-7	>98

### Section 4 - FIRST AID MEASURES

#### SWALLOWED

- 
- 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.
- Seek medical advice.

#### EYE

- If this product comes in contact with the eyes:
  - Wash out immediately with fresh running water.
  - Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
  - If pain persists or recurs seek medical attention.
  - Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

#### SKIN

- If skin contact occurs:
  - Immediately remove all contaminated clothing, including footwear
  - Flush skin and hair with running water (and soap if available).
  - Seek medical attention in event of irritation.

#### 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 poisonings caused by monoamine oxidase inhibitors: The stomach should be emptied by aspiration and lavage and supportive therapy should be instituted. Special care should be taken with any drug therapy in view of the many hazards of monoamine oxidase inhibitor interactions. In particular metaminalol and other sympathomimetic agents are not suitable for the treatment of hypotension, which should be managed with intravenous fluids and, in severe shock, intravenous hydrocortisone. Chlorpromazine is indicated for restlessness and agitation and also to combat hyperthermia unresponsive to mechanical cooling. Morphine, pethidine, and other narcotic analgesics should be avoided. Hypertensive crises associated with overdose or with food or drug interaction should be treated urgently with slow intravenous injection with phentolamine mesylate (5 to 10 mg) repeated as necessary, or followed by intravenous infusion of phenoxybenzamine 100 mg in 200 ml of 5% dextrose solution given over 90 minutes. Pentolinium has also been recommended and chlorpromazine or tolazoline may be of value if more effective treatments are not available. Hemodialysis may be of value in severe poisonings. MARTINDALE: The Extra Pharmacopoeia, 28th Edition.

for poisons (where specific treatment regime is absent):

### BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary edema .
- Monitor and treat, where necessary, for shock.
- Anticipate seizures .
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.

### ADVANCED TREATMENT

- Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary edema.
- Hypotension with signs of hypovolemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994.

Readily absorbed from the gastrointestinal tract and excreted in the urine mainly in the form of metabolites.

## Section 5 - FIRE FIGHTING MEASURES

Vapour Pressure (mmHG):	Negligible
Upper Explosive Limit (%):	Not available
Specific Gravity (water=1):	0.944
Lower Explosive Limit (%):	Not available

### EXTINGUISHING MEDIA

- 
- Foam.
- Dry chemical powder.
- 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.
- May be violently or explosively reactive.
- Wear breathing apparatus plus protective gloves.
- 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

- 
- Combustible.
- Slight fire hazard when exposed to heat or flame.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
- On combustion, may emit toxic fumes of carbon monoxide (CO).
- May emit acrid smoke.
- Mists containing combustible materials may be explosive.

Combustion products include: carbon dioxide (CO<sub>2</sub>), nitrogen oxides (NO<sub>x</sub>), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

### FIRE INCOMPATIBILITY

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

### PERSONAL PROTECTION

Glasses:

Gloves:

Respirator:

Type A-P Filter of sufficient capacity

## Section 6 - ACCIDENTAL RELEASE MEASURES

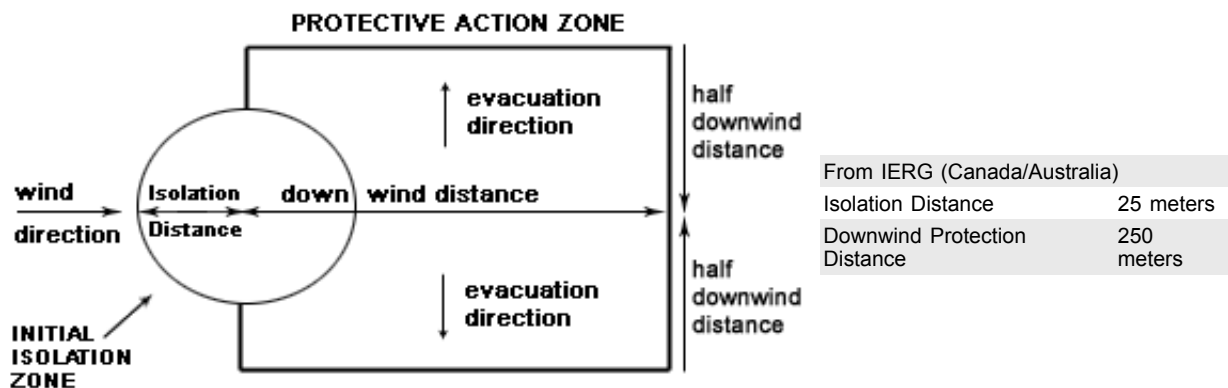
### MINOR SPILLS

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

### MAJOR SPILLS

- - Clear area of personnel and move upwind.
  - Alert Emergency Responders and tell them location and nature of hazard.
  - Wear breathing apparatus plus protective gloves.
  - Prevent, by any means available, spillage from entering drains or water course.
  - 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.
  - Wash area and prevent runoff into drains.
  - 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



### 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 (jerrican 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.

5 Guide 151 is taken from the US DOT emergency response guide book.

6 IERG information is derived from CANUTEC - Transport Canada.

### ACUTE EXPOSURE GUIDELINE LEVELS (AEG) (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.

### RECOMMENDED STORAGE METHODS

- Glass container.
- 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, there must be sufficient inert cushioning material in contact with inner and outer packages \* . - In addition, where inner packagings are glass and contain liquids of packing group I and II there must be sufficient inert absorbent to absorb any spillage \*. - \* 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

The following materials had no OELs on our records

- pargylene: CAS:555-57-7

## MATERIAL DATA

### PARGYLINE:

■ 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

■ 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

■ 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.

- 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

### RESPIRATOR

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

Breathing Zone Level ppm (volume)	Maximum Protection Factor	Half-face Respirator	Full-Face Respirator
1000	10	A-1 P	-
1000	50	-	A-1 P
5000	50	Airline*	-
5000	100	-	A-2 P
10000	100	-	A-3 P
	100+		Airline* *

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

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 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

Liquid.

Does not mix with water.

Floats on water.

State	Liquid	Molecular Weight	159.23
Melting Range (°F)	Not available	Viscosity	Not Available
Boiling Range (°F)	186.8- 190.4 (4 mm Hg)	Solubility in water (g/L)	Partly miscible
Flash Point (°F)	Not available	pH (1% solution)	Not applicable
Decomposition Temp (°F)	Not Available	pH (as supplied)	Not applicable
Autoignition Temp (°F)	Not available	Vapour Pressure (mmHG)	Negligible
Upper Explosive Limit (%)	Not available	Specific Gravity (water=1)	0.944
Lower Explosive Limit (%)	Not available	Relative Vapor Density (air=1)	Not available
Volatile Component (%vol)	Negligible	Evaporation Rate	Not available

### APPEARANCE

Clear colourless liquid; does not mix well with water.

## Section 10 - CHEMICAL STABILITY

### CONDITIONS CONTRIBUTING TO INSTABILITY

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

### STORAGE INCOMPATIBILITY

- 
- Avoid oxidizing agents, acids, acid chlorides, acid anhydrides.

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

## Section 11 - TOXICOLOGICAL INFORMATION

pargyline

## TOXICITY AND IRRITATION

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

TOXICITY	IRRITATION
Oral (rat) LD50: 300 mg/kg	Nil Reported
Intraperitoneal (rat) LD50: 142 mg/kg	
Oral (mouse) LD50: 680 mg/kg	
Intraperitoneal (mouse) LD50: 290 mg/kg	
Subcutaneous (mouse) LD50: 380 mg/kg	
Intravenous (mouse) LD50: 59 mg/kg	
Oral (dog) LD50: 175 mg/kg	
Intraperitoneal (monkey) LD50: 200 mg/kg	
Intraperitoneal (cat) LD50: 200 mg/kg	

Olfaction effects, lachrymation, changes in motor activity, respiratory tract changes, paternal effects recorded.

## Section 12 - ECOLOGICAL INFORMATION

Refer to data for ingredients, which follows:

PARGYLINE:

■ DO NOT discharge into sewer or waterways.

### Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
pargyline	HIGH		LOW	MED

## Section 13 - DISPOSAL CONSIDERATIONS

### Disposal Instructions

All waste must be handled in accordance with local, state and federal regulations.

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

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

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

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

DO NOT allow wash water from cleaning equipment to enter drains. Collect all wash water for treatment before disposal.

- Recycle wherever possible or consult manufacturer for recycling options.
- Consult Waste Management Authority for disposal.
- Bury or incinerate residue at an approved site.
- Recycle containers if possible, or dispose of in an authorized landfill.

## Section 14 - TRANSPORTATION INFORMATION



DOT:

Symbols:	None	Hazard class or Division:	6.1
Identification Numbers:	UN1851	PG:	III
Label Codes:	6.1	Special provisions:	None
Packaging: Exceptions:	153	Packaging: Non-bulk:	203
Packaging: Exceptions:	153	Quantity limitations: Passenger aircraft/rail:	5 L
Quantity Limitations: Cargo aircraft only:	5 L	Vessel stowage: Location:	C
Vessel stowage: Other:	40		

Hazardous materials descriptions and proper shipping names:

Medicine, liquid, toxic, n.o.s.

**Air Transport IATA:**

ICAO/IATA Class:	6.1	ICAO/IATA Subrisk:	None
UN/ID Number:	1851	Packing Group:	III
Special provisions:	A3		

Shipping Name: MEDICINE, LIQUID, TOXIC, N.O.S.(CONTAINS PARGYLINE)

**Maritime Transport IMDG:**

IMDG Class:	6.1	IMDG Subrisk:	None
UN Number:	1851	Packing Group:	III
EMS Number:	F-A,S-A	Special provisions:	221 223 944

Limited Quantities: 5 L

Shipping Name: MEDICINE, LIQUID, TOXIC, N.O.S.(contains pargyline)

## Section 15 - REGULATORY INFORMATION

**No data for pargyline (CAS: , 555-57-7)**

## Section 16 - OTHER INFORMATION

**LIMITED EVIDENCE**

■ Inhalation and/or skin contact may produce health damage\*.

\* (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: Jul-22-2008

Print Date:Apr-22-2010