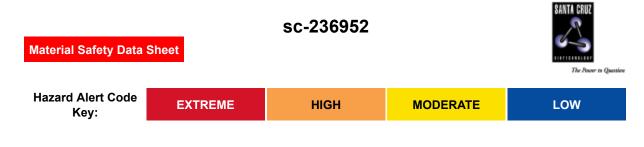
# Sulfamoxole



## Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

# PRODUCT NAME

Sulfamoxole

#### STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.





#### SUPPLIER

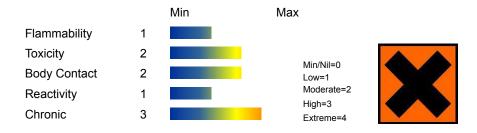
Santa Cruz Biotechnology, Inc. 2145 Delaware Avenue Santa Cruz, California 95060 800.457.3801 or 831.457.3800 **EMERGENCY** ChemWatch Within the US & Canada: 877-715-9305 Outside the US & Canada: +800 2436 2255 (1-800-CHEMCALL) or call +613 9573 3112

## SYNONYMS

C11-H13-N3-O3-S, "2-(p-aminobenzenesulfonamido)-4, 5-dimethyloxazole", "p-aminobenzenesulfonyl-2-amino-4, 5-dimethyloxazole", "2-(p-aminobenzolsulfonamido)-4, 5-dimethyloxazol", "4-amino-N-(4, 5-dimethyl-2-oxazolyl)benzenesulfonamide", "benzenesulfonamide, 4-amino-N-(4, 5-dimethyl-2-oxazolyl)-", "N(sup 1)-4, 5-dimethyl-2-oxazolyl)sulfanilamide", "N(sup 1)-(4, 5-dimethyloxazol-2-yl)sulfanilamide", "4, 5-dimethyl-2-sulfanilamidooxazole", "oxazole, 2-(p-aminophenylsulfonylamino)-4, 5-dimethyl-", SDMO, sulfadimethyloxazole, sulfamoxolum, Depomide, Justamil, Nuprin, Oxasulfa, Sulfabutin, Sulfano, Sulfavigor, Sulfmidil, Sulfune, Sulfuno, Tardamid, Tardamide, "antibacterial sulfonamide"

## Section 2 - HAZARDS IDENTIFICATION

## CHEMWATCH HAZARD RATINGS



## CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW RISK May cause SENSITISATION by skin contact.

## POTENTIAL HEALTH EFFECTS

## **ACUTE HEALTH EFFECTS**

#### SWALLOWED

Accidental ingestion of the material may be damaging to the health of the individual.

Sulfonamides and their derivatives can cause extensive kidney damage, and destroy red blood cells.

Overdose may cause an accumulation of acid in the blood or a diminished blood sugar level with confusion and coma resulting.

#### EYE

There is some evidence to suggest that this material can causeeye irritation and damage in some persons.

■ Eye drops with sulfonamides can cause local irritation, sensations of burning and stinging, blurred vision and loss of depth perception.

The conjunctiva and cornea may become inflamed, and the cornea and lens may become clouded.

#### SKIN

■ The material is not thought to produce adverse health effects or skin irritation following contact (as classified using animal models).

Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.

• 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 either adverse health effects or irritation of the respiratory tract following inhalation (as classified using animal models).

Nevertheless, adverse effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

■ 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

Skin contact with the material is more likely to cause a sensitization reaction in some persons compared to the general population.

There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment.

There is some evidence to provide a presumption that human exposure to the material may result in impaired fertility on the basis of some evidence in animal studies of impaired fertility in the absence of toxic effects, or evidence of impaired fertility occurring at around the same dose levels as other toxic effects but which is not a secondary non-specific consequence of other toxic effects.

Exposure to the material may cause concerns for humans owing to possible developmental toxic effects, on the basis that similar materials tested in appropriate animal studies provide some suspicion of developmental toxicity in the absence of signs of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not a secondary non-specific consequence of other toxic effects.

Prolonged oral treatment with sulfonamides has caused nausea, vomiting, diarrhea, abdominal pain, loss of appetite, inflammation of the mouth cavity, impaired folic acid absorption, exacerbation of porphyria, acidosis, liver damage with impaired blood clotting, jaundice and inflammation of the pancreas. Effects on the kidney include

blood and crystals in the urine, painful and frequent urination or lack of urine with nitrogen retention. Long term exposure to high dust concentrations may cause changes in lung function i.e. pneumoconiosis; caused by particles less than 0.5 micron penetrating and remaining in the lung.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS					
NAME	CAS RN	%			
sulfamoxole	729-99-7	>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.

## 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.

#### SKIN

If skin contact occurs

- Immediately remove all contaminated clothing, including footwear
- Flush skin and hair with running water (and soap if available).

## INHALED

- If dust is inhaled, remove from contaminated area.
- Encourage patient to blow nose to ensure clear passage of breathing.
- If irritation or discomfort persists seek medical attention.

#### NOTES TO PHYSICIAN

■ In cases of recent sulfonamide overdose the stomach should be emptied by aspiration and lavage. If kidney function is adequate, a saline purgative, such as sodium sulfate, 30 g in 250 ml water, may be given to promote peristalsis and elimination of sulfonamide in the urine may be assisted by giving alkalis, such as sodium bicarbonate and increasing fluid intake.

Half-life reported to be between 4.4 and 10.6 hours.

Section 5 - FIRE FIGHTING MEASURES				
Vapour Pressure (mmHG)	Negligible			
Upper Explosive Limit (%)	Not available.			
Specific Gravity (water=1)	Not available			
Lower Explosive Limit (%)	Not available			

## EXTINGUISHING MEDIA

- Foam.
- Dry chemical powder.

## FIRE FIGHTING

- Alert Emergency Responders and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.

## GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- Combustible solid which burns but propagates flame with difficulty.
- Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust

clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust may burn rapidly and fiercely if ignited.

Combustion products include carbon monoxide (CO), carbon dioxide (CO2), nitrogen oxides (NOx), sulfur oxides (SOx), 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.

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

## 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.

## Section 7 - HANDLING AND STORAGE

## PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.

Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source.

- Do NOT cut, drill, grind or weld such containers.
- In addition ensure such activity is not performed near full, partially empty or empty containers without

appropriate workplace safety authorisation or permit.

# **RECOMMENDED STORAGE METHODS**

Glass container.

- Polyethylene or polypropylene container.
- Check all containers are clearly labelled and free from leaks.
- STORAGE REQUIREMENTS
- Store in original containers.
- Keep containers securely sealed.

## Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

## EXPOSURE CONTROLS

Source	Material		TWA mg/m³	STEL mg/m³	Peak mg/m³	TWA F/CC	Notes
Canada - Ontario Occupational Exposure Limits	sulfamoxole (Particles (Insoluble or Poorly Soluble) Not Otherwise)		10 (I)				
Canada - British Columbia Occupational Exposure Limits	sulfamoxole (Particles (Insoluble or Poorly Soluble) Not Otherwise Classified (PNOC))		10 (N)				
Canada - Ontario Occupational Exposure Limits	sulfamoxole (Specified (PNOS) / Particules (insolubles ou peu solubles) non précisées par ailleurs)		3 (R)				
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	sulfamoxole (Particulates not otherwise regulated Respirable fraction)		5				
US - California Permissible Exposure Limits for Chemical Contaminants	sulfamoxole (Particulates not otherwise regulated Respirable fraction)		5				(n)
US - Oregon Permissible Exposure Limits (Z-1)	sulfamoxole (Particulates not otherwise regulated (PNOR) (f) Total Dust)	-	10				Bold print identifies substances for which the Oregon Permissible Exposure Limits (PELs) are different than the federal Limits. PNOR

			means "particles not otherwise regulated."
US - Michigan Exposure Limits for Air Contaminants	sulfamoxole (Particulates not otherwise regulated, Respirable dust)	5	
US - Oregon Permissible Exposure Limits (Z-1)	sulfamoxole (Particulates not otherwise regulated (PNOR) (f) Respirable Fraction)	5	Bold print identifies substances for which the Oregon Permissible Exposure Limits (PELs) are different than the federal Limits. PNOR means "particles not otherwise regulated."
US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants	sulfamoxole (Particulates not otherwise regulated (PNOR)(f)- Respirable fraction)	5	
Canada - Prince Edward Island Occupational Exposure Limits	sulfamoxole (Particles (Insoluble or Poorly Soluble) [NOS] Inhalable particles)	10	See Appendix B current TLV/BEI Book

# PERSONAL PROTECTION



#### RESPIRATOR

•Particulate. (AS/NZS 1716 & 1715, EN 1432000 & 1492001, ANSI Z88 or national equivalent) EYE

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

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], [AS/NZS 1336 or national equivalent]

#### HANDS/FEET

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 • 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, AS/NZS 2161.1 or national equivalent).

- 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, AS/NZS 2161.10.1 or national equivalent) 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, AS/NZS 2161.10.1 or national equivalent) 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. [AS/NZS 2210]
- Head covering.

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
- fluorocaoutchouc
- polyvinyl chloride

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

#### OTHER

- For quantities up to 500 grams a laboratory coat may be suitable.
- For quantities up to 1 kilogram a disposable laboratory coat or coverall of low permeability is recommended. Coveralls should be buttoned at collar and cuffs.
- For quantities over 1 kilogram and manufacturing operations, wear disposable coverall of low permeability and disposable shoe covers.
- For manufacturing operations, air-supplied full body suits may be required for the provision of advanced respiratory protection.
- Eye wash unit.
- Ensure there is ready access to an emergency shower.
- For Emergencies Vinyl suit

## ENGINEERING CONTROLS

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.

## Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

## PHYSICAL PROPERTIES

Solid. Does not mix with water.			
State	Divided solid	Molecular Weight	267.30
Melting Range (°F)	379- 381	Viscosity	Not Applicable
Boiling Range (°F)	Not available	Solubility in water (g/L)	Immiscible

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)	Not available
Lower Explosive Limit (%)	Not available	Relative Vapor Density (air=1)	Not Applicable
Volatile Component (%vol)	Negligible	Evaporation Rate	Not applicable

#### APPEARANCE

Crystalline powder; does not mix well with water (85 mg/100 ml).

## Section 10 - CHEMICAL STABILITY

#### CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.

#### STORAGE INCOMPATIBILITY

Avoid reaction with oxidizing agents.

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

#### Section 11 - TOXICOLOGICAL INFORMATION

sulfamoxole

#### TOXICITY AND IRRITATION

SULFAMOXOLE

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

TOXICITY

Oral (rat) LD50 >12500 mg/kg

Nil Reported

IRRITATION

Intraperitoneal (rat) LD50 2500 mg/kg

Oral (mouse) LD50 15200 mg/kg

Intraperitoneal (mouse) LD50 1800 mg/kg

Subcutaneous (mouse) LD50 1285 mg/kg

Intravenous (mouse) LD50 1000 mg/kg

Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's edema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type.

Convulsions, change in motor activity, dyspnea recorded.

#### Section 12 - ECOLOGICAL INFORMATION

#### No data

## 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.

## Section 14 - TRANSPORTATION INFORMATION

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

#### Section 15 - REGULATORY INFORMATION

## sulfamoxole (CAS: 729-99-7) is found on the following regulatory lists;

"Canada - British Columbia Occupational Exposure Limits", "Canada - Ontario Occupational Exposure Limits", "Canada - Prince Edward Island Occupational Exposure Limits", "Canada National Pollutant Release Inventory (NPRI)", "US - California Permissible Exposure Limits for Chemical Contaminants", "US - Michigan Exposure Limits for Air Contaminants", "US - Oregon Permissible Exposure Limits (Z-1)", "US - Tennessee Occupational Exposure Limits For Air Contaminants", "US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants"

## Section 16 - OTHER INFORMATION

## LIMITED EVIDENCE

- Ingestion may produce health damage\*.
- May produce discomfort of the eyes\*.
- Limited evidence of a carcinogenic effect\*.
- May affect fertility\*.
- May possibly be harmful to the foetus/ embryo\*.
- \* (limited evidence).

#### Denmark Advisory list for selfclassification of dangerous substances

Substance	CAS	Suggested codes
sulfamoxole	729- 99- 7	R52/53

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Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references. A list of reference resources used to assist the committee may be found at: www.chemwatch.net/references.

■ The (M)SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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