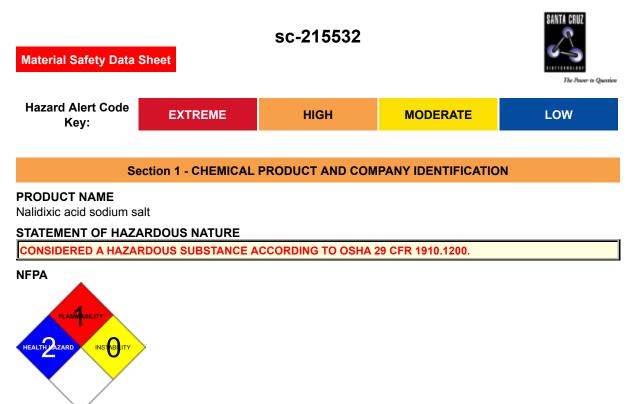
# Nalidixic acid sodium salt

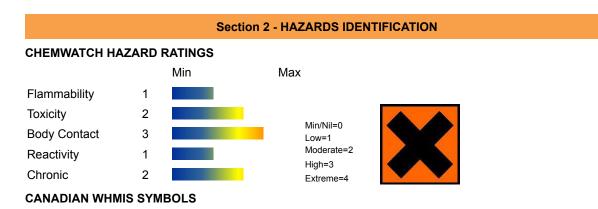


## SUPPLIER

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## SYNONYMS

C12H11N2NaO3, 1-Ethyl-1,4-dihydro-7-methyl-4-oxo-1,8-naphthyridine-3-carboxylic acid sodium salt





#### EMERGENCY OVERVIEW RISK

Harmful if swallowed. May cause SENSITISATION by inhalation and skin contact. Limited evidence of a carcinogenic effect. Possible risk of impaired fertility. Possible risk of harm to the unborn child. Possible risk of irreversible effects.

## 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.
EYE

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

■ Phototoxic agents such as sulfonamides can cause inflammation of the conjunctiva and cornea, and clouding. **SKIN** 

■ There is some evidence to suggest that this material can cause inflammation of the skin on contact in some persons.

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.

Exposure to this product can cause sensitization of skin under sunlight.

The product can reach the skin via the bloodstream if either swallowed or ingested.

## INHALED

■ The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models).

Nevertheless, adverse systemic 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.

If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures.

# **CHRONIC HEALTH EFFECTS**

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

Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population.

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

Ample evidence from experiments exists that there is a suspicionthis material directly reduces fertility.

Based on experience with animal studies, exposure to the material may result in toxic effects to the development of the foetus, at levels which do not cause significant toxic effects to the mother.

Laboratory (in vitro) and animal studies show, exposure to the material may result in a possible risk of irreversible effects, with the possibility of producing mutation.

Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.

Long term exposure to high dust concentrations may cause changes in lung function i.e. pneumoconiosis; caused by particles less than 0.5 micron penetrating and remaining in the lung. Prime symptom is breathlessness; lung shadows show on X-ray.

Exposure to small quantities may induce hypersensitivity reactions characterised by acute bronchospasm, hives (urticaria), deep dermal wheals (angioneurotic oedema), running nose (rhinitis) and blurred vision. Anaphylactic shock and skin rash (non-thrombocytopenic purpura) may occur. An individual may be predisposed to such anti-body mediated reaction if other chemical agents have caused prior sensitisation (cross-sensitivity).

| Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS |           |     |  |  |
|--|-----------|-----|--|--|
| NAME   | CAS RN    | %   |  |  |
| nalidixic acid sodium salt                           | 3374-05-8 | >95 |  |  |

## Section 4 - FIRST AID MEASURES

#### SWALLOWED

- IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.
- For advice, contact a Poisons Information Centre or a doctor.
- Urgent hospital treatment is likely to be needed.
- In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition.

### 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 Centre or a doctor, or for at least 15 minutes.
- Transport to hospital or doctor without delay.

#### 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 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

■ 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 oedema .

#### Treat symptomatically.

Nalidixic acid should be given with care to patients with damage of the central nervous system, to patients subject to convulsions and to those with impaired renal or hepatic function. Its use should be avoided in babies less than 3 months old or during the first trimester of pregnancy. May cause false positive reactions in urine tests for glucose using copper reduction methods.

Is readily absorbed from the gastro-intestinal tract. Plasma 1/2 life is about 90 minutes and about 90% is bound to

plasma protein. rapidly metabolised (mainly to hydroxynalidixic acid which also antibacterial activity). About 80% of the dose appears in the urine as the glucuronide conjugated nalidixic acid and its active metabolite.

### Section 5 - FIRE FIGHTING MEASURES

| Vapour Pressure (mmHG)     | Not applicable |
|----------------------------|----------------|
| Upper Explosive Limit (%)  | Not available  |
| Specific Gravity (water=1) | Not available  |
| Lower Explosive Limit (%)  | Not available  |

## **EXTINGUISHING MEDIA**

- There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

## **FIRE FIGHTING**

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves for fire only.
- Prevent, by any means available, spillage from entering drains or water courses.
- Use fire fighting procedures suitable for surrounding area.

## GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- Combustible solid which burns but propagates flame with difficulty; it is estimated that most organic dusts are combustible (circa 70%) - according to the circumstances under which the combustion process occurs, such materials may cause fires and / or dust explosions.
- 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 (420
  micron or less) may burn rapidly and fiercely if ignited particles exceeding this limit will generally not form
  flammable dust clouds.; once initiated, however, larger particles up to 1400 microns diameter will contribute to
  the propagation of an explosion.
- In the same way as gases and vapours, dusts in the form of a cloud are only ignitable over a range of concentrations; in principle, the concepts of lower explosive limit (LEL) and upper explosive limit (UEL).are applicable to dust clouds but only the LEL is of practical use; - this is because of the inherent difficulty of achieving homogeneous dust clouds at high temperatures (for dusts the LEL is often called the "Minimum Explosible Concentration", MEC)
- A dust explosion may release of large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people.

Combustion products include carbon monoxide (CO), carbon dioxide (CO2), nitrogen oxides (NOx), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

May emit corrosive fumes.

# FIRE INCOMPATIBILITY

• Avoid contamination with oxidising agents i.e. nitrates, oxidising 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.

## MAJOR SPILLS

Moderate hazard.

• CAUTION Advise personnel in area.

- Alert Emergency Services and tell them location and nature of hazard.
- Control personal contact by wearing protective clothing.
- Prevent, by any means available, spillage from entering drains or water courses.

## 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.

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 is suitable for laboratory quantities
- Packaging as recommended by manufacturer.
- Check that containers are clearly labelled.
- Tamper-proof containers.
- Polyethylene or polypropylene containers.

## 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.

# Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

# **EXPOSURE CONTROLS**

The following materials had no OELs on our records • nalidixic acid sodium salt CAS3374-05-8

## 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 sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.
- Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.
- 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
- 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]

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

## 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.

# **ENGINEERING CONTROLS**

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

HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapours. Barrier protection or laminar flow cabinets should be considered for laboratory scale handling.

When handling quantities up to 500 gram in either a standard laboratory with general dilution ventilation (e.g.

# Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

## PHYSICAL PROPERTIES

| Solid.<br>Does not mix with water. |                |                            |                 |
|------------------------------------|----------------|----------------------------|-----------------|
| State                              | Divided solid  | Molecular Weight           | 254.22          |
| Melting Range (°F)                 | Not available  | Viscosity                  | Not Applicable  |
| Boiling Range (°F)                 | Not applicable | Solubility in water (g/L)  | Partly miscible |
| Flash Point (°F)                   | Not applicable | pH (1% solution)           | Not available   |
| Decomposition Temp (°F)            | Not available  | pH (as supplied)           | Not applicable  |
| Autoignition Temp (°F)             | Not available  | Vapour Pressure (mmHG)     | Not applicable  |
| Upper Explosive Limit (%)          | Not available  | Specific Gravity (water=1) | Not available   |

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

# APPEARANCE

Crystalline solid; does not mix well with water. Odorless.

## Section 10 - CHEMICAL STABILITY

#### CONDITIONS CONTRIBUTING TO INSTABILITY

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

## STORAGE INCOMPATIBILITY

- Avoid strong acids, bases.
- Avoid reaction with oxidising agents

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

## Section 11 - TOXICOLOGICAL INFORMATION

nalidixic acid sodium salt

#### TOXICITY AND IRRITATION NALIDIXIC ACID SODIUM SALT

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

Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other irritants may aggravate symptoms. Allergy causing activity is due to interactions with proteins.

Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema.

Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure.

No significant acute toxicological data identified in literature search.

## 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.

- Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.

Otherwise:

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- Where possible retain label warnings and MSDS and observe all notices pertaining to the product.

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. In most instances the supplier of the material should be consulted.

- DO NOT allow wash water from cleaning or process equipment to enter drains.
- It may be necessary to collect all wash water for treatment before disposal.
- In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- Where in doubt contact the responsible authority.
- Recycle wherever possible.
- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- Dispose of by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or Incineration in a licenced apparatus (after admixture with suitable combustible material)
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

## Section 14 - TRANSPORTATION INFORMATION

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

## Section 15 - REGULATORY INFORMATION

## No data for nalidixic acid sodium salt (CAS: , 3374-05-8)

## **Section 16 - OTHER INFORMATION**

## LIMITED EVIDENCE

- Cumulative effects may result following exposure\*.
- May produce skin discomfort\*.
- Eye contact may produce serious damage\*.
- \* (limited evidence).

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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.

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