Bromotrichloromethane

sc-252520

Material Safety Data Sheet



Hazard Alert Code Key:

EXTREME

HIGH

MODERATE

LOW

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

Bromotrichloromethane

STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

NFPA



SUPPLIER

Santa Cruz Biotechnology, Inc. 2145 Delaware Avenue Santa Cruz, California 95060 800.457.3801 or 831.457.3800

EMERGENCY:

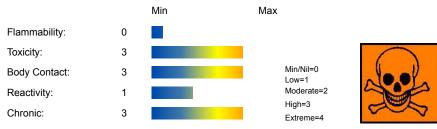
ChemWatch Within the US & Canada: 877-715-9305 Outside the US & Canada: +800 2436 2255 (1-800-CHEMCALL) or call +613 9573 3112

SYNONYMS

C-Br-C3, BrCCl3, "carbon bromotrichloride", "carbon trichlorobromide", monobromotrichloromethane, trichlorobromomethane, "trichloromethyl bromide"

Section 2 - HAZARDS IDENTIFICATION

CHEMWATCH HAZARD RATINGS



CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW

Forms very sensitive explosive metallic compounds. Toxic by inhalation, in contact with skin and if swallowed. Irritating to eyes, respiratory system and skin. Harmful to aquatic organisms.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

■ Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual.

FYF

■ This material can cause eye irritation and damage in some persons.

SKIN

- Skin contact with the material may produce toxic effects; systemic effectsmay result following absorption.
- This material can cause inflammation of the skin oncontact in some persons.
- The material may accentuate any pre-existing dermatitis condition.
- 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

- Inhalation of vapors or aerosols (mists, fumes), generated by the material during the course of normal handling, may produce toxic effects.
- The material can cause respiratory irritation in some persons.

The body's response to such irritation can cause further lung damage.

- Inhalation of vapours may cause drowsiness and dizziness.
- This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.
- Acute intoxication by halogenated aliphatic hydrocarbons appears to take place over two stages.

Signs of a reversible narcosis are evident in the first stage and in the second stage signs of injury to organs may become evident, a single organ alone is (almost) never involved.

■ Depression of the central nervous system is the most outstanding effect of most halogenated aliphatic hydrocarbons.

Inebriation and excitation, passing into narcosis, is a typical reaction.

■ In the case of iodised and brominated compounds, exposure effects cannot be described by simple central nervous system depression produced by other halogenated aliphatic hydrocarbons.

Headache, nausea, ataxia (loss of muscle co-ordination), tremors, speech difficulties, visual disturbances, convulsions, paralysis, delirium, mania and apathy are all evidence of additional effects.

CHRONIC HEALTH EFFECTS

■ Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

There is some evidence that human exposure to the material may result in developmental toxicity. This evidence is based on animal studies where effects have been observed in the absence of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not secondary non-specific consequences of the other toxic effects.

Chronic intoxication with ionic bromides, historically, has resulted from medical use of bromides but not from environmental or occupational exposure; depression, hallucinosis, and schizophreniform psychosis can be seen in the absence of other signs of intoxication. Bromides may also induce sedation, irritability, agitation, delirium, memory loss, confusion, disorientation, forgetfulness (aphasias), dysarthria, weakness, fatigue, vertigo, stupor, coma, decreased appetite, nausea and vomiting, diarrhoea, hallucinations, an acne like rash on the face, legs and trunk, known as bronchoderma (seen in 25-30% of case involving bromide ion), and a profuse discharge from the nostrils (coryza). Ataxia and generalised hyperreflexia have also been observed. Correlation of neurologic symptoms with blood levels of bromide is inexact. The use of substances such as brompheniramine, as antihistamines, largely reflect current day usage of bromides; ionic bromides have been largely withdrawn from therapeutic use due to their toxicity. Several cases of foetal abnormalities have been described in mothers who took large doses of bromides during pregnancy.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME CAS RN %

bromotrichloromethane 75-62-7 >98

Section 4 - FIRST AID MEASURES

SWALLOWED

· IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. · Where Medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:. · Avoid giving milk or oils. · Avoid giving alcohol.

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.

SKIN

■ If skin or hair contact occurs: · Quickly but gently, wipe material off skin with a dry, clean cloth. · Immediately remove all contaminated clothing, including footwear.

INHALED

· If fumes or combustion products are inhaled remove from contaminated area. · Lay patient down. Keep warm and rested.

NOTES TO PHYSICIAN

■ Treat symptomatically.

for intoxication due to Freons/ Halons;

A: Emergency and Supportive Measures

- · Maintain an open airway and assist ventilation if necessary
- Treat coma and arrhythmias if they occur. Avoid (adrenaline) epinephrine or other sympathomimetic amines that may precipitate ventricular arrhythmias. Tachyarrhythmias caused by increased myocardial sensitization may be treated with propranolol, 1-2 mg IV or esmolol 25-100 microgm/kg/min IV.

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.

Section 5 - FIRE FIGHTING MEASURES				
Vapor Pressure (mmHg):	38.328 @ 25 C			
Upper Explosive Limit (%):	Not available			
Specific Gravity (water=1):	2.012			
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 full body protective clothing with breathing apparatus.

When any large container (including road and rail tankers) is involved in a fire,

consider evacuation by 800 metres in all directions.

GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- Combustion products include: carbon dioxide (CO2), hydrogen chloride, phosgene, other pyrolysis products typical of burning organic material.
- · Non combustible.
- · Not considered to be a significant fire risk.
- · Heating may cause expansion or decomposition leading to violent rupture of containers.
- · May emit corrosive, 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:

Chemical goggles.

Gloves:

Respirator:

Type A Filter of sufficient capacity

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- · Remove all ignition sources.
- · Clean up all spills immediately.

MAJOR SPILLS

- · Clear area of personnel and move upwind.
- · Alert Emergency Responders and tell them location and nature of hazard.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- · DO NOT allow clothing wet with material to stay in contact with skin.
- · Avoid all personal contact, including inhalation.
- · Wear protective clothing when risk of exposure occurs.

RECOMMENDED STORAGE METHODS

- DO NOT use aluminum or galvanized containers.
- · Lined metal can, Lined metal pail/drum
- · Plastic pail.

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.

All inner and sole packagings for substances that have been assigned to Packaging Groups I or II on the basis of inhalation toxicity criteria, must be hermetically sealed.

STORAGE REQUIREMENTS

- · Store in original containers.
- · Store at room temperature.
- · Keep containers securely sealed.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

• bromotrichloromethane: CAS:75-62-7

PERSONAL PROTECTION









RESPIRATOR

•Type A Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

FYF

- · Safety glasses with side shields.
- · Chemical goggles.

HANDS/FEET

■ Wear chemical protective gloves, eg. PVC.

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.

OTHER

- · Overalls.
- · Eyewash unit.

ENGINEERING CONTROLS

■ Local exhaust ventilation usually required. If risk of overexposure exists, wear an approved respirator.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

I iauid

Does not mix with water.

Sinks in water.

Toxic or noxious vapours/gas.

reme or repouter gue.			
State	Liquid	Molecular Weight	198.28
Melting Range (°F)	21	Viscosity	Not available
Boiling Range (°F)	221	Solubility in water (g/L)	Immiscible
Flash Point (°F)	None	pH (1% solution)	Not applicable
Decomposition Temp (°F)	Not available	pH (as supplied)	Not applicable
Autoignition Temp (°F)	Not available	Vapor Pressure (mmHg)	38.328 @ 25 C
Upper Explosive Limit (%)	Not available	Specific Gravity (water=1)	2.012
Lower Explosive Limit (%)	Not available	Relative Vapor Density (air=1)	6.85
Volatile Component (%vol)	100	Evaporation Rate	Fast

APPEARANCE

Colourless to yellow liquid; does not mix with water.

Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- $\cdot \ \mathsf{Presence} \ \mathsf{of} \ \mathsf{incompatible} \ \mathsf{materials}.$
- · Product is considered stable.

STORAGE INCOMPATIBILITY

- Haloalkanes:
- · are highly reactive:some of the more lightly substituted lower members are highly flammable; the more highly substituted may be used as fire suppressants, not always with the anticipated results.
- may react with the lighter divalent metals to produce more reactive compounds analogous to Grignard reagents.
- \cdot may produce explosive compounds following prolonged contact with metallic or other azides
- · may react on contact with potassium or its alloys although apparently stable on contact with a wide rage of halocarbons, reaction products may be shock-sensitive and may explode with great violence on light impact; severity generally increases with the degree of halocarbon substitution and potassium-sodium alloys give extremely sensitive mixtures .

 BRETHERICK L.: Handbook of Reactive Chemical Hazards
- · react with metal halides and active metals, eg. sodium (Na), potassium (K), lithium (Li),calcium (Ca), zinc (Zn), powdered aluminium (Al) and aluminium alloys, magnesium (Mg) and magnesium alloys.
- may react with brass and steel.
- · may react explosively with strong oxidisers
- may degrade rubber, and plastics such as methacrylate polymers, polyethylene and polystyrene, paint and coatings.

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

Section 11 - TOXICOLOGICAL INFORMATION

bromotrichloromethane

TOXICITY AND IRRITATION

BROMOTRICHLOROMETHANE:

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

TOXICITY IRRITATION

Intraperitoneal (rat) LD50: 119 mg/kg Nil Reported

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

Somnolence recorded.

CARCINOGEN

Bromotrichloromethane	US EPA Carcinogens Listing	Carcinogenicity	D
Bromotrichloromethane	US ACGIH Threshold Limit Values (TLV) - Carcinogens	Carcinogen Category	D
BROMINE COMPOUNDS (ORGANIC OR INORGANIC)	US Environmental Defense Scorecard Suspected Carcinogens	Reference(s)	P65-MC
bromotrichloromethane	US - Maine Chemicals of High Concern List	Carcinogen	D

Section 12 - ECOLOGICAL INFORMATION

Harmful to aquatic organisms.

This material and its container must be disposed of as hazardous waste.

Ecotoxicity

Persistence: Persistence: Air Bioaccumulation Mobility

Water/Soil

bromotrichloromethane HIGH No Data
Available LOW HIGH

Section 13 - DISPOSAL CONSIDERATIONS

Disposal Instructions

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

| Puncture containers to prevent re-use and bury at an authorized landfill.

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

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

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

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. 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.

Section 14 - TRANSPORTATION INFORMATION

DOT:

Symbols: None Hazard class or Division: 6.1 Identification Numbers: UN2810 PG: II Label Codes: 6.1 Special provisions: IB2, T11, TP2. TP13.

TP27

Packaging: Exceptions: 153 Packaging: Non- bulk: 202

Packaging: Exceptions: 153 Quantity limitations: 5 L

Passenger aircraft/rail:

Quantity Limitations: Cargo 60 L Vessel stowage: Location: B

aircraft only:

Vessel stowage: Other: 40

Hazardous materials descriptions and proper shipping names:

Toxic, liquids, organic, n.o.s. **Air Transport IATA:**

UN/ID Number: 2810 Packing Group: II

Special provisions: A3

Cargo Only

Packing Instructions: 662 Maximum Qty/Pack: 60 L Passenger and Cargo Passenger and Cargo Packing Instructions: Y641 Maximum Qty/Pack: 5 L

Passenger and Cargo Limited Quantity Passenger and Cargo Limited Quantity

Packing Instructions: 654 Maximum Qtv/Pack: 1 L

Shipping Name: TOXIC LIQUID, ORGANIC, N.O.S. *(CONTAINS

BROMOTRICHLOROMETHANE)

Maritime Transport IMDG:

IMDG Class: 6.1 IMDG Subrisk: None
UN Number: 2810 Packing Group: II

EMS Number: F-A,S-A Special provisions: 274

Limited Quantities: 100 ml

Shipping Name: TOXIC LIQUID, ORGANIC, N.O.S.(contains bromotrichloromethane)

Section 15 - REGULATORY INFORMATION

bromotrichloromethane (CAS: 75-62-7) is found on the following regulatory lists;

"Canada Domestic Substances List (DSL)", "US DOE Temporary Emergency Exposure Limits (TEELs)", "US EPA Carcinogens Listing", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory"

Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

- Cumulative effects may result following exposure*.
- May be harmful to the foetus/ embryo*.
- Repeated exposure potentially causes skin dryness and cracking*.
- Vapours potentially cause drowsiness and dizziness*.
- * (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. 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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