

# DENTSPLY DUCERA-LAY SATURATION LIQUID

ChemWatch Material Safety Data Sheet  
Issue Date: Thu 23-Sep-2004

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## Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

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### PRODUCT NAME

DENTSPLY DUCERA-LAY SATURATION LIQUID

### SYNONYMS

! 09/02

### PROPER SHIPPING NAME

N-PROPANOL

### PRODUCT USE

For use in dental restorations.

### SUPPLIER

Company: Dentsply (Australia) Pty Ltd (ABN: 15 004 290 322)  
Address:  
11-21 Gilby Road  
Mount Waverley  
VIC, 3149  
AUS  
Telephone: +61 03 9538 8240  
Emergency Tel: 0413 830 239  
Fax: 03 9538 8260

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## Section 2 - HAZARDS IDENTIFICATION

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### STATEMENT OF HAZARDOUS NATURE

**HAZARDOUS SUBSTANCE. DANGEROUS GOODS.**

According to the Criteria of NOHSC, and the ADG Code.

### POISONS SCHEDULE

None

### RISK

Highly flammable.  
Harmful if swallowed.  
Risk of serious damage to eyes.  
HARMFUL-May cause lung damage if swallowed.  
Vapours may cause drowsiness and dizziness.  
Inhalation and/or skin contact may produce health damage\*.  
Cumulative effects may result following exposure\*.  
May produce discomfort of the respiratory system and skin\*.

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## Section 2 - HAZARDS IDENTIFICATION ...

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\* (limited evidence)

### SAFETY

Keep away from sources of ignition. No smoking.  
Do not breathe gas/fumes/vapour/spray.  
Use only in well ventilated areas.  
Keep container in a well ventilated place.  
Do not empty into drains.  
Keep container tightly closed.  
Take off immediately all contaminated clothing.  
If you feel unwell contact Doctor or Poisons Information Centre. (Show the label if possible).

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## Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

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NAME	CAS RN	%
n-propanol	71-23-8	>60

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## Section 4 - FIRST AID MEASURES

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### SWALLOWED

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

### EYE

If this product comes in contact with the eyes:

- Immediately hold eyelids apart and flush the eye continuously with running water.
- Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
- Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.
- Transport to hospital or doctor without delay.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

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## Section 4 - FIRST AID MEASURES ...

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### 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

To treat poisoning by the higher aliphatic alcohols:

- Gastric lavage with copious amounts of water.
- It may be beneficial to instill 60 ml of mineral oil into the stomach.
- Oxygen and artificial respiration as needed.
- Electrolyte balance: it may be useful to start 500 ml. M/6 sodium bicarbonate intravenously but maintain a cautious and conservative attitude toward electrolyte replacement unless shock or severe acidosis threatens.
- To protect the liver, maintain carbohydrate intake by intravenous infusions of glucose.
- Haemodialysis if coma is deep and persistent. [GOSSELIN, SMITH HODGE: Clinical Toxicology of Commercial Products, Ed 5)

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### BASIC TREATMENT

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- 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 shock.
- Monitor and treat, where necessary, for pulmonary oedema.
- Anticipate and treat, where necessary, for 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.
- Give activated charcoal.

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### ADVANCED TREATMENT

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- 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 hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- If the patient is hypoglycaemic (decreased or loss of consciousness, tachycardia, pallor, dilated pupils, diaphoresis and/or dextrose strip or glucometer readings below 50 mg), give 50% dextrose.

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## Section 4 - FIRST AID MEASURES ...

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- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

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## EMERGENCY DEPARTMENT

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- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
  - Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
  - Acidosis may respond to hyperventilation and bicarbonate therapy.
  - Haemodialysis might be considered in patients with severe intoxication.
  - Consult a toxicologist as necessary. BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994
- Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

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## Section 5 - FIRE FIGHTING MEASURES

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### EXTINGUISHING MEDIA

- Alcohol stable foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog - Large fires only.

### FIRE FIGHTING

- Alert Fire Brigade 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.
- Consider evacuation (or protect in place).
- Fight fire from a safe distance, with adequate cover.
- If safe, switch off electrical equipment until vapour fire hazard removed.
- Use water delivered as a fine spray to control the fire and cool adjacent area.
- Avoid spraying water onto liquid pools.
- Do not approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.

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## Section 5 - FIRE FIGHTING MEASURES ...

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- If safe to do so, remove containers from path of fire.
- When any large container (including road and rail tankers) is involved in a fire, consider evacuation by 1000 metres in all directions.

### FIRE/EXPLOSION HAZARD

- Hot organic vapours or mist are capable of sudden spontaneous combustion when mixed with air even at temperatures below their published autoignition temperatures.
- The temperature of ignition decreases with increasing vapour volume and vapour/air contact times and is influenced by pressure change.
- Ignition may occur under elevated-temperature process conditions especially in processes performed under vacuum subjected to sudden ingress of air or in processes performed at elevated pressure, where sudden escape of vapours or mists to the atmosphere occurs.
- Liquid and vapour are highly flammable.
- Severe fire hazard when exposed to heat, flame and/or oxidisers.
- Vapour may travel a considerable distance to source of ignition.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
- On combustion, may emit toxic fumes of carbon monoxide (CO).  
Combustion products include  
carbon dioxide (CO<sub>2</sub>)  
other pyrolysis products typical of burning organic material

### FIRE INCOMPATIBILITY

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

### HAZCHEM

2[Y]E

### Personal Protective Equipment

PERSONAL PROTECTION EQUIPMENT  
Breathing apparatus.  
Chemical splash suit.

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## Section 6 - ACCIDENTAL RELEASE MEASURES

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### EMERGENCY PROCEDURES

#### MINOR SPILLS

- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb small quantities with vermiculite or other absorbent material.

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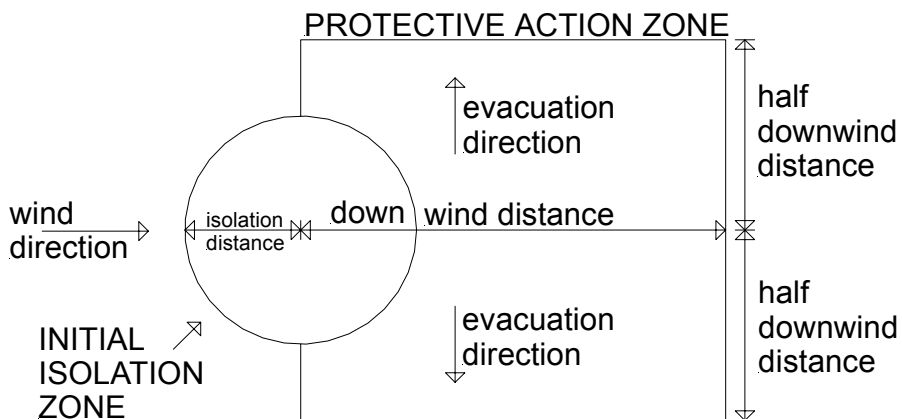
## Section 6 - ACCIDENTAL RELEASE MEASURES ...

- Wipe up.
- Collect residues in a flammable waste container.

### MAJOR SPILLS

- Clear area of personnel and move upwind.
- Alert Fire Brigade 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.
- Consider evacuation (or protect in place).
- No smoking, naked lights or ignition sources.
- Increase ventilation.
- Stop leak if safe to do so.
- Water spray or fog may be used to disperse /absorb vapour.
- Contain spill with sand, earth or vermiculite.
- Use only spark-free shovels and explosion proof equipment.
- Collect recoverable product into labelled containers for recycling.
- Absorb remaining product with sand, earth or vermiculite.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise emergency services.

### PROTECTIVE ACTIONS FOR SPILL



From IERG (Canada/Australia)

Isolation Distance	50 metres
Downwind Protection Distance	300 metres
IERG Number	16

### 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

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## Section 6 - ACCIDENTAL RELEASE MEASURES ...

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- 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 129 is taken from the US DOT emergency response guide book.
  - 6 IERG information is derived from CANUTEC - Transport Canada.

**Personal Protective Equipment advice is contained in Section 8 of the MSDS.**

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## Section 7 - HANDLING AND STORAGE

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### 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.
  - Avoid smoking, naked lights, heat or ignition sources.
  - When handling, DO NOT eat, drink or smoke.
  - Vapour may ignite on pumping or pouring due to static electricity.
  - DO NOT use plastic buckets.
  - Earth and secure metal containers when dispensing or pouring product.
  - Use spark-free tools when handling.
  - Avoid contact with incompatible materials.
  - Keep containers securely sealed.
  - Avoid physical damage to containers.
  - Always wash hands with soap and water after handling.
  - Work clothes should be laundered separately.
  - 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.
- DO NOT allow clothing wet with material to stay in contact with skin

### SUITABLE CONTAINER

Packing as supplied by manufacturer. Plastic containers may only be used if approved for flammable liquid. Check that containers are clearly labelled and free from leaks.

- For low viscosity materials (i) : Drums and jerry cans must be of the non-removable head type. (ii) : Where a can is to be used as an inner package, the can must have a screwed enclosure.

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## Section 7 - HANDLING AND STORAGE ...

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- For materials with a viscosity of at least 2680 cSt. (23 deg. C)
- For manufactured product having a viscosity of at least 250 cSt. (23 deg. C)
- Manufactured product that requires stirring before use and having a viscosity of at least 20 cSt (25 deg. C)
  - (i) : Removable head packaging;
  - (ii) : Cans with friction closures and
  - (iii) : 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 there must be sufficient inert absorbent to absorb any spillage, unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.

### STORAGE INCOMPATIBILITY

- Avoid oxidising agents, acids, acid chlorides, acid anhydrides.  
Incompatible with aluminium. DO NOT heat above 49 deg. C. in aluminium equipment.

### STORAGE REQUIREMENTS

- Store in original containers in approved flame-proof area.
- No smoking, naked lights, heat or ignition sources.
- DO NOT store in pits, depressions, basements or areas where vapours may be trapped.
- Keep containers securely sealed.
- Store away from incompatible materials in a cool, dry well ventilated area.
- Protect containers against physical damage and check regularly for leaks.
- Observe manufacturer's storing and handling recommendations.

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## Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

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### EXPOSURE CONTROLS

#### ODOUR SAFETY FACTOR (OSF)

OSF=77 (n-PROPANOL)

Exposed individuals are reasonably expected to be warned, by smell, that the Exposure Standard is being exceeded.

Odour Safety Factor (OSF) is determined to fall into either Class A or B.

The Odour Safety Factor (OSF) is defined as:

OSF= Exposure Standard (TWA) ppm/ Odour Threshold Value (OTV) ppm

Classification into classes follows:

Class	OSF	Description
A	550	Over 90% of exposed individuals are aware by smell that the Exposure Standard (TLV-TWA for example) is being reached, even when distracted by working

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## Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION ...

		activities
B	26-550	As "A" for 50-90% of persons being distracted
C	1-26	As "A" for less than 50% of persons being distracted
D	0.18-1	10-50% of persons aware of being tested perceive by smell that the Exposure Standard is being reached
E	<0.18	As "D" for less than 10% of persons aware of being tested

### EXPOSURE STANDARDS FOR MIXTURE

"Worst Case" computer-aided prediction of vapour components/concentrations:

Composite Exposure Standard for Mixture (TWA) (mg/m<sup>3</sup>): 492 mg/m<sup>3</sup>

If the breathing zone concentration of ANY of the components listed below is exceeded, "Worst Case" considerations deem the individual to be overexposed.

Component Breathing Zone ppm Breathing Zone mg/m<sup>3</sup> Mixture Conc: (%)

Component	Breathing zone (ppm)	Breathing Zone (mg/m <sup>3</sup> )	Mixture Conc (%)
n-propanol	200.00	492.0000	100.0

### INGREDIENT DATA

#### N-PROPANOL:

TLV TWA: 200 ppm Skin [ACGIH]

TLV STEL: 250 ppm Skin [ACGIH]

NOTICE OF INTENDED CHANGE

TLV TWA: 200 ppm (A3) [ACGIH]

TLV STEL: NOTICE OF INTENDED CHANGE 400 ppm (A3) [ACGIH]

PEL TWA: 200 ppm, 500 mg/m<sup>3</sup> [OSHA Z1]

TLV TWA: 200 ppm, 492 mg/m<sup>3</sup>; STEL: 250 ppm, 614 mg/m<sup>3</sup> SKIN

NOTICE OF INTENDED CHANGE

TLV TWA 200 ppm; STEL: 400 ppm A3

CAUTION: This substance has been proposed by the ACGIH as A3 Animal Carcinogen (at relatively high doses)

ES TWA: 200 ppm, 500 mg/m<sup>3</sup>; STEL: 250 ppm, 625 mg/m<sup>3</sup> SKIN

OES TWA: 200 ppm, 500 mg/m<sup>3</sup>; STEL: 250 ppm, 625 mg/m<sup>3</sup> SKIN

IDLH Level: 800 ppm

Odour threshold level: 0.13-30 ppm.

Exposure limits with "skin" notation indicate that vapour and liquid may be absorbed through intact skin. Absorption by skin may readily exceed vapour inhalation exposure. Symptoms for skin absorption are the same as for inhalation. Contact with eyes and mucous membranes may also contribute to overall exposure and may also invalidate the exposure standard.

Because n-propanol has the same biological effects as isopropanol but is less toxic, the TLV-TWA is intermediate between the limits for isopropyl alcohol and the butanols. Exposure at or below this limit is

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## Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION ...

thought to protect the worker against the significant risk of narcosis and irritation.

### PERSONAL PROTECTION

#### EYE

- Safety glasses with side shields.
- Chemical goggles.
- Contact lenses pose a special hazard; soft lenses may absorb irritants and all lenses concentrate them. DO NOT wear contact lenses.

#### HANDS/FEET

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

#### OTHER

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

#### GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:  
"Forsberg Clothing Performance Index".  
The effect(s) of the following substance(s) are taken into account in the computer-generated selection:  
Substance

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n-propanol	
NEOPRENE/NATURAL	A
NITRILE+PVC	A
NITRILE	A
NEOPRENE	A
TEFLON	A
VITON	B
PVC	C
NATURAL RUBBER	C
NATURAL+NEOPRENE	C

\* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion

NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

\* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

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## Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION ...

### RESPIRATOR

Respiratory protection may be required when ANY "Worst Case" vapour-phase concentration is exceeded (see Computer Prediction in "Exposure Standards").

Protection Factor (Min)	Half-Face Respirator	Full-Face Respirator
5 x ES	A-AUS A-PAPR-AUS	-
25 x ES	Air-line*	A-2 A-PAPR-2
50 x ES	-	A-3
50+ x ES	-	Air-line**

\* - Continuous-flow; \*\* - Continuous-flow or positive pressure demand  
^ - Full-face

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required. For further information consult site specific CHEMWATCH data (if available), or your Occupational Health and Safety Advisor.

### ENGINEERING CONTROLS

For flammable liquids and flammable gases, local exhaust ventilation or a process enclosure ventilation system may be required. Ventilation equipment should be explosion-resistant.

## Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

### APPEARANCE

Colourless, highly flammable liquid with a characteristic odour; does not mix with water.

### PHYSICAL PROPERTIES

Liquid.  
Mixes with water.

Molecular Weight: Not Applicable  
Melting Range (°C): -126.5  
Solubility in water (g/L): Miscible  
pH (1% solution): Not Available  
Volatile Component (%vol): Not Available  
Relative Vapour Density (air=1): >1  
Lower Explosive Limit (%): 2.1  
Autoignition Temp (°C): >405  
State: Liquid

Boiling Range (°C): 97.4  
Specific Gravity (water=1): 0.8  
pH (as supplied): 7 approx.  
Vapour Pressure (kPa): 0.187  
Evaporation Rate: Not Available  
Flash Point (°C): 15  
Upper Explosive Limit (%): 13.5  
Decomposition Temp (°C): Not Available

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## Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

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### CONDITIONS CONTRIBUTING TO INSTABILITY

Segregate from  
strong oxidisers

- Elevated temperatures.
- Presence of open flame.
- Product is considered stable.
- Hazardous polymerisation will not occur.

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## Section 11 - TOXICOLOGICAL INFORMATION

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### 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.

Swallowing of the liquid may cause aspiration into the lungs with the risk of chemical pneumonitis; serious consequences may result. (ICSC13733)

##### EYE

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

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

##### SKIN

Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.

There is some evidence to suggest that the material may cause moderate inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering.

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 vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.

There is some evidence to suggest that 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, drowsiness, reduced alertness, loss of reflexes, lack

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## Section 11 - TOXICOLOGICAL INFORMATION ...

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of coordination and vertigo.

If exposure to highly concentrated solvent atmosphere is prolonged this may lead to narcosis, unconsciousness, even coma and possible death.

Inhalation of high concentrations of gas/vapour causes lung irritation with coughing and nausea, central nervous depression with headache and dizziness, slowing of reflexes, fatigue and inco-ordination.

### CHRONIC HEALTH EFFECTS

Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Chronic solvent inhalation exposures may result in nervous system impairment and liver and blood changes. [PATTYS]

### Dentsply Ducera-Lay Saturation Liquid

Not available. Refer to individual constituents.

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

#### N-PROPANOL:

##### TOXICITY

Oral (woman) LDLo: 5700 mg/kg

Oral (rat) LD50: 1870 mg/kg

Dermal (rabbit) LD50: 5040 mg/kg

##### IRRITATION

Skin (rabbit): 500 mg open mild

Skin (rabbit): 20 mg/24h moderate

Eye (rabbit): 4 mg open SEVERE

Eye (rabbit): 20 mg/24h moderate

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## Section 12 - ECOLOGICAL INFORMATION

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DO NOT discharge into sewer or waterways.

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## Section 13 - DISPOSAL CONSIDERATIONS

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- Consult manufacturer for recycling options and recycle where possible .
  - Consult State Land Waste Management Authority for disposal.
  - Incinerate residue at an approved site.
  - Recycle containers if possible, or dispose of in an authorised landfill.
- Puncture containers to prevent re-use and bury at an authorised landfill.

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## Section 14 - TRANSPORTATION INFORMATION

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Shipping Name:

N-PROPANOL

Dangerous Goods Class: 3

UN/NA Number: 1274

ADR Number: 33

Packing Group: II

Labels Required: flammable liquid

Additional Shipping Information:

International Transport Regulations:

IMO: 3

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## Section 14 - TRANSPORTATION INFORMATION ...

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### HAZCHEM

2[Y]E

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## Section 15 - REGULATORY INFORMATION

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### POISONS SCHEDULE

None

### REGULATIONS

The following substances are found on/in Australian Inventory of Chemical Substances (AICS):  
n-propanol (CAS: 71-23-8)

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## Section 16 - OTHER INFORMATION

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