

Tissue Aid

Frigid Fluid Company

Chemwatch: 5178-48
Version No: 3.1.1.1
Safety Data Sheet according to OSHA HazCom Standard (2012) requirements

Chemwatch Hazard Alert Code: 1

Issue Date: 29/05/2015
Print Date: 01/06/2015
Initial Date: **Not Available**
S.GHS.U.S.A.EN

SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

Product Identifier

Product name	Tissue Aid
Synonyms	Not Available
Other means of identification	Not Available

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Supplemental Embalming Fluid.
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Details of the manufacturer/importer

Registered company name	Frigid Fluid Company
Address	11631 W Grand Ave Melrose Park 60164 IL United States
Telephone	+1 708-836-1215
Fax	Not Available
Website	Not Available
Email	Not Available

Emergency telephone number

Association / Organisation	Not Available
Emergency telephone numbers	1-800-424-9300
Other emergency telephone numbers	Not Available

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

Not considered a Hazardous Substance by the 2012 OSHA Hazard Communication Standard (29 CFR 1910.1200). Not classified as Dangerous Goods for transport purposes.



GHS Classification	Not Applicable
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Label elements

GHS label elements	Not Applicable
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SIGNAL WORD	NOT APPLICABLE
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Hazard statement(s)

Not Applicable

Precautionary statement(s) Prevention

Precautionary statement(s) Response

Precautionary statement(s) Storage

Precautionary statement(s) Disposal

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Continued...

Tissue Aid

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
67-63-0	3-6	<u>isopropanol</u>
56-81-5	3-6	<u>glycerol</u>

SECTION 4 FIRST AID MEASURES**Description of first aid measures**

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ 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. ▶ Seek medical attention without delay; if pain persists or recurs seek medical attention. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> ▶ 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.
Inhalation	<ul style="list-style-type: none"> ▶ 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.
Ingestion	<ul style="list-style-type: none"> ▶ If swallowed do NOT induce vomiting. ▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. ▶ Observe the patient carefully. ▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. ▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▶ Seek medical advice. ▶ If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

Indication of any immediate medical attention and special treatment needed

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.

Treat symptomatically.

To treat poisoning by the higher aliphatic alcohols (up to C7):

- ▶ 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]

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 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.

ADVANCED TREATMENT

- ▶ Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- ▶ Positive-pressure ventilation using a bag-valve mask might be of use.
- ▶ Monitor and treat, where necessary, for arrhythmias.
- ▶ Start an IV D5W TKO. If signs of 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.
- ▶ 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.

EMERGENCY DEPARTMENT

- ▶ 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

For C8 alcohols and above.

Symptomatic and supportive therapy is advised in managing patients.

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

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

Special hazards arising from the substrate or mixture

- | | |
|-----------------------------|--|
| Fire Incompatibility | ▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result |
|-----------------------------|--|

Advice for firefighters

Fire Fighting	<ul style="list-style-type: none"> ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear full body protective clothing with breathing apparatus. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Use water delivered as a fine spray to control fire and cool adjacent area. ▶ Avoid spraying water onto liquid pools. ▶ DO NOT approach containers suspected to be hot.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▶ Combustible. ▶ Slight fire hazard when exposed to heat or flame. ▶ Heating may cause expansion or decomposition leading to violent rupture of containers. ▶ On combustion, may emit toxic fumes of carbon monoxide (CO). ▶ May emit acrid smoke. ▶ Mists containing combustible materials may be explosive.

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

Minor Spills	<ul style="list-style-type: none"> ▶ Remove all ignition sources. ▶ Clean up all spills immediately. ▶ Avoid breathing vapours and contact with skin and eyes. ▶ Control personal contact with the substance, by using protective equipment. ▶ Contain and absorb spill with sand, earth, inert material or vermiculite. ▶ Wipe up.
Major Spills	<p>Moderate hazard.</p> <ul style="list-style-type: none"> ▶ Clear area of personnel and move upwind. ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear breathing apparatus plus protective gloves. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ No smoking, naked lights or ignition sources.
Personal Protective Equipment advice is contained in Section 8 of the MSDS.	

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> ▶ 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. ▶ 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 or ignition sources.
Other information	<ul style="list-style-type: none"> ▶ Store in original containers. ▶ Keep containers securely sealed. ▶ No smoking, naked lights or ignition sources. ▶ Store in a cool, dry, well-ventilated area. ▶ Store away from incompatible materials and foodstuff containers. ▶ Protect containers against physical damage and check regularly for leaks. <p>Store in cool, well-ventilated areas between 50 and 100°F.</p>

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> ▶ Metal can or drum ▶ Packaging as recommended by manufacturer. ▶ Check all containers are clearly labelled and free from leaks.
Storage incompatibility	<ul style="list-style-type: none"> ▶ Avoid reaction with oxidising agents ▶ Avoid strong bases.

PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION**Control parameters****OCCUPATIONAL EXPOSURE LIMITS (OEL)****INGREDIENT DATA**


Source	Ingredient	Material name	TWA	STEL	Peak	Notes
US OSHA Permissible Exposure Levels (PELs) - Table Z1	isopropanol	Isopropyl alcohol	980 mg/m3 / 400 ppm	Not Available	Not Available	Not Available
US ACGIH Threshold Limit Values (TLV)	isopropanol	2-Propanol	200 ppm	400 ppm	Not Available	TLV® Basis: Eye & URT irr; CNS impair; BEI
US NIOSH Recommended Exposure Limits (RELs)	isopropanol	Dimethyl carbinol, IPA, Isopropanol, 2-Propanol, sec-Propyl alcohol, Rubbing alcohol	980 mg/m3 / 400 ppm	1225 mg/m3 / 500 ppm	Not Available	Not Available
US OSHA Permissible Exposure Levels (PELs) - Table Z1	glycerol	Glycerin / Glycerin - Respirable fraction	15 mg/m3 / 5 mg/m3	Not Available	Not Available	Total dust; (mist) / (mist)
US NIOSH Recommended Exposure Limits (RELs)	glycerol	Glycerin (anhydrous); Glycerol; Glycyl alcohol; 1,2,3-Propanetriol; Trihydroxypropane	Not Available	Not Available	Not Available	See Appendix D

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
isopropanol	Isopropyl alcohol	400 ppm	400 ppm	12000 ppm
glycerol	Glycerine (mist); (Glycerol; Glycerin)	30 mg/m3	310 mg/m3	2500 mg/m3

Ingredient	Original IDLH	Revised IDLH
isopropanol	12,000 ppm	2,000 [LEL] ppm
glycerol	Not Available	Not Available

Exposure controls

Appropriate engineering controls	<p>Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.</p> <p>The basic types of engineering controls are:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.</p>
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> ▶ Safety glasses with side shields. ▶ Chemical goggles. ▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses 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.
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▶ Wear chemical protective gloves, e.g. PVC. ▶ Wear safety footwear or safety gumboots, e.g. Rubber <p>The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.</p> <p>The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.</p> <p>Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:</p> <ul style="list-style-type: none"> ▶ frequency and duration of contact, ▶ chemical resistance of glove material, ▶ glove thickness and ▶ dexterity <p>Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).</p>
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▶ Overalls. ▶ P.V.C. apron. ▶ Barrier cream. ▶ Skin cleansing cream. ▶ Eye wash unit.
Thermal hazards	Not Available

Recommended material(s)**Respiratory protection**

Continued...

Tissue Aid

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:

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Material	CPI
NITRILE	A
NAT+NEOPR+NITRILE	C
NATURAL RUBBER	C
NATURAL+NEOPRENE	C
NEOPRENE	C
NITRILE+PVC	C
PE/EVAL/PE	C
PVC	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.

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	Air-line*	A-2 P2	A-PAPR-2 P2 ^
up to 20 x ES	-	A-3 P2	-
20+ x ES	-	Air-line**	-

* - Continuous-flow; ** - Continuous-flow or positive pressure demand

^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO₂), G = Agricultural chemicals, K = Ammonia(NH₃), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Clear liquid with a floral alcohol odour; mixes with water.		
Physical state	Liquid	Relative density (Water = 1)	1.0
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Applicable	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	>82	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	12.7	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	2.0	Volatile Component (%vol)	94
Vapour pressure (kPa)	0.3 @ 20 deg.C	Gas group	Not Available
Solubility in water (g/L)	Miscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	<1	VOC g/L	Not Available

SECTION 10 STABILITY AND REACTIVITY

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Tissue Aid

Inhaled	<p>Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo.</p> <p>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.</p> <p>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.</p> <p>The odour of isopropanol may give some warning of exposure, but odour fatigue may occur.</p>
Ingestion	<p>Accidental ingestion of the material may be damaging to the health of the individual.</p> <p>Following ingestion, a single exposure to isopropyl alcohol produced lethargy and non-specific effects such as weight loss and irritation. Ingestion of near-lethal doses of isopropanol produces histopathological changes of the stomach, lungs and kidneys, incoordination, lethargy, gastrointestinal tract irritation, and inactivity or anaesthesia.</p> <p>Swallowing 10 ml. of isopropanol may cause serious injury; 100 ml. may be fatal if not promptly treated.</p>
Skin Contact	<p>Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.</p> <p>Repeated exposure may cause skin cracking, flaking or drying following normal handling and use.</p> <p>There is some evidence to suggest that this material can cause inflammation of the skin on contact in some persons.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>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.</p> <p>511ipa</p>
Eye	<p>There is some evidence to suggest that this material can cause eye irritation and damage in some persons.</p> <p>Isopropanol vapour may cause mild eye irritation at 400 ppm. Splashes may cause severe eye irritation, possible corneal burns and eye damage. Eye contact may cause tearing or blurring of vision.</p>
Chronic	<p>Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Long term or repeated ingestion exposure of isopropanol may produce incoordination, lethargy and reduced weight gain.</p> <p>Repeated inhalation exposure to isopropanol may produce narcosis, incoordination and liver degeneration. Animal data show developmental effects only at exposure levels that produce toxic effects in the adult animals. Isopropanol does not cause genetic damage in bacterial or mammalian cell cultures or in animals.</p> <p>There are inconclusive reports of human sensitisation from skin contact with isopropanol.</p>

Tissue Aid	TOXICITY	IRRITATION
	Not Available	Not Available
isopropanol	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 12792 mg/kg ^[1]	Eye (rabbit): 10 mg - moderate
	Inhalation (rat) LC50: 72.6 mg/L/4h ^[2]	Eye (rabbit): 100 mg - SEVERE
	Oral (rat) LD50: 5000 mg/kg ^[2]	Eye (rabbit): 100mg/24hr-moderate
		Skin (rabbit): 500 mg - mild
glycerol	TOXICITY	IRRITATION
	dermal (guinea pig) LD50: 54000 mg/kg ^[1]	Not Available
	Oral (rat) LD50: >20<39800 mg/kg ^[1]	
Legend:	1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2. * Value obtained from manufacturer's msds. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances	

ISOPROPANOL	<p>Isopropanol is irritating to the eyes, nose and throat but generally not to the skin. Prolonged high dose exposure may also produce depression of the central nervous system and drowsiness. Few have reported skin irritation. It can be absorbed from the skin or when inhaled. Intentional swallowing is common particularly among alcoholics or suicide victims and also leads to fainting, breathing difficulty, nausea, vomiting and headache. In the absence of unconsciousness, recovery usually occurred.</p>
GLYCEROL	<p>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.</p>

Acute Toxicity	☹	Carcinogenicity	☹
Skin Irritation/Corrosion	☹	Reproductivity	☹
Serious Eye Damage/Irritation	☹	STOT - Single Exposure	☹
Respiratory or Skin sensitisation	☹	STOT - Repeated Exposure	☹
Mutagenicity	☹	Aspiration Hazard	☹

Legend: ✔ – Data required to make classification available
✘ – Data available but does not fill the criteria for classification

 - Data Not Available to make classification
CMR STATUS

CARCINOGEN	isopropanol	US Environmental Defense Scorecard Suspected Carcinogens	IARC
EYE	isopropanol	US - California OEHHA/ARB - Acute Reference Exposure Levels and Target Organs (RELs) - Eye	ISOPROPYL ALCOHOL (Isopropanol)X
RESPIRATORY	isopropanol	US - California OEHHA/ARB - Acute Reference Exposure Levels and Target Organs (RELs) - Respiratory	X

SECTION 12 ECOLOGICAL INFORMATION**Toxicity**

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
isopropanol	LOW (Half-life = 14 days)	LOW (Half-life = 3 days)
glycerol	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
isopropanol	LOW (LogKOW = 0.05)
glycerol	LOW (LogKOW = -1.76)

Mobility in soil

Ingredient	Mobility
isopropanol	HIGH (KOC = 1.06)
glycerol	HIGH (KOC = 1)

SECTION 13 DISPOSAL CONSIDERATIONS**Waste treatment methods**

Product / Packaging disposal	<p>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.</p> <p>A Hierarchy of Controls seems to be common - the user should investigate:</p> <ul style="list-style-type: none"> ▶ Reduction ▶ Reuse ▶ Recycling ▶ Disposal (if all else fails) <p>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.</p>
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SECTION 14 TRANSPORT INFORMATION**Labels Required**

Marine Pollutant	NO
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Land transport (DOT): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

SECTION 15 REGULATORY INFORMATION**Safety, health and environmental regulations / legislation specific for the substance or mixture**

isopropanol(67-63-0) is found on the following regulatory lists	<p>"US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants", "US - Hawaii Air Contaminant Limits", "US - California Permissible Exposure Limits for Chemical Contaminants", "US - Idaho - Limits for Air Contaminants", "US ACGIH Threshold Limit Values (TLV) - Carcinogens", "US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants", "US - Oregon Permissible Exposure Limits (Z-1)", "International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs", "US - Michigan Exposure Limits for Air Contaminants", "US - California OEHHA/ARB - Acute Reference Exposure Levels and Target Organs (RELs)", "US - Washington Toxic air pollutants and their ASIL, SQER and de minimis emission values", "US - Alaska Limits for Air Contaminants", "US NIOSH Recommended Exposure Limits (RELs)", "US - Washington Permissible exposure limits of air contaminants", "US Spacecraft Maximum Allowable Concentrations (SMACs) for Airborne Contaminants", "US - Minnesota Permissible Exposure Limits (PELs)", "US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants", "US ACGIH Threshold Limit Values (TLV)", "US - California OEHHA/ARB - Chronic Reference Exposure Levels and Target Organs (CRELs)", "US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory", "US OSHA Permissible Exposure Levels (PELs) - Table Z1"</p>
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Continued...

glycerol(56-81-5) is found on the following regulatory lists

"US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants", "US - Hawaii Air Contaminant Limits", "US - California Permissible Exposure Limits for Chemical Contaminants", "US - Idaho - Limits for Air Contaminants", "US - Vermont Permissible Exposure Limits Table Z-1-A Final Rule Limits for Air Contaminants", "US - Oregon Permissible Exposure Limits (Z-1)", "US - Michigan Exposure Limits for Air Contaminants", "US - Alaska Limits for Air Contaminants", "US NIOSH Recommended Exposure Limits (RELs)", "US - Washington Permissible exposure limits of air contaminants", "US - Minnesota Permissible Exposure Limits (PELs)", "US - Vermont Permissible Exposure Limits Table Z-1-A Transitional Limits for Air Contaminants", "US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants", "US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory", "US OSHA Permissible Exposure Levels (PELs) - Table Z1"

National Inventory	Status
Australia - AICS	Y
Canada - DSL	Y
China - IECSC	Y
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	Y
Korea - KECI	Y
New Zealand - NZIoC	Y
Philippines - PICCS	Y
USA - TSCA	Y
Legend:	<i>Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)</i>

SECTION 16 OTHER INFORMATION**Other information****Ingredients with multiple cas numbers**

Name	CAS No
glycerol	29796-42-7, 30049-52-6, 37228-54-9, 56-81-5, 75398-78-6, 78630-16-7, 8013-25-0

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

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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