

## Produktinformation



Forschungsprodukte & Biochemikalien



Zellkultur & Verbrauchsmaterial



Diagnostik & molekulare Diagnostik



Laborgeräte & Service

Weitere Information auf den folgenden Seiten! See the following pages for more information!



## Lieferung & Zahlungsart

siehe unsere Liefer- und Versandbedingungen

## Zuschläge

- Mindermengenzuschlag
- Trockeneiszuschlag
- Gefahrgutzuschlag
- Expressversand

## SZABO-SCANDIC HandelsgmbH

Quellenstraße 110, A-1100 Wien

T. +43(0)1 489 3961-0

F. +43(0)1 489 3961-7

mail@szabo-scandic.com

www.szabo-scandic.com

linkedin.com/company/szaboscandic in



sc-214593

**Material Safety Data Sheet** 



The Power to Oscotion

Hazard Alert Code Key:

**EXTREME** 

HIGH

MODERATE

LOW

#### Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

#### PRODUCT NAME

Benzyldodecyldimethylammonium Bromide

## STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

#### **NFPA**



#### **SUPPLIER**

Company: Santa Cruz Biotechnology, Inc.

Address:

2145 Delaware Ave Santa Cruz, CA 95060

Telephone: 800.457.3801 or 831.457.3800

Emergency Tel: CHEMWATCH: From within the US and Canada:

877-715-9305

Emergency Tel: From outside the US and Canada: +800 2436 2255

(1-800-CHEMCALL) or call +613 9573 3112

#### **PRODUCT USE**

Sanitiser. Quaternary ammonium compound.

#### **SYNONYMS**

C21-H38-Br, "benzalkonium bromide", "benzenemethanaminium, N-dodecyl-N, N-dimethyl-, bromide", "benzenemethanaminium, N-dodecyl-N, N-dimethyl-, bromide", "benzododecinium bromide", "benzyldodecyldimethylammonium bromide", "dimethyl laurylbenzene ammonium bromide", "N-dodecyl-N, N-dimethylbenzenemethanaminium bromide", "N-dodecyl-N, N-dimethylbenzenemethanaminium bromide", "N-dodecyl-N, N-dimethylbenzenemethanaminium bromide", "Ammonyl Br-1244", "Bacfor BL", Bromek, "Sinnoquat BL-95", Sterinol, "quaternary ammonium compound"

## **Section 2 - HAZARDS IDENTIFICATION**

#### **CANADIAN WHMIS SYMBOLS**





#### **EMERGENCY OVERVIEW**

RISK

Causes burns.

Risk of serious damage to eyes.

Harmful in contact with skin and if swallowed.

## sc-214593

**Material Safety Data Sheet** 



The Power to Oscotion

Hazard Alert Code Key: EXTREME HIGH MODERATE LOW

Very toxic to aquatic organisms.

# POTENTIAL HEALTH EFFECTS ACUTE HEALTH EFFECTS

#### **SWALLOWED**

- The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.
- 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.
- Ingestion of acidic corrosives may produce burns around and in the mouth. the throat and esophagus. Immediate pain and difficulties in swallowing and speaking may also be evident. Swelling of the epiglottis may make it difficult to breathe which may result in suffocation. More severe exposure may result in vomiting blood and thick mucus, shock, abnormally low blood pressure, fluctuating pulse, shallow respiration and clammy skin, inflammation of stomach wall, and rupture of esophageal tissue. Untreated shock may eventually result in kidney failure. Severe cases may result in perforation of the stomach and abdominal cavity with consequent infection, rigidity and fever. There may be severe narrowing of the esophageal or pyloric sphincters; this may occur immediately or after a delay of weeks to years. There may be coma and convulsions, followed by death due to infection of the abdominal cavity, kidneys or lungs.
- Concentrated solutions of many cationics may cause corrosive damage to mucous membranes and the esophagus. Nausea and vomiting (sometimes bloody) may follow ingestion. Serious exposures may produce an immediate burning sensation of the mouth, throat and abdomen with profuse salivation, ulceration of mucous membranes, signs of circulatory shock (hypotension, labored breathing, and cyanosis) and a feeling of apprehension, restlessness, confusion and weakness. Weak convulsive movements may precede central nervous system depression. Erosion, ulceration, and petechial hemorrhage may occur through the small intestine with glottic, brain and pulmonary edema. Death may result from asphyxiation due to paralysis of the muscles of respiration or cardiovascular collapse. Fatal poisoning may arise even when the only pathological signs are visceral congestion, swallowing, mild pulmonary edema or varying signs of gastrointestinal irritation. Individuals who survive a period of severe hypertension may develop kidney failure. Cloudy swelling, patchy necrosis and fatty infiltration in such visceral organs as the heart, liver and kidneys shows at death.
- Concentrated solutions of cationic surfactants may cause destruction of the tissue lining the mouth, throat and gullet, and may cause nausea and vomiting. In sufficient quantity may produce restlessness, confusion, low blood pressure, muscle weakness, collapse, convulsion, labored breathing, blue coloration of the lips and coma. Death may occur in 1-4 hours. Fatal dose is estimated at 1-3 grams for certain cationics.

#### **EYE**

- The material can produce chemical burns to the eye following direct contact. Vapors or mists may be extremely irritating.
- If applied to the eyes, this material causes severe eye damage.
- Direct eye contact with acid corrosives may produce pain, tears, sensitivity to light and burns. Mild burns of the epithelia generally recover rapidly and completely. Severe burns produce long-lasting and possibly irreversible damage. The appearance of the burn may not be apparent for several weeks after the initial contact. The cornea may ultimately become deeply opaque resulting in blindness.
- Many cationic surfactants are very irritating to the eyes at low concentration. Concentrated solutions can cause severe burns with permanent clouding.

#### SKIN

- The material can produce chemical burns following direct contactwith the skin.
- Skin contact with the material may be harmful; systemic effects may resultfollowing absorption.
- The material is not thought to be a skin irritant (as classified using animal models). Abrasive damage however, may result from prolonged exposures. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.
- Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue.
- Open cuts, abraded or irritated skin should not be exposed to this material.
- Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

#### **INHALED**

- The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage.
- Corrosive acids can cause irritation of the respiratory tract, with coughing, choking and mucous membrane damage. There may be dizziness, headache, nausea and weakness. Swelling of the lungs can occur, either immediately or after a delay; symptoms of this include chest tightness, shortness of breath, frothy phlegm and cyanosis. Lack of oxygen can cause death hours after onset.
- Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled.

## **CHRONIC HEALTH EFFECTS**

■ 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 inhaling this product is more likely to cause a sensitization reaction in some persons compared to the general population.

## sc-214593

**Material Safety Data Sheet** 



The Power to Oscotio

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
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There is limited evidence that, skin contact with this product is more likely to cause a sensitization reaction in some persons compared to the general population.

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.

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.

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.

Repeated or prolonged exposure to acids may result in the erosion of teeth, swelling and or ulceration of mouth lining. Irritation of airways to lung, with cough, and inflammation of lung tissue often occurs. Chronic exposure may inflame the skin or conjunctiva.

#### Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

#### **HAZARD RATINGS**



#### **Section 4 - FIRST AID MEASURES**

### **SWALLOWED**

- SWALLOWE
- 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:
- For advice, contact a Poisons Information Center or a doctor.
- Urgent hospital treatment is likely to be needed.
- · If conscious, give water to drink.
- INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down
  position, if possible) to maintain open airway and prevent aspiration.

NOTE: Wear a protective glove when inducing vomiting by mechanical means.

- 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.
- If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the MSDS should be provided. Further action will be the responsibility of the medical specialist.
- If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the MSDS.

#### **EYE**

- If this product comes in contact with the eyes:
- Immediately hold eyelids apart and flush the eye continuously with running water.

## sc-214593

## **Material Safety Data Sheet**



The Power to Owntio

Hazard Alert Code Key: EXTREME HIGH MODERATE LOW

- 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 Center 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.

#### 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, without delay.

Inhalation of vapors or aerosols (mists, fumes) may cause lung edema. Corrosive substances may cause lung damage (e.g. lung edema, fluid in the lungs). As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested. Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered. This must definitely be left to a doctor or person authorized by him/her. (ICSC13719).

#### **NOTES TO PHYSICIAN**

- For acute or short term repeated exposures to strong acids:
- Airway problems may arise from laryngeal edema and inhalation exposure. Treat with 100% oxygen initially.
- Respiratory distress may require cricothyroidotomy if endotracheal intubation is contraindicated by excessive swelling
- Intravenous lines should be established immediately in all cases where there is evidence of circulatory compromise.
- Strong acids produce a coagulation necrosis characterized by formation of a coagulum (eschar) as a result of the dessicating action of the acid on proteins in specific tissues.

#### INGESTION:

- Immediate dilution (milk or water) within 30 minutes post ingestion is recommended.
- DO NOT attempt to neutralize the acid since exothermic reaction may extend the corrosive injury.
- Be careful to avoid further vomit since re-exposure of the mucosa to the acid is harmful. Limit fluids to one or two glasses in an adult.
- Charcoal has no place in acid management.
- Some authors suggest the use of lavage within 1 hour of ingestion.

#### SKIN:

- Skin lesions require copious saline irrigation. Treat chemical burns as thermal burns with non-adherent gauze and wrapping.
- Deep second-degree burns may benefit from topical silver sulfadiazine.

#### EYE:

- Eye injuries require retraction of the eyelids to ensure thorough irrigation of the conjuctival cul-de-sacs. Irrigation should last at least 20-30 minutes. DO NOT use neutralizing agents or any other additives. Several liters of saline are required.
- Cycloplegic drops, (1% cyclopentolate for short-term use or 5% homatropine for longer term use) antibiotic drops, vasoconstrictive agents
  or artificial tears may be indicated dependent on the severity of the injury.
- Steroid eye drops should only be administered with the approval of a consulting ophthalmologist).

#### [Ellenhorn and Barceloux: Medical Toxicology].

For exposures to quaternary ammonium compounds;

- For ingestion of concentrated solutions (10% or higher): Swallow promptly a large quantity of milk, egg whites / gelatin solution. If not
  readily available, a slurry of activated charcoal may be useful. Avoid alcohol. Because of probable mucosal damage omit gastric lavage
  and emetic drugs.
- For dilute solutions (2% or less): If little or no emesis appears spontaneously, administer syrup of Ipecac or perform gastric lavage.
- If hypotension becomes severe, institute measures against circulatory shock.
- If respiration laboured, administer oxygen and support breathing mechanically. Oropharyngeal airway may be inserted in absence of gag reflex. Epiglottic or laryngeal edema may necessitate a tracheotomy.
- Persistent convulsions may be controlled by cautious intravenous injection of diazepam or short-acting barbiturate drugs. [Gosselin et al, Clinical Toxicology of Commercial Products]

## sc-214593

## **Material Safety Data Sheet**



The Power to Questio

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
	Section 5 - F	FIRE FIGHTING M	EASURES	
Vapour Pressure (mmHG):	Negligible			
Upper Explosive Limit (%):	Not available.			
Specific Gravity (water=1):	Not available			
Lower Explosive Limit (%):	Not available			

#### **EXTINGUISHING MEDIA**

- Water spray or fog.
- Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.

#### **FIRE FIGHTING**

- Alert Emergency Responders 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 fire fighting procedures suitable for surrounding area.
- DO NOT approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.
- · Equipment should be thoroughly decontaminated after use.

### GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- -
- Combustible
- Slight fire hazard when exposed to heat or flame.
- Acids may react with metals to produce hydrogen, a highly flammable and explosive gas.
- Heating may cause expansion or decomposition leading to violent rupture of rigid containers.
- May emit acrid smoke and corrosive fumes.

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

### 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:

Particulate dust filter.

Acid vapor Type B cartridge/ canister.

## **Section 6 - ACCIDENTAL RELEASE MEASURES**

#### MINOR SPILLS

- Remove all ignition sources.
- · Clean up all spills immediately.
- Avoid contact with skin and eyes.
- Control personal contact by using protective equipment.
- Use dry clean up procedures and avoid generating dust.
- Place in a suitable, labelled container for waste disposal.
- Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material.

## sc-214593

## **Material Safety Data Sheet**



The Power to Question

Hazard Alert Code Key: EXTREME HIGH MODERATE LOW

· Check regularly for spills and leaks.

#### **MAJOR SPILLS**

- .
- Clear area of personnel and move upwind.
- Alert Emergency Responders 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.
- Consider evacuation.
- Stop leak if safe to do so.
- · Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labeled containers for recycling.
- Neutralize/decontaminate residue.
- Collect solid residues and seal in labeled drums for disposal.
- Wash area and prevent runoff into drains.
- After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- If contamination of drains or waterways occurs, advise emergency services.

## PROTECTIVE ACTIONS FOR SPILL

#### PROTECTIVE ACTION ZONE evacuation downwind direction distance wind Isolation down wind distance Distance direction half evacuation downwind direction distance INITIAL ISOLATION ZONE

From IERG (Canada/Australia)
Isolation Distance 25 meters
Downwind Protection Distance 250 meters

### **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 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 154 is taken from the US DOT emergency response guide book.

6 IERG information is derived from CANUTEC - Transport Canada.

## ACUTE EXPOSURE GUIDELINE LEVELS (AEGL) (in ppm)

AEGL 1: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience notable discomfort, irritation, or certain asymptomatic nonsensory effects. However, the effects are not disabling and are transient and reversible upon cessation of exposure.

AEGL 2: The airborne concentration of a substance above which it is predicted that the general population, including susceptible individuals, could experience irreversible or other serious, long-lasting adverse health effects or an impaired ability to escape.

AEGL 3: The airborne concentration of a substance above which it is predicted

## sc-214593

**Material Safety Data Sheet** 



The Power in Quanties

Hazard Alert Code Key: EXTREME HIGH MODERATE LOW

that the general population, including susceptible individuals, could experience life-threatening health effects or death.

#### **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.
- WARNING: To avoid violent reaction, ALWAYS add material to water and NEVER water to material.
- Avoid smoking, naked lights or ignition sources.
- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- · Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- Work clothes should be laundered separately.
- Launder contaminated clothing before re-use.
- 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 are maintained. 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**

■ DO NOT use aluminum or galvanized containers.

Check regularly for spills and leaks.

- Lined metal can, Lined metal pail/drum
- Plastic pail
- Polyliner drum
- Packing as recommended by manufacturer.
- Check all containers are clearly labeled and free from leaks.

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.

For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.):

- Removable head packaging;
- Cans with friction closures and
- low pressure tubes and cartridges may be used.
- Where combination packages are used, and the inner packages are of glass, porcelain or stoneware, there must be sufficient inert cushioning material in contact with inner and outer packages unless the outer packaging is a close fitting molded plastic box and the substances are not incompatible with the plastic.

#### 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.
- Protect containers against physical damage and check regularly for leaks.
- Observe manufacturer's storing and handling recommendations.

#### SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS

## sc-214593

Material Safety Data Sheet



The Power to Questio

Hazard Alert C	ode Key:	EXTREME	HIGH		MODERATE	LOW
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+	+	+	+	X	+	

- X: Must not be stored together
- O: May be stored together with specific preventions
- +: May be stored together

### Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

#### **EXPOSURE CONTROLS**

Source	Material	TWA ppm	TWA mg/m³	STEL ppm	STEL mg/m³	Peak ppm	Peak mg/m³	TWA F/CC	Notes
US - Oregon Permissible Exposure Limits (Z3)	benzyldimethyldodecylammonium bromide (Inert or Nuisance Dust: (d) Total dust)		10						*
US OSHA Permissible Exposure Levels (PELs) - Table Z3	benzyldimethyldodecylammonium bromide (Inert or Nuisance Dust: (d) Respirable fraction)		5						
US OSHA Permissible Exposure Levels (PELs) - Table Z3	benzyldimethyldodecylammonium bromide (Inert or Nuisance Dust: (d) Total dust)		15						
US - Hawaii Air Contaminant Limits	benzyldimethyldodecylammonium bromide (Particulates not other wise regulated - Total dust)		10						
US - Hawaii Air Contaminant Limits	benzyldimethyldodecylammonium bromide (Particulates not other wise regulated - Respirable fraction)		5						
US - Oregon Permissible Exposure Limits (Z3)	benzyldimethyldodecylammonium bromide (Inert or Nuisance Dust: (d) Respirable fraction)		5						*
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	benzyldimethyldodecylammonium bromide (Particulates not otherwise regulated Respirable fraction)		5						
US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants	benzyldimethyldodecylammonium bromide (Particulates not otherwise regulated (PNOR)(f)- Respirable fraction)		5						
US - Michigan Exposure Limits for Air Contaminants	benzyldimethyldodecylammonium bromide (Particulates not otherwise regulated, Respirable dust)		5						

## **MATERIAL DATA**

## BENZYLDIMETHYLDODECYLAMMONIUM BROMIDE:

■ Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and

## sc-214593

**Material Safety Data Sheet** 



The Power to Question

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
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elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- cause inflammation
- · cause increased susceptibility to other irritants and infectious agents
- lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and
- acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

It is the goal of the ACGIH (and other Agencies) to recommend TLVs (or their equivalent) for all substances for which there is evidence of health effects at airborne concentrations encountered in the workplace.

At this time no TLV has been established, even though this material may produce adverse health effects (as evidenced in animal experiments or clinical experience). Airborne concentrations must be maintained as low as is practically possible and occupational exposure must be kept to a minimum.

NOTE: The ACGIH occupational exposure standard for Particles Not Otherwise Specified (P.N.O.S) does NOT apply.

#### PERSONAL PROTECTION











Consult your EHS staff for recommendations

#### FVE

- .
- 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, eq. PVC.

Wear safety footwear or safety gumboots, eg. Rubber.

NOTE: The material may produce skin sensitization in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: such as:

- · 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).

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

- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information,

## sc-214593

**Material Safety Data Sheet** 



The Power to Questio

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
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exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).

- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory. These may
  be government mandated or vendor recommended.
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a
  complete respiratory protection program.
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required.

Use appropriate NIOSH-certified respirator based on informed professional judgement. In conditions where no reasonable estimate of exposure can be made, assume the exposure is in a concentration IDLH and use NIOSH-certified full face pressure demand SCBA with a minimum service life of 30 minutes, or a combination full facepiece pressure demand SAR with auxiliary self-contained air supply. Respirators provided only for escape from IDLH atmospheres shall be NIOSH-certified for escape from the atmosphere in which they will be used.

#### **ENGINEERING CONTROLS**

- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.
- Exhaust ventilation should be designed to prevent accumulation and recirculation of particulates in the workplace.
- If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered. Such protection might consist of:

(a): particle dust respirators, if necessary, combined with an absorption cartridge;

- (b): filter respirators with absorption cartridge or canister of the right type;
- (c): fresh-air hoods or masks
- Build-up of electrostatic charge on the dust particle, may be prevented by bonding and grounding.
- Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.

Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to efficiently remove the contaminant.

Type of Contaminant:	Air Speed:
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1-2.5 m/s (200-500 f/min.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5-10 m/s (500-2000 f/min.)
Within each range the appropriate value depends on:	
Lower end of the range	Upper end of the range
1: Room air currents minimal or favorable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 4-10 m/s (800-2000 f/min) for extraction of crusher dusts generated 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

4: Small hood-local control only

### **Section 9 - PHYSICAL AND CHEMICAL PROPERTIES**

#### PHYSICAL PROPERTIES

4: Large hood or large air mass in motion

Mixes with water. Corrosive.

## sc-214593

## **Material Safety Data Sheet**



The Power to Owntie

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
Acid.				
State	DIVIDED SO	OLID Molecular	Weight 3	84.45
Melting Range (°F)	114.8- 118.4	Viscosity	N	lot Applicable
Boiling Range (°F)	Not availabl	e Solubility	in water (g/L) N	1iscible
Flash Point (°F)	>230	pH (1% so	olution) N	lot available
Decomposition Temp (°F)	Not Available	e pH (as su	pplied) N	lot applicable
Autoignition Temp (°F)	Not availabl	e Vapour Pr	ressure (mmHG) N	legligible
Upper Explosive Limit (%)	Not availabl	e. Specific G	Gravity (water=1)	lot available
Lower Explosive Limit (%)	Not availabl	e Relative V	apor Density (air=1) >	1
Volatile Component (%vol)	Negligible	Evaporation	on Rate N	lot applicable

#### **APPEARANCE**

Off-white powder; mixes with water.

## **Section 10 - CHEMICAL STABILITY**

#### **CONDITIONS CONTRIBUTING TO INSTABILITY**

- Contact with alkaline material liberates heat
- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerization will not occur.

#### STORAGE INCOMPATIBILITY

- Reacts with mild steel, galvanized steel / zinc producing hydrogen gas which may form an explosive mixture with air.
- Avoid strong bases.

Segregate from alkalis, oxidizing agents and chemicals readily decomposed by acids, i.e. cyanides, sulfides, carbonates.

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

### Section 11 - TOXICOLOGICAL INFORMATION

benzyldimethyldodecylammonium bromide

### **TOXICITY AND IRRITATION**

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

TOXICITY IRRITATION
Oral (rat) LD50: 230 mg/kg Nil Reported

Intraperitoneal (rat) LD50: 90 mg/kg

■ 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.

Most undiluted cationic surfactants satisfy the criteria for classification as Harmful (Xn) with R22 and as Irritant (Xi) for skin and eyes with R38 and R41.

## For quaternary ammonium compounds (QACs):

Quaternary ammonium compounds (QACs) are cationic surfactants. They are synthetic organically tetra-substituted ammonium compounds, where the R substituents are alkyl or heterocyclic radicals. A common characteristic of these synthetic compounds is that one of the R's is a

## sc-214593

**Material Safety Data Sheet** 



The Power to Owntio

Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
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long-chain hydrophobic aliphatic residue

The cationic surface active compounds are in general more toxic than the anionic and non-ionic surfactants. The positively-charged cationic portion is the functional part of the molecule and the local irritation effects of QACs appear to result from the quaternary ammonium cation. Due to their relative ability to solubilise phospholipids and cholesterol in lipid membranes, QACs affect cell permeability which may lead to cell death. Further QACs denature proteins as cationic materials precipitate protein and are accompanied by generalised tissue irritation. It has been suggested that the experimentally determined decrease in acute toxicity of QACs with chain lengths above C16 is due to decreased water solubility.

In general it appears that QACs with a single long-chain alkyl groups are more toxic and irritating than those with two such substitutions, The straight chain aliphatic QACs have been shown to release histamine from minced guinea pig lung tissue However, studies with benzalkonium chloride have shown that the effect on histamine release depends on the concentration of the solution. When cell suspensions (11% mast cells) from rats were exposed to low concentrations, a decrease in histamine release was seen. When exposed to high concentrations the opposite result was obtained.

In addition, QACs may show curare-like properties (specifically benzalkonium and cetylpyridinium derivatives, a muscular paralysis with no involvement of the central nervous system. This is most often associated with lethal doses Parenteral injections in rats, rabbits and dogs have resulted in prompt but transient limb paralysis and sometimes fatal paresis of the respiratory muscles. This effect seems to be transient. From human testing of different QACs the generalised conclusion is obtained that all the compounds investigated to date exhibit similar toxicological properties.

Acute toxicity: Studies in rats have indicated poor intestinal absorption of QACs. Acute toxicity of QACs varies with the compound and, especially, the route of administration. For some substances the LD50 value is several hundreds times lower by the i.p. or i.v. than the oral route, whereas toxicities between the congeners only differ in the range of two to five times.

At least some QACs are significantly more toxic in 50% dimethyl sulfoxide than in plain water when given orally

Probably all common QAC derivatives produce similar toxic reactions, but as tested in laboratory animals the oral mean lethal dose varies with the compound .

Oral toxicity: LD50 values for QACs have been reported within the range of 250-1000 mg/kg for rats, 150-1000 mg/kg for mice, 150-300 mg/kg for guinea pigs and about 500 mg/kg b.w. for rabbits and dogs. The ranges observed reflect differences in the study designs of these rather old experiments as well as differences between the various QACs.

The oral route of administration was characterised by delayed deaths, gastrointestinal lesions and respiratory and central nervous system depression. It was also found that given into a full stomach, the QACs lead to lower mortality and fewer gastrointestinal symptoms. This support the suggestion of an irritating effect

Dermal toxicity: It has been concluded that the maximum concentration that did not produce irritating effect on intact skin is 0.1%. Irritation became manifest in the 1-10% range. Concentrations below 0.1% have caused irritation in persons with contact dermatitis or broken skin.

Although the absorption of QACs through normal skin probably is of less importance than by other routes, studies with excised guinea pig skin have shown that the permeability constants strongly depends on the exposure time and type of skin

Sensitisation: Topical mucosal application of QACs may produce sensitisation. Reports on case stories and patch test have shown that compounds such as benzalkonium chloride, cetalkonium chloride and cetrimide may possibly act as sensitisers. However, in general it is suggested that QACs have a low potential for sensitising man It is difficult to distinguish between an allergic and an irritative skin reaction due to the inherent skin irritating effect of QACs.

### Long term/repeated exposure:

Inhalation: A group of 196 farmers (with or without respiratory symptoms) were evaluated for the relationship between exposure to QACs (unspecified, exposure levels not given) and respiratory disorders by testing for lung function and bronchial responsiveness to histamine. After histamine provocation statistically significant associations were found between the prevalence of mild bronchial responsiveness (including asthma-like symptoms) and the use of QACs as disinfectant. The association seems even stronger in people without respiratory symptoms.

Genetic toxicity: QACs have been investigated for mutagenicity in microbial test systems. In Ames tests using Salmonella typhimurium with and without metabolic activation no signs of mutagenicity has been observed. Negative results were also obtained in E. coli reversion and B. subtilis rec assays. However, for benzalkonium chloride also positive and equivocal results were seen in the B. subtilis rec assays. Structural changes in blood vessels recorded.

#### **CARCINOGEN**

BROMINE COMPOUNDS (ORGANIC OR US Environmental Defense Scorecard Suspected NORGANIC)

Reference(s) P65-MC

#### **Section 12 - ECOLOGICAL INFORMATION**

Refer to data for ingredients, which follows:

BENZYLDIMETHYLDODECYLAMMONIUM BROMIDE:

- Very toxic to aquatic organisms.
- Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

## sc-214593

**Material Safety Data Sheet** 



The Power to Oscotion

Hazard Alert Code Key: EXTREME HIGH MODERATE LOW

■ For quaternary ammonium compounds (QACs):

QACs are white, crystalline powders. Low molecular weight QACs are very soluble in water, but slightly or not at all soluble in solvents such as ether, petrol and benzene. As the molecular weight and chain lengths increases, the solubility in polar solvents (e.g. water) decreases and the solubility in non-polar solvents increases.

Environmental fate

A major part of the QACs is discharged into wastewater and removed in the biological processes of sewage treatment plant. A 90% reduction of the QACs in the water phase of sludge has been reported and alkyl di-/ trimethyl ammonium and alkyl dimethyl benzyl ammonium compounds seem almost completely degraded in sewage sludge.

However, the aerobic and anaerobic biodegradability of QACs is not well investigated. Only sparse data are available concerning stability, solubility and biodegradability. In general, it seems that the biodegradability decreases with increasing numbers of alkyl chains: R(CH3)3N+ R2(CH3)2N+ R3(CH3)N+ R3(

Investigations have shown that bioaccumulation of considerable dimensions will probably not take place. Ecotoxicity:

Quaternary ammonium compounds and their polymers may be highly toxic to fish and other aquatic organisms. The toxicity of the quaternary ammoniums is known to be greatly reduced in the environment because of preferential binding to dissolved organics in surface water.

■ Bromide ion may be introduced to the environment after the dissociation of various salts and complexes or the degradation of organobromide compounds.

Although not a significant toxin in mammalian or avian systems it is highly toxic to rainbow trout and Daphnia magna. Bromides may also affect the growth of micro-organisms and have been used for this purpose in industry.

Bromides in drinking water are occasionally subject to disinfection processes involving ozone of chlorine. Bromide may be oxidised to produce hypobromous acid which in turn may react with natural organic matter to form brominated compounds. The formation of bromoform has been well documented, as has the formation of bromoacetic acids, bromopicrin, cyanogen bromide, and bromoacetone. Bromates may also be formed following ozonation or chlorination if pH is relatively high. Bromates may be animal carcinogens.

- Prevent, by any means available, spillage from entering drains or watercourses.
- DO NOT discharge into sewer or waterways.

### **Section 13 - DISPOSAL CONSIDERATIONS**

### **US EPA Waste Number & Descriptions**

A. General Product Information

Corrosivity characteristic: use EPA hazardous waste number D002 (waste code C)

#### **Disposal Instructions**

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

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

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

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

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

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

DO NOT allow wash water from cleaning equipment to enter drains. Collect all wash water for treatment before disposal.

- Recycle wherever possible.
- Consult manufacturer for recycling options or consult Waste Management Authority for disposal if no suitable treatment or disposal facility
  can be identified.
- Treat and neutralize at an approved treatment plant.
- Treatment should involve: Mixing or slurrying in water Neutralization with soda-lime or soda-ash followed by: Burial in a licensed land-fill
  or Incineration in a licensed apparatus (after admixture with suitable combustible material)
- Decontaminate empty containers with 5% aqueous sodium hydroxide or soda ash, followed by water. Observe all label safeguards until
  containers are cleaned and destroyed.

#### Section 14 - TRANSPORTATION INFORMATION

## sc-214593

## **Material Safety Data Sheet**



Hazard Alert Code Key: **EXTREME HIGH MODERATE** LOW



#### DOT:

Symbols:	None	Hazard class or Division:	8	
Identification Numbers:	UN3261	PG:	II	
Label Codes:	8	Special provisions:	IB8, IP2, IP4, T3, TP33	
Packaging: Exceptions:	154	Packaging: Non-bulk:	212	
Packaging: Exceptions:	154	Quantity limitations: Passenger aircraft/rail:	15 kg	
Quantity Limitations: Cargo aircraft only:	50 kg	Vessel stowage: Location:	В	
Vessel stowage: Other:	None			
Hazardous materials descriptions and proper shipping names:				

Corrosive solid, acidic, organic, n.o.s.

### **Air Transport IATA:**

ICAO/IATA Class:	8	ICAO/IATA Subrisk:	None
UN/ID Number:	3261	Packing Group:	II
Special provisions:	A3		

Shipping Name: CORROSIVE SOLID, ACIDIC, ORGANIC, N.O.S. \*(CONTAINS BENZYLDIMETHYLDODECYLAMMONIUM BROMIDE) **Maritime Transport IMDG:** 

IMDG Class:	8	IMDG Subrisk:	None
UN Number:	3261	Packing Group:	II
EMS Number:	F-A,S-B	Special provisions:	274 944

Limited Quantities: 1 ka

Shipping Name: CORROSIVE SOLID, ACIDIC, ORGANIC, N.O.S. (contains benzyldimethyldodecylammonium bromide)

#### **Section 15 - REGULATORY INFORMATION**

benzyldimethyldodecylammonium bromide (CAS: 7281-04-1) is found on the following regulatory lists; "Canada Domestic Substances List (DSL)", "US Toxic Substances Control Act (TSCA) - Inventory"

#### **Section 16 - OTHER INFORMATION**

#### LIMITED EVIDENCE

- Cumulative effects may result following exposure\*.
- Possible respiratory and skin sensitizer\*.
- May be harmful to the fetus/ embryo\*.
- \* (limited evidence).

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■ Classification of the mixture and its individual components has drawn on official and authoritative sources as well as independent review by

## sc-214593

**Material Safety Data Sheet** 



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Hazard Alert Code Key:	EXTREME	HIGH	MODERATE	LOW
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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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