

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

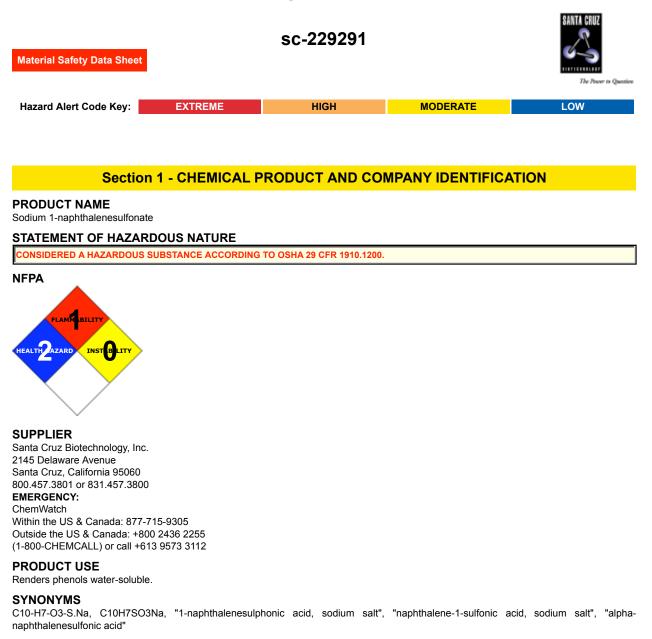
Zuschläge

- Mindermengenzuschlag
- Trockeneiszuschlag
- Gefahrgutzuschlag
- Expressversand

SZABO-SCANDIC HandelsgmbH

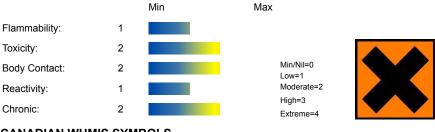
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Sodium 1-naphthalenesulfonate



Section 2 - HAZARDS IDENTIFICATION

CHEMWATCH HAZARD RATINGS



CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW

RISK

May cause SENSITISATION by skin contact. Irritating to eyes, respiratory system and skin.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

- Accidental ingestion of the material may be damaging to the health of the individual.
- Ingestion of anionic surfactants may produce diarrhea, bloated stomach, and occasional vomiting.

EYE

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

■ Direct eye contact with some anionic surfactants in high concentration can cause severe damage to the cornea. Low concentrations can cause discomfort, excess blood flow, and corneal clouding and swelling.

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SKIN

- This material can cause inflammation of the skin oncontact in some persons.
- The material may accentuate any pre-existing dermatitis condition.

• Skin contact is not thought to have harmful health effects, however the material may still produce health damage following entry through wounds, lesions or abrasions.

- Repeated exposure may cause skin cracking, flaking or drying following normal handling and use.
- Anionic surfactants can cause skin redness and pain, as well as a rash. Cracking, scaling and blistering can occur.
- 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.

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

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.

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.

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Prolonged or repeated skin contact may cause degreasing with drying, cracking and dermatitis following.

Exposure to Sulfonates can cause an imbalance in cellular salts and therefore cellular function. Airborne sulfonates may be responsible for respiratory allergies and, in some instances, minor dermal allergies.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
1-naphthalenesulfonic acid, sodium salt	130-14-3	>98

Section 4 - FIRST AID MEASURES

SWALLOWED

· 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.

EYE

■ If this product comes in contact with the eyes: • 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.

SKIN

■ If skin contact occurs: · Immediately remove all contaminated clothing, including footwear · Flush skin and hair with running water (and soap if available).

INHALED

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

NOTES TO PHYSICIAN

Treat symptomatically.

Section 5 - FIRE FIGHTING MEASURES				
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.

FIRE FIGHTING

· Alert Emergency Responders and tell them location and nature of hazard.

· Wear breathing apparatus plus protective gloves.

GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

· Combustible solid which burns but propagates flame with difficulty.

• Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust may burn rapidly and fiercely if ignited.

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

May emit poisonous fumes.

May emit corrosive fumes.

FIRE INCOMPATIBILITY

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

PERSONAL PROTECTION

Glasses: Chemical goggles. Gloves: Respirator: Particulate

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.
- MAJOR SPILLS
- Moderate hazard.
- \cdot CAUTION: Advise personnel in area.
- · Alert Emergency Responders and tell them location and nature of hazard.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- · Avoid all personal contact, including inhalation.
- · Wear protective clothing when risk of exposure occurs.

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

· Polyethylene or polypropylene container.

· Check all containers are clearly labelled and free from leaks.

STORAGE REQUIREMENTS

· Store in original containers.

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 - California Permissible Exposure Limits for Chemical Contaminants	1-naphthalenesulfonic acid, sodium salt (Particulates not otherwise regulated Respirable fraction)		5						(n)
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	1-naphthalenesulfonic acid, sodium salt (Particulates not otherwise regulated Respirable fraction)		5						
US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants	1-naphthalenesulfonic acid, sodium salt (Particulates not otherwise regulated (PNOR)(f)- Respirable fraction)		5						
US - Michigan Exposure Limits for Air Contaminants	1-naphthalenesulfonic acid, sodium salt (Particulates not otherwise regulated, Respirable dust)		5						
Canada - Prince Edward Island Occupational Exposure Limits	1-naphthalenesulfonic acid, sodium salt (Particles (Insoluble or Poorly Soluble) [NOS] Inhalable particles)		10						See Appendix B current TLV/BEI Book

ENDOELTABLE

PERSONAL PROTECTION



RESPIRATOR

Particulate

Consult your EHS staff for recommendations

EYE

· Safety glasses with side shields.

· Chemical goggles.

HANDS/FEET

■ 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.

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- · polychloroprene
- · nitrile rubber
- · butyl rubber
- fluorocaoutchouc
- · polyvinyl chloride

Gloves should be examined for wear and/ or degradation constantly.

OTHER

- · Overalls.
- · P.V.C. apron.
- · Barrier cream.
- · Skin cleansing cream.
- · Eye wash unit.

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.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

Solid. Mixes with water.			
State	Divided solid	Molecular Weight	230.22
Melting Range (°F)	Not available	Viscosity	Not Applicable
Boiling Range (°F)	Not available	Solubility in water (g/L)	Miscible
Flash Point (°F)	Not available	pH (1% solution)	Not available
Decomposition Temp (°F)	Not available	pH (as supplied)	Not applicable
Autoignition Temp (°F)	Not available	Vapour Pressure (mmHG)	Negligible
Upper Explosive Limit (%)	Not available.	Specific Gravity (water=1)	Not available
Lower Explosive Limit (%)	Not available	Relative Vapor Density (air=1)	Not Applicable
Volatile Component (%vol)	Negligible	Evaporation Rate	Not applicable

APPEARANCE

White powder; mixes with water.

Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY

- \cdot Presence of incompatible materials.
- · Product is considered stable.

STORAGE INCOMPATIBILITY

Avoid reaction with oxidizing agents.

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

Section 11 - TOXICOLOGICAL INFORMATION

1-NAPHTHALENESULFONIC ACID, SODIUM SALT

TOXICITY AND IRRITATION

1-NAPHTHALENESULFONIC ACID, SODIUM SALT:

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

• Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's edema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type.

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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.

No significant acute toxicological data identified in literature search.

Section 12 - ECOLOGICAL INFORMATION

No data

Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
1-naphthalenesulfonic sodium salt	^{acid,} HIGH		LOW	MED

Section 13 - DISPOSAL CONSIDERATIONS

Disposal Instructions

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

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

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

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

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

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

Section 14 - TRANSPORTATION INFORMATION

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

Section 15 - REGULATORY INFORMATION

1-naphthalenesulfonic acid, sodium salt (CAS: 130-14-3) 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

- Ingestion may produce health damage*.
- Cumulative effects may result following exposure*.
- Possible respiratory sensitiser*.
- Repeated exposure potentially causes skin dryness and cracking*.
- * (limited evidence).

ND

Substance CAS Suggested codes 1- naphthalenesulfonic acid, sodium salt 130- 14- 3

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• Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

A list of reference resources used to assist the committee may be found at: www.chemwatch.net/references.

• The (M)SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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