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- Mindermengenzuschlag
- Trockeneiszuschlag
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- Expressversand

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Decamethonium Iodide

sc-294277



The Power is Question

Material Safety Data Sheet

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

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

Decamethonium Iodide

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

Depolarising muscle relaxant used in surgical, anaesthetic and other procedures calling for a brief period of muscle relaxation such as intubation, endoscopies and electroconvulsive therapies. Given by intravenous injection. Also, laboratory reagent used in ion pair chromatography.

SYNONYMS

C16-H38-I2-N2, "decamethonium diiodide", "decamethylenebis(trimethylammonium iodide)", "decamethylene-1, 10-bis(trimethylammonium diiodide)", "decamethylene-1, 10-bis(trimethylammonium diiodide)", "1, 10-decanediaminium, N, N, N', N', N'-hexamethyl-, diiodide", "1, 10-decanediaminium, N, N, N', N', N'-hexamethyl-, diiodide", "Eulissin A", Eulixine, Procuran, "muscle relaxant/", "depolarising agent"

Section 2 - HAZARDS IDENTIFICATION

CANADIAN WHMIS SYMBOLS



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EMERGENCY OVERVIEW

RISK

Toxic if swallowed.
Irritating to eyes, respiratory system and skin.
Very toxic to aquatic organisms.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

- Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual.
- The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.
- Side-effects of decamethonium administration may include bradycardia, often with cardiac arrhythmia and occasionally with cardiac arrest. Sinus tachycardia and rise in blood pressure may occur.

Transient rises in intra-ocular pressure, salivary gland enlargement, increase in bowel movements and in gastric and salivary secretions are due to muscarinic action. Prolonged apnoea occurs in patients with low serum concentrations of pseudocholinesterase. Hypersensitivity reactions and bronchospasm may also occur.

- 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.

EYE

- The material can produce chemical burns to the eye following direct contact. Vapors or mists may be extremely irritating.
- This material can cause eye irritation and damage in some persons.

SKIN

- The material can produce chemical burns following direct contact with the skin.
- This material can cause inflammation of the skin on contact in some persons.
- The material may accentuate any pre-existing dermatitis condition.
- Open cuts, abraded or irritated skin should not be exposed to this material.
- Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

INHALED

- The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage.
- Inhalation of dusts, generated by the material during the course of normal handling, may be damaging to the health of the individual.
- 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

- Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis.

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 limited evidence that, skin contact with this product is more likely to cause a sensitization reaction in some persons compared to the general population.

Based on experience with animal studies, there is a possibility that exposure to the material may result in toxic effects to the development of the fetus, at levels which do not cause significant toxic effects to the mother.

Iodine and iodides, may give rise to local allergic reactions such as hives, rupture of skin blood vessels, pain in joints or diseases of the lymph nodes.

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Iodine and iodides cause goiter and diminished as well as increased activity of the thyroid gland. A toxic syndrome resulting from chronic iodide overdose and from repeated administration of small amounts of iodine is characterized by excessive saliva production, head cold, sneezing, conjunctivitis, headache, fever, laryngitis, inflammation of the bronchi and mouth cavity, inflamed parotid gland, and various skin rashes. Swelling and inflammation of the throat, irritated and swollen eyes and lung swelling may also occur. Swelling of the glottis, necessitating a tracheotomy has been reported. Use of iodides in frequency can cause fetal death, severe goiter, hypothyroidism and the cretinoid appearance of the newborn.

Exposure to small quantities may induce hypersensitivity reactions characterized by acute bronchospasm, hives (urticaria), deep dermal wheals (angioneurotic edema), running nose (rhinitis) and blurred vision. Anaphylactic shock and skin rash (non-thrombocytopenic purpura) may occur. An individual may be predisposed to such anti-body mediated reaction if other chemical agents have caused prior sensitization (cross-sensitivity).

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

HAZARD RATINGS

	Min	Max
Flammability:	1	
Toxicity:	3	
Body Contact:	3	
Reactivity:	1	
Chronic:	2	

Min/Nil=0
Low=1
Moderate=2
High=3
Extreme=4



NAME	CAS RN	%
decamethonium iodide	1420-40-2	>98

Section 4 - FIRST AID MEASURES

SWALLOWED

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

EYE

- If this product comes in contact with the eyes:
 - Immediately hold eyelids apart and flush the eye continuously with running water.
 - Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
 - Continue flushing until advised to stop by the Poisons Information 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 or hair contact occurs:
 - Immediately flush body and clothes with large amounts of water, using safety shower if available.
 - Quickly remove all contaminated clothing, including footwear.

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- Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Center.
- Transport to hospital, or doctor.

INHALED

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

NOTES TO PHYSICIAN

- Treat symptomatically.
- for poisons (where specific treatment regime is absent):

BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary edema .
- Monitor and treat, where necessary, for shock.
- Anticipate 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.

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 hypovolemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary edema.
- Hypotension with signs of hypovolemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994.

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.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.

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Hazard Alert Code Key:

EXTREME

HIGH

MODERATE

LOW

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 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.
- Dry dust can be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport.
- Build-up of electrostatic charge 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.

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

May emit poisonous fumes.

FIRE INCOMPATIBILITY

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

PERSONAL PROTECTION

Glasses:

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



- 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.
- 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.

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Hazard Alert Code Key:

EXTREME

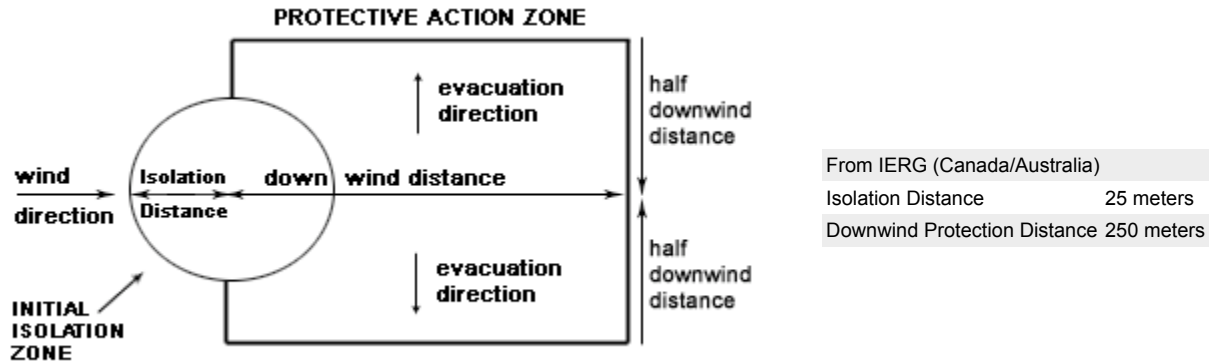
HIGH

MODERATE

LOW

- 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



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 151 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 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.

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HIGH

MODERATE

LOW

- Use in a well-ventilated area.
 - Prevent concentration in hollows and sumps.
 - DO NOT enter confined spaces until atmosphere has been checked.
 - DO NOT allow material to contact humans, exposed food or food utensils.
 - 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

- 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, there must be sufficient inert cushioning material in contact with inner and outer packages * . - In addition, where inner packagings are glass and contain liquids of packing group I and II there must be sufficient inert absorbent to absorb any spillage * . - * 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



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X	X	+	X	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/m ³	STEL ppm	STEL mg/m ³	Peak ppm	Peak mg/m ³	TWA F/CC	Notes
US - Oregon Permissible Exposure Limits (Z3)	decamethonium iodide (Inert or Nuisance Dust: (d) Total dust)		10						*
US OSHA Permissible Exposure Levels (PELs) - Table Z3	decamethonium iodide (Inert or Nuisance Dust: (d) Respirable fraction)		5						
US OSHA Permissible Exposure Levels (PELs) - Table Z3	decamethonium iodide (Inert or Nuisance Dust: (d) Total dust)		15						
US - Hawaii Air Contaminant Limits	decamethonium iodide (Particulates not other wise regulated - Total dust)		10						
US - Hawaii Air Contaminant Limits	decamethonium iodide (Particulates not other wise regulated - Respirable fraction)		5						
US - Oregon Permissible Exposure Limits (Z3)	decamethonium iodide (Inert or Nuisance Dust: (d) Respirable fraction)		5						*
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	decamethonium iodide (Particulates not otherwise regulated Respirable fraction)		5						
US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants	decamethonium iodide (Particulates not otherwise regulated (PNOR)(f)- Respirable fraction)		5						
US - Michigan Exposure Limits for Air Contaminants	decamethonium iodide (Particulates not otherwise regulated, Respirable dust)		5						

MATERIAL DATA

DECAMETHONIUM IODIDE:

■ 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.

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,

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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 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.

PERSONAL PROTECTION



Consult your EHS staff for recommendations

EYE

■ For laboratory, larger scale or bulk handling or where regular exposure in an occupational setting occurs:

- Chemical goggles
- Face shield. Full face shield may be required for supplementary but never for primary protection of eyes
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens 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. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].

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.

- Rubber gloves (nitrile or low-protein, powder-free latex). Employees allergic to latex gloves should use nitrile gloves in preference.
- Double gloving should be considered.
- PVC gloves.
- Protective shoe covers.
- Head covering.

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OTHER

- For quantities up to 500 grams a laboratory coat may be suitable.
- For quantities up to 1 kilogram a disposable laboratory coat or coverall of low permeability is recommended. Coveralls should be buttoned at collar and cuffs.
- For quantities over 1 kilogram and manufacturing operations, wear disposable coverall of low permeability and disposable shoe covers.
- For manufacturing operations, air-supplied full body suits may be required for the provision of advanced respiratory protection.
- Eye wash unit.
- Ensure there is ready access to an emergency shower.
- For Emergencies: Vinyl suit
- 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, 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.

RESPIRATOR

Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
10 x PEL	P1 Air-line*	-	PAPR-P1 -
50 x PEL	Air-line**	P2	PAPR-P2
100 x PEL	-	P3 Air-line*	-
100+ x PEL	-	Air-line**	PAPR-P3

* - Negative pressure demand ** - Continuous flow

Explanation of Respirator Codes:

Class 1 low to medium absorption capacity filters.

Class 2 medium absorption capacity filters.

Class 3 high absorption capacity filters.

PAPR Powered Air Purifying Respirator (positive pressure) cartridge.

Type A for use against certain organic gases and vapors.

Type AX for use against low boiling point organic compounds (less than 65°C).

Type B for use against certain inorganic gases and other acid gases and vapors.

Type E for use against sulfur dioxide and other acid gases and vapors.

Type K for use against ammonia and organic ammonia derivatives

Class P1 intended for use against mechanically generated particulates of sizes most commonly encountered in industry, e.g. asbestos, silica.

Class P2 intended for use against both mechanically and thermally generated particulates, e.g. metal fume.

Class P3 intended for use against all particulates containing highly toxic materials, e.g. beryllium.

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

- Enclosed local exhaust ventilation is required at points of dust, fume or vapor generation.

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HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapors.

Barrier protection or laminar flow cabinets should be considered for laboratory scale handling.

The need for respiratory protection should also be assessed where incidental or accidental exposure is anticipated: Dependent on levels of contamination, PAPR, full face air purifying devices with P2 or P3 filters or air supplied respirators should be evaluated.

Fume-hoods and other open-face containment devices are acceptable when face velocities of at least 1 m/s (200 feet/minute) are achieved. Partitions, barriers, and other partial containment technologies are required to prevent migration of the material to uncontrolled areas. For non-routine emergencies maximum local and general exhaust are necessary. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Type of Contaminant:	Air Speed:
solvent, vapors, etc. evaporating from tank (in still air)	0.25-0.5 m/s (50-100 f/min.)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers (released at low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)
direct spray, 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.)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable 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
4: Large hood or large air mass in motion	4: Small hood-local control only

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 1-2.5 m/s (200-500 f/min.) for extraction of gases discharged 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.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

Solid.

Mixes with water.

State	Divided solid	Molecular Weight	512.30
Melting Range (°F)	476.6- 480.2	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)	>1
Volatile Component (%vol)	Negligible	Evaporation Rate	Not applicable

APPEARANCE

White, hygroscopic, crystalline powder with bitter saline taste; mixes with water (1:10), alcohol (1:50).

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Section 10 - CHEMICAL STABILITY

CONDITIONS CONTRIBUTING TO INSTABILITY



- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerization will not occur.

STORAGE INCOMPATIBILITY

- Avoid reaction with oxidizing agents.

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

Section 11 - TOXICOLOGICAL INFORMATION

decamethonium iodide

TOXICITY AND IRRITATION

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

TOXICITY	IRRITATION
Oral (rat) LD50: 85 mg/kg	Nil Reported
Intraperitoneal (rat) LD50: 1.55 mg/kg	
Intravenous (None) None: rat L50 3.020 mg/kg	
Oral (mouse) LD50: 115 mg/kg	
Intravenous (mouse) LD50: 0.838 mg/kg	
Intravenous (rabbit) LD50: 0.2 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.

For alkytrimethylammonium chloride (ATMAC)

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. In addition, certain surfactants will satisfy the criteria for classification as Corrosive with R34 in addition to the acute toxicity.

According to Centre Europeen des Agents de Surface et de leurs Intermediaires Organiques (CESIO), C8-18 alkytrimethylammonium chloride (ATMAC) (i.e., lauryl, coco, soya, and tallow) are classified as Corrosive (C) with the risk phrases R22 (Harmful if swallowed) and R34 (Causes burns). C16 ATMAC is classified as Harmful (Xn) with the risk phrases R22 (Harmful if swallowed), R38 (Irritating to skin), and R41 (Risk of serious damage to eyes). C20-22 ATMAC are classified as Irritant (Xi) with R36/38 (Irritating to eyes and skin).

Toxicokinetics and Acute Toxicity: The few available absorption studies conducted with cationic surfactants indicate that absorption occurs in small amounts through the skin. Percutaneous absorption of radiolabelled C12 alkytrimethylammonium bromide (ATMAB) in 3% aqueous solution (applied to an 8 cm² area with occlusion) in the rat was low and corresponded to 0.6% of the applied ¹⁴C activity in 72 hours. Most of the absorbed surfactant was excreted in the urine, i.e. 0.35% of the applied ¹⁴C activity within the first 24 hours, whereas 13.2% remained on the skin after rinsing. Cutaneous application of the surfactant without rinsing resulted in a greater degree of percutaneous absorption (3.15%) in 48 hours. In the rat elimination after parenteral administration was rapid and was effected primarily via the urine, - more than 80% of the radioactivity was eliminated within 24 hours of application. About 80% of the ¹⁴C activity was found in the gastrointestinal tract 8 hours after oral administration of ¹⁴C-labelled C16 ATMAB . Only small amounts of the applied radioactivity were found in the urine and in the blood plasma. This indicates poor intestinal absorption. Similar small amounts of ¹⁴C were found in the liver, kidneys, spleen, heart, lungs and skeletal muscles. Within 3 days of ingestion, 92% of the administrated radioactivity had been

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excreted in the faeces and 1% in the urine. No appreciable enterohepatic circulation of the radioactivity was found.

The acute oral toxicity of alkyltrimethylammonium salts is somewhat higher than the toxicity of anionic and nonionic surfactants. This may be due to the strongly irritating effect which cationic surfactants exhibit on the mucous membrane of the gastrointestinal tract (SFT 1991). Cationic surfactants are generally about 10 times more toxic when administered by the intravenous route compared to oral administration.

Skin and Eye Irritation: Skin irritation depends on surfactant concentration. Regardless of the structure, cationic surfactants lead to serious destruction of the skin at high concentrations. Solutions of approximately 0.1% are rarely irritating, whereas irritation is usually pronounced at concentrations between 1.0 and 10.0% surfactant. C16 ATMAC was severely irritating to rabbit skin in a concentration of 2.5%. The surfactant was applied to intact and abraded sites and scored after 34 hours. Then the skin was rinsed and then scored again after 48 hours. The erythema and Eschar Index was 3.75 (maximum 4) and the edema Index was 2.0 (maximum 4).

With regard to eye irritation, cationic surfactants are the most irritating of the surfactants. The longer chained alkyltrimethylammonium salts are less irritating to the rabbit eye than the shorter alkyl chain homologues. C10 ATMAC, C12 ATMAC, and C16 ATMAC were tested in concentrations between 0.1 and 1.0% in water and were found to be significantly irritating or injurious to the rabbit eye. A 5% solution of C18 ATMAC was instilled into the eyes of guinea pigs, and this concentration was very irritating with a total PII (The Primary Irritation Index) score of 96 (maximum 110).

A homologous series of ATMAC produced very little swelling of the stratum corneum and some homologues produced a shrinkage of the stratum corneum after prolonged exposure

Many proteins in the skin are considerably more resistant to the denaturing effects of cationic surfactants compared to those of anionic surfactants. As cationic surfactants frequently have a lower critical micelle concentration than the anionic surfactants, a saturation of the surfactant/protein complex is prevented by the formation of micelles

Compared to a representative anionic surfactant, the cooperative binding with subsequent protein denaturation requires about a tenfold higher concentration of a cationic surfactant. Contrary to the irreversible denaturing effect of sodium dodecyl sulfate, the adverse effects of some cationic surfactants on proteins may be reversible. Cationic surfactants can interact with proteins or peptides by polar and hydrophobic binding. Polar interactions result in electrostatic bonds between the negatively charged groups of the protein molecule and the positively charged surfactant molecule.

Sensitisation: A repeated insult patch test of C16 ATMAC was conducted with 114 volunteers. Seventeen days after the last induction of 0.25% surfactant, a challenge patch of 0.25% was applied. No sensitization was observed

Sub-chronic toxicity: C16 ATMAC was administered at concentrations of 10, 20, and 45 mg/kg/day via the drinking water to rats for one year. The only effect observed was a decrease in body weight gain in the 45 mg/day dose group.

Reproductive Toxicity: No embryo toxic effects were seen, when C18 ATMAC was applied dermally to pregnant rats during the period of major organogenesis (day 6-15 of gestation). The concentrations of C18 ATMAC were 0.9, 1.5 and 2.5%. There was no increase in the incidence of fetal malformations. C16 ATMAC was not teratogenic in rats after oral doses. Mild embryonic effects were observed with 50 mg/kg/day, but these effects were attributed to maternal toxicity rather than to a primary embryonic effect. Lower doses of C16 ATMAC showed no embryo toxic or teratogenic effects

Mutagenicity: C16 ATMAC was studied in in vitro short-term tests to detect potential mutagenic effects. Cultures of Syrian golden hamster embryo cells were used for an in vitro bioassay. No in vitro transformation of hamster embryo cells was induced, and C16 ATMAC was not mutagenic in Salmonella typhimurium (Inoue and Sunakawa 1980). No mutagenic effects or genetic damages were indicated in a survey of nine short-term genotoxicity tests with C16 and C18 ATMAC (Yam et al. 1984)

Environmental and Health Assessment of Substances in Household Detergents and Cosmetic Detergent Products, Environment Project, 615, 2001. Torben Madsen et al: Miljoministeriet (Danish Environmental Protection Agency)

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 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

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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.

Convulsions recorded.

Section 12 - ECOLOGICAL INFORMATION

Refer to data for ingredients, which follows:

DECAMETHONIUM IODIDE:

- 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.

- For alkyltrimethylammonium (ATMA) salts

Environmental fate:

Although cationic surfactants will sorb onto sludge particles and eventually reach the digester during the treatment of wastewater sludge, there is very limited information about the biodegradability of these compounds under anoxic conditions. It has been demonstrated, however, that the concentration of quaternary ammonium salts does not decrease, or only slightly decreases, in an anaerobic digester.

Very little is known about biodegradation pathways of alkyltrimethylammonium (ATMA) salts. Two potential points of attack have been proposed. The degradation may either be initiated by a fission of the C-N bond in which the alkyl chain or a methyl group is cleaved from a tertiary amine, or by an omega-oxidation in which the far end of the alkyl chain is first oxidized to a carboxylic acid. Biodegradation can then proceed via beta-oxidation.

Ecotoxicity:

Algae constitute a group of organisms which appears to be very sensitive to cationic surfactants. The toxicity of ATMA and ATMA (alkyltrimethylammonium bromide and chloride) to algae is characterized by EC50 values below 1 mg/l.

ATMA are acutely toxic to aquatic invertebrates as indicated by EC/LC50 values below 1 mg/l for alkyl chain lengths of C16 exposed artificial stream mesocosms housing the freshwater clam *Corbicula fluminea* with C12 ATMA. Minor and transient effects on length gain were observed at 43 ug/l during weeks 2-4 and 6-7, but these effects were not evident at the end of the experiment after 8 weeks. One study with the species *Idus melanotus* indicates that some ATMA are also toxic to fish Environmental and Health Assessment of Substances in Household Detergents and Cosmetic Detergent Products, Environment Project, 615, 2001. Torben Madsen et al: Miljøministeriet (Danish Environmental Protection Agency)

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: $R(CH_3)_3N^+ > R_2(CH_3)_2N^+ > R_3(CH_3)N^+$. Within each category the biodegradability seems inversely proportional to the alkyl chain length. Heterocyclic QACs are less degradable than the non-cyclic.

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.

■ Iodine is an important element in studies of environmental protection and human health, global-scale hydrologic processes and nuclear nonproliferation. Biogeochemical cycling of iodine is complex, because iodine occurs in multiple oxidation states and as inorganic and organic species that may be hydrophilic, amphiphilic, and biophilic. Experiments illustrate complex behavior with various processes occurring, including iodate reduction, irreversible retention or mass loss of iodide, and rate-limited and nonlinear sorption. There was an appreciable iodate reduction to iodide, presumably mediated by the structural Fe(II) in some clay minerals; therefore, careful attention must be given to potential interconversion among species when interpreting the biogeochemical behavior of iodine in the environment.

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Iodine (I₂) is electrochemically reduced to ionic iodide by natural processes but humic acid appears to promote the reaction. The different oxidation species of iodine have markedly different sorption properties. Hence, changes in iodine redox states can greatly affect the mobility of iodine in the environment. A major microbial role has been suggested in the past to account for at least some of these redox changes. Both soluble ferrous iron and sulfide, as well as iron monosulfide (FeS) were shown to abiotically reduce iodate to iodide. These results indicate that ferric iron and/or sulfate reducing bacteria are capable of mediating both direct, enzymatic, as well as abiotic reduction of iodate in natural anaerobic environments.

Environmental and geological evidence indicates that iodine can become associated with natural organic matter (NOM) in soils and sediments. Previous studies have shown that iodine (including I₂) can be strongly retained in organic-rich surface soils and sediment and that soluble iodine may be associated with dissolved humic material. Iodine and iodate undergo an abiotic pseudo first-order reaction with peat leading to either reduction of iodate or iodine to iodide or incorporation of the iodine atoms into the organic matrix. Iodine appears to be incorporated in sphagnum peat by aromatic substitution for hydrogen on phenolic constituents of the peat.

■ DO NOT discharge into sewer or waterways.

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.
- Dispose of by: Burial in a licensed land-fill or Incineration in a licensed apparatus (after admixture with suitable combustible material)
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

Section 14 - TRANSPORTATION INFORMATION



DOT:

Symbols:	None	Hazard class or Division:	6.1
Identification Numbers:	UN3249	PG:	III
Label Codes:	6.1	Special provisions:	T1, TP33
Packaging: Exceptions:	153	Packaging: Non-bulk:	213
Packaging: Exceptions:	153	Quantity limitations: Passenger aircraft/rail:	5 kg

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Quantity Limitations: Cargo aircraft only: 5 kg Vessel stowage: Location: C

Vessel stowage: Other: 40

Hazardous materials descriptions and proper shipping names:
Medicine, solid, toxic, n.o.s.

Air Transport IATA:

ICAO/IATA Class: 6.1 ICAO/IATA Subrisk: None

UN/ID Number: 3249 Packing Group: III

Special provisions: A3

Shipping Name: MEDICINE, SOLID, TOXIC, N.O.S.(CONTAINS DECAMETHONIUM IODIDE)

Maritime Transport IMDG:

IMDG Class: 6.1 IMDG Subrisk: None

UN Number: 3249 Packing Group: III

EMS Number: F-A,S-A Special provisions: 221 223 944

Limited Quantities: 5 kg

Shipping Name: MEDICINE, SOLID, TOXIC, N.O.S.(contains decamethonium iodide)

Section 15 - REGULATORY INFORMATION

decamethonium iodide (CAS: 1420-40-2) is found on the following regulatory lists;

"US - Hawaii Air Contaminant Limits", "US - Oregon Permissible Exposure Limits (Z3)", "US OSHA Permissible Exposure Levels (PELs) - Table Z3"

Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

- Inhalation may produce health damage*.
- Cumulative effects may result following exposure*.
- Possible skin sensitizer*.
- May possibly 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 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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