Erlotinib Hydrochloride



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SYNONYMS

C22H24CIN3O4, C22-H23-N3-O4.HCI, "4-quinazolinamine, N-(3-ethenylphenyl)-6, 7-methoxyethoxy-, ", monohydrochloride, "4-(m-ethynylanilino)-6, 7-bis(2-methoxyethoxy)quinazoline monohydrochloride", "CP-358, 774-01", OSI-774, Tarceva, "tyrosine kinase inhibitor EGFR NSCLC antineoplastic"



CANADIAN WHMIS SYMBOLS



EMERGENCY OVERVIEW

RISK

Harmful if swallowed. Irritating to skin. Risk of serious damage to eyes. Limited evidence of a carcinogenic effect. Possible risk of impaired fertility. Harmful danger of serious damage to health by prolonged exposure if swallowed. Toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual.

• The killing action of antineoplastic drugs used for cancer chemotherapy is not selective for cancerous cells alone but affect all dividing cells. Acute side effects include loss of appetite, nausea and vomiting, allergic reaction (skin rash, itch, redness, low blood pressure, unwellness and anaphylactic shock) and local irritation. Gout and renal failure can occur.

■ The most common side-effects of Epidermal Growth Factor Receptor (EGFR) inhibitors of tyrosine kinase in lung cancer treatment include diarrhoea, skin rash, nausea, vomiting, headache, dizziness, weakness, tiredness and loss of appetite. Less common side-effects may include dryness of the mouth, skin dryness, skin inflammation with sloughing and itchiness. Rare side-effects may include dry eyes, eye pain and liver injury.Interstitial pneumonia (sometimes fatal) may also develop as a side-effect of treatment.Animal testing using high doses revealed wide-ranging toxic effects to a large number of body systems.

EYE

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

Risk of serious damage to eyes.

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 produce harmful health effects (as classified under EC Directives using animal models). Systemic harm, however, has been identified following exposure of animals by at least one other route and the material may still produce health damage following entry through wounds, lesions or abrasions. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.

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 is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

CHRONIC HEALTH EFFECTS

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS			
NAME	CAS RN	%	
erlotinib hydrochloride	183319-69-9	>98	

Section 4 - FIRST AID MEASURES

SWALLOWED

• IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.

• For advice, contact a Poisons Information Centre or a doctor.

• Urgent hospital treatment is likely to be needed.

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.

Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise

• 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.

EYE

If this product comes in contact with the eyes

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

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 dust is inhaled, remove from contaminated area.
- Encourage patient to blow nose to ensure clear passage of breathing.
- If irritation or discomfort persists seek medical attention.

NOTES TO PHYSICIAN

Treat symptomatically.

For employees potentially exposed to antineoplastic and/ or cytotoxic agents on a regular basis, a preplacement physical examination and history (noting risk factors) is recommended. Periodic follow-up examinations should also be undertaken and should be overseen by a physician familiar with the toxic effects of the substance and full details of the nature of work undertaken by the employee.

Following administration of antineoplastics, control of nausea and vomiting may be attempted by giving phenothiazines such as perphenazine, prochlorperazine, promethazine or thiethylperazine before antineoplastic agents are administered. In bone-marrow depression, transfusion of blood or platelets reduces the risk of life-threatening haemorrhage. Granulocyte transfusions and injection of antibiotics may be necessary to combat infection in the neutropenic patient. Hyperuricaemia is avoided by the addition of allopurinol to treatment schedules and measures such as alkalisation of the urine and hydration may be adopted. MARTINDALE The Extra Pharmacopoeia, 28th Edition.

Section 5 - FIRE FIGHTING MEASURES

Vapor Pressure (mmHG)	Negligible
Upper Explosive Limit (%)	Not available.
Specific Gravity (water=1)	Not available
Lower Explosive Limit (%)	Not available

EXTINGUISHING MEDIA

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

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water courses.
- Use water delivered as a fine spray to control fire and cool adjacent 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.

When any large container (including road and rail tankers) is involved in a fire,

consider evacuation by 100 metres in all directions.

GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- Combustible solid which burns but propagates flame with difficulty; it is estimated that most organic dusts are combustible (circa 70%) according to the circumstances under which the combustion process occurs, such materials may cause fires and / or dust explosions.
- 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 (420 micron or less) may burn rapidly and fiercely if ignited particles exceeding this limit will generally not form flammable dust clouds.; once initiated, however, larger particles up to 1400 microns diameter will contribute to the propagation of an explosion.
- In the same way as gases and vapors, dusts in the form of a cloud are only ignitable over a range of concentrations; in principle, the concepts of lower explosive limit (LEL) and upper explosive limit (UEL).are applicable to dust clouds but only the LEL is of practical use; this is because of the inherent difficulty of achieving homogeneous dust clouds at high temperatures (for dusts the LEL is often called the "Minimum Explosible Concentration", MEC)
- A dust explosion may release of large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people.
- Usually the initial or primary explosion takes place in a confined space such as plant or machinery, and can be of sufficient force to damage or rupture the plant. If the shock wave from the primary explosion enters the surrounding area, it will disturb any settled dust layers, forming a second dust cloud, and often initiate a much larger secondary explosion. All large scale explosions have resulted from chain reactions of this type.
- 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.
- All movable parts coming in contact with this material should have a speed of less than 1-meter/sec
- A sudden release of statically charged materials from storage or process equipment, particularly at elevated temperatures and/ or pressure, may result in ignition especially in the absence of an apparent ignition source
- One important effect of the particulate nature of powders is that the surface area and surface structure (and often moisture content) can vary widely from sample to sample, depending of how the powder was manufactured and handled; this means that it is virtually impossible to use flammability data published in the literature for dusts (in contrast to that published for gases and vapors).
- Autoignition temperatures are often quoted for dust clouds (minimum ignition temperature (MIT)) and dust layers (layer ignition temperature (LIT)); LIT generally falls as the thickness of the layer increases.

Combustion products include carbon monoxide (CO), carbon dioxide (CO2), hydrogen chloride, phosgene, 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

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- Clean up waste regularly and abnormal spills immediately.
- Avoid breathing dust and contact with skin and eyes.
- Wear protective clothing, gloves, safety glasses and dust respirator.
- Use dry clean up procedures and avoid generating dust.
- Vacuum up or sweep up. NOTE Vacuum cleaner must be fitted with an exhaust micro filter (HEPA type) (consider explosion-proof machines designed to be grounded during storage and use).
- Dampen with water to prevent dusting before sweeping.
- Place in suitable containers for disposal.
- Environmental hazard contain spillage.

It is recommended that areas handling final finished product have cytotoxic spill kits available.

- Spill kits should include
- impermeable body covering,
- shoe covers,
- latex and utility latex gloves,
- goggles,
- approved HEPA respirator,
- disposable dust pan and scoop,
- absorbent towels,
- spill control pillows,
- disposable sponges,
- sharps container,
- disposable garbage bag and
- hazardous waste label

Where spills are treated with loose absorbents, such as vermiculite, ensure dust exposure is strictly avoided.

- To avoid accidental exposure due to waste handling of cytotoxics
- Place waste residue in a segregated sealed plastic container.
- Used syringes, needles and sharps should not be crushed, clipped, recapped, but placed directly into an approved sharps container.
- Dispose of any cleanup materials and waste residue according to all applicable laws and regulations e.g, secure chemical landfill

disposal.

- All personnel likely to involved in a antineoplastic (cytotoxic) spill must receive practical training in
- the correct procedures for handling cytotoxic drugs or waste in order to prevent and minimise the risk of spills
- the location of the spill kit in the area
- the arrangements for medical treatment of any affected personnel
- the procedure for containment of the spill, and decontamination of personnel and the environment, including the different procedures for major and **MINOR SPILLS**
- the procedure for waste disposal according to the nature and extent of the spill

MAJOR SPILLS

Environmental hazard - contain spillage.

Moderate hazard.

- CAUTION Advise personnel in area.
- Alert Emergency Services and tell them location and nature of hazard.
- Control personal contact by wearing protective clothing.
- Prevent, by any means available, spillage from entering drains or water courses.
- Recover product wherever possible.
- IF DRY Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET Vacuum/shovel up and place in labelled containers for disposal.
- ALWAYS Wash area down with large amounts of water and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise Emergency Services.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

The National Institute of Health (USA) recommends that the preparation of injectable antineoplastic drugs should be performed in a Class II laminar flow biological safety cabinet and that personnel preparing drugs of this class should wear appropriate personal protective gear. Emphasise controls on containment.

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Prevent concentration in hollows and sumps.
- DO NOT enter confined spaces until atmosphere has been checked.
- 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.

RECOMMENDED STORAGE METHODS

- Glass container is suitable for laboratory quantities
- Polyethylene or polypropylene container.

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

STORAGE REQUIREMENTS

Antineoplastics (cytotoxics)

- should be clearly identifiable to all personnel involved in their handling
- should be stored in impervious break-resistant containers
- should be stored in separate, clearly marked storage areas to minimise the risk of breakage, and to limit contamination in the event of leakage.

Spill kits should be available in storage areas.

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry area protected from environmental extremes.
- 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

For major quantities

- Consider storage in bunded areas ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams).
- Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require consultation with local authorities.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

- The following materials had no OELs on our records
- erlotinib hydrochloride CAS183319-69-9

PERSONAL PROTECTION



RESPIRATOR

- Particulate. (AS/NZS 1716 & 1715, EN 1432000 & 1492001, ANSI Z88 or national equivalent)
- EYE
- Chemical protective goggles with full seal
- Shielded mask (gas-type)
- 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], [AS/NZS 1336 or national equivalent]

HANDS/FEET

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

- 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, AS/NZS 2161.1 or national equivalent).
- 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, AS/NZS 2161.10.1 or national equivalent) 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, AS/NZS 2161.10.1 or national equivalent) 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, latex/ nitrile). Employees allergic to latex gloves should use nitrile gloves in preference.
- Double gloving should be considered.
- PVC gloves.
- Change gloves frequently and when contaminated, punctured or torn.
- Wash hands immediately after removing gloves.
- Protective shoe covers. [AS/NZS 2210]
- Head covering.

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
- When handling antineoplastic materials, it is recommended that a disposal work-uniform (such as Tyvek or closed front surgical-type gown with knit cuffs) is worn.

ENGINEERING CONTROLS

- Unless written procedures, specific to the workplace are available, the following is intended as a guide
- For Laboratory-scale handling of Substances assessed to be toxic by inhalation. Quantities of up to 25 grams may be handled in Class II biological safety cabinets *; Quantities of 25 grams to 1 kilogram may be handled in Class II biological safety cabinets* or equivalent containment systems; Quantities exceeding 1 kg may be handled either using specific containment, a hood or Class II biological safety cabinet*,
- HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapors.
- 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. When handling Quantities of up to 25 grams, an approved respirator with HEPA filters or cartridges should be considered; Quantities of 25 grams to 1 kilogram, a half-face negative pressure, full negative pressure, or powered helmet-type air purifying respirator should be considered. Quantities in excess of 1 kilogram, a full face negative pressure, helmet-type air purifying, or supplied air respirator should be considered.

Written procedures, specific to a particular work-place, may replace these recommendations

* For Class II Biological Safety Cabinets, Types B2 or B3 should be considered. Where only Class I, open fronted Cabinets are available, glove panels may be added, Laminar flow cabinets do not provide sufficient protection when handling these materials unless especially designed to do so.

Pilot Plant and Production

- Wear appropriate gloves; lab coat, nylon coveralls or disposable Tyvek suit; safety glasses, safety shoes, and disposable booties. Use good manufacturing practices (i.e., cGMPs).
- Protective garment (coveralls, Tyvek, lab coat) is not to be worn outside the work area.
- Clean/dirty/decontamination areas are to be established.
- Negative/positive air pressure relationships and buffer zones required (i.e., ante-room/degowning room/airlock).
- Area access is to be restricted.
- High-energy operations such as milling, particle sizing, spraying or fluidising should be done within an approved emission control or containment system.
- Develop cleaning procedures and techniques that limit potential exposure

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

Solid. Does not mix with water.			
State	Divided solid	Molecular Weight	429.9
Melting Range (°F)	Not available	Viscosity	Not Applicable
Boiling Range (°F)	Not available	Solubility in water (g/L)	Partly miscible
Flash Point (°F)	Not available	pH (1% solution)	Not applicable
Decomposition Temp (°F)	Not available.	pH (as supplied)	Not applicable
Autoignition Temp (°F)	Not available	Vapor 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

Powder; does not mix well with water.

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.

erlotinib hydrochloride

TOXICITY AND IRRITATION

ERLOTINIB HYDROCHLORIDE

No significant acute toxicological data identified in literature search.

Section 12 - ECOLOGICAL INFORMATION

Toxic to aquatic organisms, may cause long-term adverse effects in the aquatic environment. This material and its container must be disposed of as hazardous waste. Avoid release to the environment.

Refer to special instructions/ safety data sheets.

Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
erlotinib hydrochloride	No Data Available	No Data Available		

Section 13 - DISPOSAL CONSIDERATIONS

Disposal Instructions

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

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. In most instances the supplier of the material should be consulted.

- DO NOT allow wash water from cleaning or process equipment to enter drains.
- It may be necessary to collect all wash water for treatment before disposal.
- In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- Where in doubt contact the responsible authority.
- Antineoplastic (cytotoxic) wastes must be packed directly, ready for incineration, into color-coded, secure, labelled, leak-proof containers sufficiently robust to withstand handling without breaking, bursting or leaking.
- Containers of special design are available for particular needs (such as disposal of sharps) and should be used.
- Once filled and closed, such containers must never be re-opened.
- Immediate containers must bear a nationally accepted symbol or device depicting cytotoxic substances and be labelled with the words: CYTOTOXIC WASTE - INCINERATE in a style of lettering approved by the national/ state authority.
- Where policies and procedures permit the merging of cytotoxic wastes with medical waste in an outer container used for medical waste, cytotoxic waste must first be placed in identifiable color-coded/ labelled cytotoxic containers prior to merging.

 Management procedures must ensure that merged medical and cytotoxic waste is subjected to the incineration requirements appropriate for the total destruction of the cytotoxic waste.

WASTE STORAGE OF CYTOTOXIC WASTES For the storage of cytotoxic waste, segregated or merged with medical waste, provide:

- special storage areas with adequate lighting.
- waste security and restriction of access to authorized persons.
- storage areas designed to facilitate easy routine cleaning and maintenance to hygienic standards, or post-spill decontamination.
- storage of cytotoxic waste in standard, identifying bins or other appropriate containers.

COLLECTION OF CYTOTOXIC WASTES

- Procedures for the collection of cytotoxic wastes, which are compatible with existing operational needs, and which protect workers, other people and the environment, must be developed.
- Waste must be removed from the site by contractors whose workers have been instructed in the protective methods to be used against the hazards involved, and who comply with the safe work practices established by internal and/or national/ state policies. Contractors must instruct, train and direct their personnel in the safe and legal handling of cytotoxic wastes. Contractor's personnel should observe the operating procedures of the waste-generator.

• Transport of cytotoxic wastes, through the community, must comply with the appropriate national/ state codes.

DESTRUCTION OF CYTOTOXIC WASTES

• Destruction of cytotoxic wastes should be carried out in multi-chambered incinerators, licenced for this purpose, operating at 1100 deg. C. or more, with a residence time of at least 1 second.

- Operators must be trained in handling procedures and hazards involved with handling the waste.
- Waste which arrives at the incinerator inappropriately packaged should NOT be returned to the waste generator. An authorized representative of the waste generator must attend the incinerator site to rectify the situation.

Section 14 - TRANSPORTATION INFORMATION				
DOT:				
Symbols:	G	Hazard class or Division:	9	
Identification Numbers:	UN3077	PG:	III	
Label Codes:	9	Special provisions:	8, 146, 335, B54, IB8, IP3, N20, T1, TP33	
Packaging: Exceptions:	155	Packaging: Non-bulk:	213	
Packaging: Exceptions:	155	Quantity limitations: Passenger aircraft/rail:	No limit	
Quantity Limitations: Cargo aircraft only:	No limit	Vessel stowage: Location:	A	
Vessel stowage: Other:	None			
Hazardous materials descriptions Environmentally hazardous subst Air Transport IATA:	and proper shipping names: ance, solid, n.o.s			
ICAO/IATA Class:	9	ICAO/IATA Subrisk:	None	
UN/ID Number:	3077	Packing Group:	III	
Special provisions:	A97			
Cargo Only				
Packing Instructions:	956	Maximum Qty/Pack:	400 kg	
Passenger and Cargo		Passenger and Cargo		
Packing Instructions:	956	Maximum Qty/Pack:	400 kg	
Passenger and Cargo Limited Quantity		Passenger and Cargo Limited Quantity		
Packing Instructions:	Y956	Maximum Qty/Pack:	30 kg G	
Shipping name:ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S.(contains erlotinib hydrochloride) Maritime Transport IMDG:				
IMDG Class:	9	IMDG Subrisk:	None	
UN Number:	3077	Packing Group:	111	
EMS Number:	F-A,S-F	Special provisions:	274 335	
Limited Quantities:	5 kg	Marine Pollutant:	Yes	

Shipping name:ENVIRONMENTALLY HAZARDOUS SUBSTANCE, SOLID, N.O.S. (contains erlotinib hydrochloride)

Section 15 - REGULATORY INFORMATION

erlotinib hydrochloride (CAS: 183319-69-9) is found on the following regulatory lists; "US NIOSH New FDA Drugs and Warnings Fitting NIOSH Criteria for Hazardous Drugs 2006 (Draft)"

Section 16 - OTHER INFORMATION

LIMITED EVIDENCE

Cumulative effects may result following exposure*.

* (limited evidence).

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.

 For detailed advice on Personal Protective Equipment, refer to the following U.S. Regulations and Standards: OSHA Standards - 29 CFR:
1910.132 - Personal Protective Equipment - General requirements
1910.133 - Eye and face protection
1910.134 - Respiratory Protection
1910.136 - Occupational foot protection
1910.138 - Hand Protection
Eye and face protection
Eye and face protection
Eye and face protection
Respirators must be NIOSH approved.

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