

MOLYBDENUM TRIOXIDE

GHS Safety Data Sheet

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

MOLYBDENUM(VI) OXIDE

OTHER NAMES

Mo-O₃, "molybdic anhydride", "molybdenum anhydride"

PRODUCT USE

Source of molybdenum compounds, agriculture, analytical chemistry, manufacture of metallic molybdenum, introduction of molybdenum in alloys, corrosive inhibitor, ceramic glazes, enamels, pigments, catalyst.

SUPPLIER

Company: S D FINE- CHEM LIMITED

Address:

315- 317, T.V. INDUSTRIAL ESTATE,

248, WORLI,

MUMBAI- 400030.INDIA.

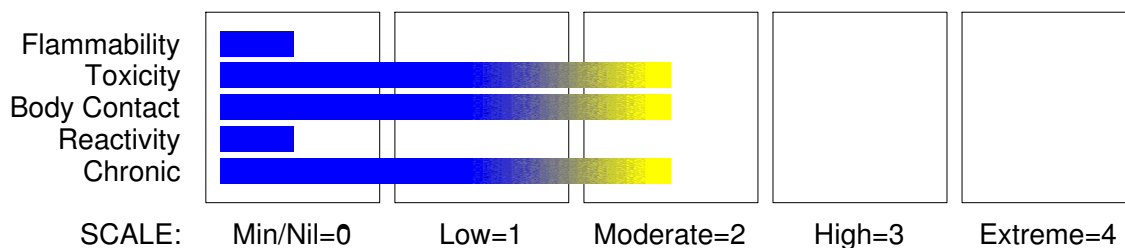
technical@sdfine.com

Telephone: 91- 22- 24959898

Telephone: 91- 22- 24959899

Fax: 91- 22- 24937232

HAZARD RATINGS



Section 2 - HAZARDS IDENTIFICATION

GHS Classification

Acute Toxicity (Oral) Category 5

Eye Irritation Category 2A

Organ Damage Category 2

Respiratory Irritation Category 3

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Section 2 - HAZARDS IDENTIFICATION



EMERGENCY OVERVIEW

HAZARD

WARNING

Determined by using GHS criteria:

H335 H303 H319 H373

May cause respiratory irritation

May be harmful if swallowed

Causes serious eye irritation

May cause damage to organs through prolonged or repeated exposure.

PRECAUTIONARY STATEMENTS

Prevention

Wash hands thoroughly after handling.

Do not breathe dust/fume/gas/mist/vapours/spray.

Response

If eye irritation persists, get medical advice/attention.

IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

Wear eye/face protection.

Get medical advice/attention if you feel unwell.

IF SWALLOWED: Call a POISON CENTER or doctor/physician if you feel unwell.

Disposal

Dispose of contents and container in accordance with relevant legislation.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
molybdenum(VI) oxide	1313-27-5	>98

Section 4 - FIRST AID MEASURES

SWALLOWED

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

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

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

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 of the throat, ONLY IF CONSCIOUS.

· Lean patient forward or place on left side (head-down position if possible) to maintain open airway and prevent aspiration.

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

· In the mean time, qualified first-aid personnel should treat the patient following

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Section 4 - FIRST AID MEASURES

observation and employing supportive measures as indicated by the patient's condition.

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

EYE

If this product comes in contact with the eyes:

- 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.
- If pain persists or recurs seek medical attention.
- 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.

Section 5 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA

- There is no restriction on the type of extinguisher which may be used.

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves for fire only.
- Prevent, by any means available, spillage from entering drains or water courses.
- 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.

FIRE/EXPLOSION HAZARD

Non combustible.

Not considered to be a significant fire risk.

Heating may cause expansion or decomposition leading to violent rupture of containers.

May emit poisonous fumes.

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Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

- Clean up all spills immediately.
- Avoid contact with skin and eyes.
- Wear protective clothing, gloves, safety glasses and dust respirator.
- Use dry clean up procedures and avoid generating dust.
- Sweep up or
- Vacuum up (consider explosion-proof machines designed to be grounded during storage and use).
- Place in clean drum then flush area with water.

MAJOR SPILLS

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Control personal contact by using protective equipment and dust respirator.
- Prevent spillage from entering drains, sewers or water courses.
- Recover product wherever possible. Avoid generating dust.
- Sweep / shovel up.
- If required, wet with water to prevent dusting.
- Put residues in labelled plastic bags or other containers for disposal.
- Wash area down with large quantity of water and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise emergency services.

EMERGENCY RESPONSE PLANNING GUIDELINES (ERPG)

The maximum airborne concentration below which it is believed that nearly all individuals could be exposed for up to one hour WITHOUT experiencing or developing

life-threatening health effects is:

molybdenum(VI) oxide 500 mg/m³

irreversible or other serious effects or symptoms which could impair an individual's ability to take protective action is:

molybdenum(VI) oxide 15 mg/m³

other than mild, transient adverse effects without perceiving a clearly defined odour is:

molybdenum(VI) oxide 15 mg/m³

The threshold concentration below which most people will experience no appreciable risk of health effects:

molybdenum(VI) oxide 15 mg/m³

American Industrial Hygiene Association (AIHA)

Ingredients considered according to the following cutoffs

Very Toxic (T+)	>= 0.1%	Toxic (T)	>= 3.0%
R50	>= 0.25%	Corrosive (C)	>= 5.0%
R51	>= 2.5%		
else	>= 10%		

where percentage is percentage of ingredient found in the mixture

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



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Section 6 - ACCIDENTAL RELEASE MEASURES

+ X + X 0 +

+: May be stored together

O: May be stored together with specific preventions

X: Must not be stored together

Personal Protective Equipment advice is contained in Section 8 of the MSDS.

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Limit all unnecessary personal contact.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- 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.
- 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.

SUITABLE CONTAINER

Glass container.

Plastic container.

- Metal can or drum
- Packaging as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.

STORAGE INCOMPATIBILITY

Avoid storage with chlorine trifluoride, lithium, magnesium, potassium and sodium.

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.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

• molybdenum(VI) oxide:

CAS:1313- 27- 5 CAS:39082- 25- 2 CAS:25942- 34- 1
CAS:62267- 35- 0 CAS:29135- 91- 9 CAS:252368- 25- 5
CAS:114316- 51- 7 CAS:114663- 84- 2
CAS:37376- 47- 9 CAS:199790- 61- 9 CAS:12412- 22- 5
CAS:12412- 21- 4 CAS:77835- 70- 2
CAS:390388- 97- 3 CAS:278186- 89- 3

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

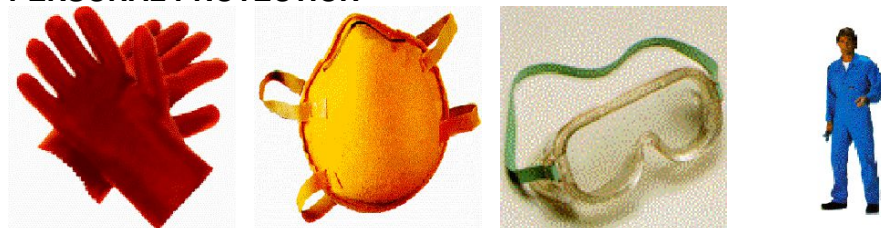
EMERGENCY EXPOSURE LIMITS

Material	Revised IDLH Value (mg/m3)	Revised IDLH Value (ppm)
molybdenum(VI) oxide	5, 000	

MATERIAL DATA

An increased incidence of non-specific symptoms including headache, weakness, fatigue, anorexia and joint and muscle weakness has been reported to occur in mining and metallurgy workers exposed to 60-600 mg (as Mo). Some investigators have attributed gout and elevated uric acid concentration found in some Armenians to result from exposures to Armenian soils rich in molybdenum, whilst exposure has been implicated as a cause of bone disease amongst Indians. "These involvements are speculative". [US National Research Council]. As far as it is known, the recommended TLV-TWA incorporates a large margin of safety against potential pulmonary or systemic effects.

PERSONAL PROTECTION



EYE

- Safety glasses with side shields
- Chemical goggles.
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of 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

Wear chemical protective gloves, eg. PVC.
Wear safety footwear.

OTHER

- Overalls.
- Eyewash unit.

RESPIRATOR

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

* - Negative pressure demand ** - Continuous flow.

The local concentration of material, quantity and conditions of use determine the type of

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

personal protective equipment required.
For further information consult your
Occupational Health and Safety Advisor.

ENGINEERING CONTROLS

- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.
- Exhaust ventilation should be designed to prevent accumulation and recirculation of particulates in the workplace.
- If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered. Such protection might consist of:
 - (a): particle dust respirators, if necessary, combined with an absorption cartridge;
 - (b): filter respirators with absorption cartridge or canister of the right type;
 - (c): fresh-air hoods or masks
- Build-up of electrostatic charge on the dust particle, may be prevented by bonding and grounding.
- Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.

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

Type of Contaminant:	Air Speed:
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1- 2.5 m/s (200- 500 f/min.)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5- 10 m/s (500- 2000 f/min.)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or 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 4-10 m/s (800-2000 f/min) for extraction of crusher dusts generated 2 metres 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.

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Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

White or yellow to slightly bluish powder or granules. Sparingly soluble in water (0.1g/100g water @ 18 C); very soluble in excess alkali with formation of molybdates, soluble in concentrated mixture of nitric acid and hydrochloric acid or nitric and sulfuric acid.

Two hydrates are known: MoO₃.HOH and MoO₃.2HOH.

PHYSICAL PROPERTIES

Solid.

Does not mix with water.

Sinks in water.

Molecular Weight: 143.94

Melting Range (°C): 795

Solubility in water (g/L): Immiscible

pH (1% solution): Not applicable.

Volatile Component (%vol): Not applicable.

Relative Vapour Density (air=1): 0.49 g/l @ 28 C

Lower Explosive Limit (%): Not applicable

Autoignition Temp (°C): Not applicable

State: Divided solid

Boiling Range (°C): 1150 (sublimes)

Specific Gravity (water=1): 4.70

pH (as supplied): Not applicable

Vapour Pressure (kPa): Not applicable.

Evaporation Rate: Not applicable

Flash Point (°C): Not applicable

Upper Explosive Limit (%): Not applicable

Decomposition Temp (°C): Not available.

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

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

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be damaging to the health of the individual. Molybdenum is of biological importance as an essential trace element in the Mo-flavoprotein enzyme, xanthine oxidase. It is also necessary for nitrogen-fixation by soil bacteria; livestock poisoning has been recorded in animals feeding on herbage containing high levels of molybdenum. Signs of molybdenum poisoning include loss of appetite, listlessness, diarrhoea and reduced growth rate. Anaemia is characteristic of molybdenum toxicity with low haemoglobin concentration and reduced red blood cell count. Livers and kidneys of severely poisoned animals show fatty degeneration. Other symptoms include achromotrichia (loss of hair pigment), testicular degeneration, poor conception and deficient lactation, dyspnoea, incoordination and irritation of the mucous membranes. Molybdenum depresses liver sulfide oxidase activity and the resulting sulfide accumulation leads to the formation of highly insoluble cupric sulfide and the subsequent appearance of copper deficiency. Symptoms of molybdenosis described above are similar to those of hypocuprosis.

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MOLYBDENUM TRIOXIDE

Section 11 - TOXICOLOGICAL INFORMATION

EYE

Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals.

Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

The dust may produce eye discomfort and abrasive eye inflammation.

SKIN

The material is not thought to produce adverse health effects or skin irritation following contact (as classified by EC Directives using animal models). Nevertheless, 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.

INHALED

Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system in a substantial number of individuals following inhalation. Although inhalation is not thought to produce harmful effects (as classified under EC Directives), the material may still produce health damage, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally confined to doses producing mortality rather than those producing morbidity (disease, ill-health).

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.

Bronchial and alveolar exudate are apparent in animals exposed to molybdenum by inhalation. Molybdenum fume may produce bronchial irritation and moderate fatty changes in liver and kidney.

CHRONIC HEALTH EFFECTS

Principal routes of exposure are by accidental skin and eye contact and inhalation of generated dusts.

Cattle, rabbits, and chicks on high dietary levels of molybdenum exhibited deformities of joints of the extremities. Chronic exposure of workers in Russian molybdenum-copper plant resulted in a fall in the albumin/globulin ratio owing to a rise in globulins (particularly alpha-globulins) which is interpreted as evidence of liver dysfunction with hyperbilirubinaemia. Hepatotoxic effects are also found in animals given molybdenum salts with a rise in alpha-globulin levels, hypoalbuminaemia and increased serum bilirubin reported. Other reported biochemical effects include an early depletive effect on tissue nicotinamide nucleotides, hyperaminoaciduria, reduction in red blood cell life-span and hyper-thyroidism. Industrial exposure to some insoluble molybdenum compounds is thought to have resulted in an increased incidence of weakness, fatigue, anorexia, headache and joint and muscular pain. Animals exposed to certain insoluble molybdenum compounds show anorexia, diarrhoea, weight loss, listlessness, and liver and kidney damage. Molybdenum disturbs bone metabolism, giving rise to lameness, bone joint abnormalities, osteoporosis and high serum phosphatase levels. Low molybdenum intake has been attributed to the high incidence of oesophageal cancer in South Africa among the Bantu of Transkei, in China and in Russia. Under the conditions of a 2-year inhalation study* there was equivocal evidence of carcinogenic activity of molybdenum trioxide in male rats, male mice and female mice based on a marginally significant positive trend of alveolar/bronchiolar adenoma or carcinoma. There was no evidence of carcinogenic activity in female rats exposed to 10, 30 and 100 mg/m³. Exposure of male and female rats to molybdenum trioxide by inhalation resulted in increased incidences of chronic alveolar inflammation, hyaline degeneration of the olfactory epithelium (females), hyaline degeneration of the respiratory epithelium and squamous metaplasia of the epiglottis. Exposure of female and

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MOLYBDENUM TRIOXIDE

Section 11 - TOXICOLOGICAL INFORMATION

male mice to molybdenum trioxide resulted in an increased incidence of metaplasia of the alveolar epithelium, histiocyte cellular inflammation (males), hyaline degeneration of the respiratory epithelium, hyaline degeneration of the olfactory epithelium (females), squamous metaplasia of the epiglottis, and hyperplasia of the larynx. Molybdenum trioxide was not mutagenic in any of five strains of *Salmonella typhimurium* and did not induce sister chromatid exchanges or chromosomal aberrations in cultured Chinese hamster ovary cells in vitro. All tests were conducted with or without S9 metabolic activation enzymes. National Toxicology Program: Technical Report Series 462, April 1997.

Persons exposed for long periods suffer from anaemia.

Pneumoconiosis has been described in experimental animals exposed sub-chronically to molybdenum trioxide.

Repeated exposures, in an occupational setting, to high levels of fine- divided dusts may produce a condition known as pneumoconiosis which is the lodgement of any inhaled dusts in the lung irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50,000 inch), are present. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion, increased chest expansion, weakness and weight loss. As the disease progresses the cough produces a stringy mucous, vital capacity decreases further and shortness of breath becomes more severe. Pneumoconiosis is the accumulation of dusts in the lungs and the tissue reaction in its presence. It is further classified as being of noncollagenous or collagenous types. Noncollagenous pneumoconiosis, the benign form, is identified by minimal stromal reaction, consists mainly of reticulin fibres, an intact alveolar architecture and is potentially reversible.

Guinea pigs exposed to the dust for 1 hour daily at 250 mg/m³ showed extreme irritation.

Symptoms include loss of appetite, weight loss, diarrhoea, muscular incoordination and loss of hair. Of the 51 animals exposed, 26 died after the tenth exposure.

Exposure to freshly generated MoO₂ fume under about the same exposure conditions proved unexpectedly less toxic, with only 8.3% mortality compared with 51% mortality with the dust, and no mortality when the exposure level was reduced to about one-third (57 mg Mo/m³). Explanation for this unexpected finding was felt to reside in the more rapid solution and elimination of the large surface area fume particle.

[Patty's]

Exposure of male and female rats to molybdenum trioxide resulted in the development of respiratory system lesions. In the lung, the incidence and severity of chronic alveolar inflammation increased with increasing exposure concentration in male and female rats. In some male rats, exposure to the material resulted in alveolar/ bronchiolar adenomas or carcinomas. Lesions in the nose (hyaline degeneration) and larynx (squamous metaplasia) were considered to be a non-specific defensive or adaptive response to chronic inhalation exposure.

Inhalation exposure of mice to molybdenum trioxide was associated with the development of lung neoplasms and an increased incidence of alveolar/ bronchiolar carcinoma or adenoma in both sexes. Chronic inflammatory lesions were not present in the lungs. Lesions of the nose and larynx were similar to those observed in rats.

The mechanism of molybdenum trioxide action in lung carcinogenicity is not known; the material is not mutagenic. Non-neoplastic lesions of the nose and larynx of rats and in the nose, larynx and lungs of mice were apparently due to the development of a more durable epithelium in response to chronic exposure.

The US Department of Health and Human Services (1) concluded that there was equivocal evidence of carcinogenic activity in male F344/N rats based on a marginally significant positive trend of alveolar/ bronchiolar adenoma or carcinoma; that there was no evidence of carcinogenic activity in female F344/N rats; that there was some evidence of carcinogenic activity in male B6C3F1 mice and that there was evidence of carcinogenic activity in female B6C3F1 mice.

(1) NTP Technical Report Series No. 462, April 1997

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Section 11 - TOXICOLOGICAL INFORMATION

TOXICITY AND IRRITATION

TOXICITY

Oral (rat) LD50: 2689 mg/kg
Inhalation (man) TCLo: 6 mg/m³/4y
Inhalation (rat) LC50: >5840 mg/m³/4h
Inhalation (rat) TCLo: 10 mg/m³/2h/90w- I
Intraperitoneal (mouse) LD50: 141 mg/kg
Subcutaneous (mouse) LD50: 94 mg/kg
Intraperitoneal (g.pig) LD75: 400 mg/kg
Dermal (rat) LD50: >2000 mg/kg
Neoplastic by RTECS criteria

IRRITATION

Nil Reported

Section 12 - ECOLOGICAL INFORMATION

No data for molybdenum(VI) oxide.

Section 13 - DISPOSAL CONSIDERATIONS

- Recycle wherever possible or consult manufacturer for recycling options.
- Consult State Land Waste Management Authority for disposal.
- Bury residue in an authorised landfill.
- Recycle containers if possible, or dispose of in an authorised landfill.

Section 14 - TRANSPORTATION INFORMATION

HAZCHEM: None

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

Section 15 - REGULATORY INFORMATION

REGULATIONS

molybdenum(VI) oxide (CAS: 1313-27-5) is found on the following regulatory lists;
International Council of Chemical Associations (ICCA) - High Production Volume List
OECD Representative List of High Production Volume (HPV) Chemicals

No data available for molybdenum(VI) oxide as CAS: 39082-25-2, CAS: 25942-34-1, CAS: 62267-35-0, CAS: 29135-91-9, CAS: 252368-25-5, CAS: 114316-51-7, CAS: 114663-84-2, CAS: 37376-47-9, CAS: 199790-61-9, CAS: 12412-22-5, CAS: 12412-21-4, CAS: 77835-70-2, CAS: 390388-97-3, CAS: 278186-89-3.

Section 16 - OTHER INFORMATION

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Section 16 - OTHER INFORMATION

INGREDIENTS WITH MULTIPLE CAS NUMBERS

Ingredient Name	CAS
molybdenum(VI) oxide	1313- 27- 5, 39082- 25- 2, 25942- 34- 1, 62267- 35- 0, 29135- 91- 9, 252368- 25- 5, 114316- 51- 7, 114663- 84- 2, 37376- 47 - 9, 199790- 61- 9, 12412- 22- 5, 12412- 21- 4, 77835- 70- 2, 390388- 97- 3, 278186- 89- 3

The above information is believed to be accurate and represent the best information currently available to us, but does not represent any warranty expressed or implied of the properties of the product. User should make their own investigation to determine the suitability of the information for their particular purpose.

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