PHENOLPHTHALEIN SOLN.

GHS Safety Data Sheet

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME
PHENOLPHTHALEIN SOLUTION

OTHER NAMES
"laboratory reagent"

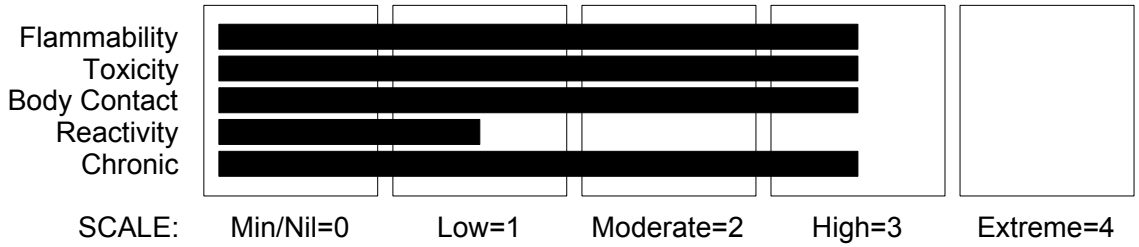
PROPER SHIPPING NAME
METHANOL

PRODUCT USE
Laboratory reagent.

SUPPLIER
Company: S D FINE - CHEM LIMITED
Address:
315- 317, T.V.IND.ESTATE,
248 WORLI ROAD,
MUMBAI- 400 030, INDIA
technical@sdfine.com
Telephone: 91- 22 24959898
Telephone: 91- 22 24959899
Fax: 91- 22 24937232

Section 2 - HAZARDS IDENTIFICATION

HAZARD RATINGS



GHS Classification
Acute Aquatic Hazard Category 3
Acute Toxicity (Dermal) Category 3
Acute Toxicity (Inhalation) Category 2
Acute Toxicity (Oral) Category 3
Carcinogen Category 1B
Eye Irritation Category 2B
Flammable Liquid Category 2
Organ Damage Category 1

continued...

Respiratory Effects Category 3
Respiratory Sensitizer Category 1
Skin Corrosion/Irritation Category 3
Skin Sensitizer Category 1

EMERGENCY OVERVIEW

HAZARD
DANGER
Determined by using GHS criteria:
H336 H225 H330 H301 H311 H316 H320 H334 H317 H350 H372 H402 H316 H320
May cause drowsiness or dizziness
Highly flammable liquid and vapour
Fatal if inhaled
Toxic if swallowed
Toxic in contact with skin
Causes mild skin irritation
Causes eye irritation
May cause allergic or asthmatic symptoms or breathing difficulties if inhaled
May cause allergic skin reaction
May cause CANCER
Causes damage to organs through prolonged or repeated exposure.
Harmful to aquatic life
Causes mild skin irritation
Causes eye irritation

PRECAUTIONARY STATEMENTS

Prevention
Obtain special instructions before use.
Do not handle until all safety precautions have been read and understood.
Keep away from heat/sparks/open flames/hot surfaces. - No smoking.
Keep container tightly closed.
Ground/bond container and receiving equipment.
Use explosion-proof electrical/ventilating/lighting equipment
Use only non-sparking tools.
Take precautionary measures against static discharge.
Do not breathe dust/fume/gas/mist/vapours/spray.
Avoid breathing dust/fume/gas/mist/vapours/spray.
Wash thoroughly after handling.
Do not eat, drink or smoke when using this product.
Use only outdoors or in a well-ventilated area.
Contaminated work clothing should not be allowed out of the workplace.
Avoid release to the environment.
Wear protective gloves/protective clothing/eye protection/face protection.
Use personal protective equipment as required.
Wear respiratory protection.
In case of inadequate ventilation wear respiratory protection.

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Response
IF SWALLOWED: Immediately call a POISON CENTER or doctor/physician.
IF ON SKIN: Wash with plenty of soap and water.
IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.
IF INHALED: Remove to fresh air and keep at rest in a position comfortable for breathing.
IF INHALED: If breathing is difficult, remove to fresh air and keep at rest in a position comfortable for breathing.
IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
IF exposed or concerned: Get medical advice/ attention.
Immediately call a POISON CENTER or doctor/physician.
Call a POISON CENTER or doctor/physician if you feel unwell.
Get medical advice/attention if you feel unwell.
Specific treatment is urgent (see MSDS).
Rinse mouth.
If skin irritation occurs: Get medical advice/ attention.
If skin irritation or rash occurs: Get medical advice/attention.
If eye irritation persists: Get medical advice/attention.
If experiencing respiratory symptoms: Call a POISON CENTER or doctor/physician.
Remove/Take off immediately all contaminated clothing.
Wash contaminated clothing before reuse.

Storage
Store in a well-ventilated place. Keep container tightly closed.
Store in a well-ventilated place. Keep cool.
Store locked up.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
methanol	67-56-1	99
phenolphthalein	77-09-8	1

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.

continued...

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 or hair contact occurs:
• Quickly but gently, wipe material off skin with a dry, clean cloth.
• Immediately remove all contaminated clothing, including footwear.
• Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.
• Transport to hospital, or doctor.

INHALED
• If fumes or combustion products are inhaled remove from contaminated area.
• Lay patient down. Keep warm and rested.
• Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
• Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.
• Transport to hospital, or doctor, without delay.

NOTES TO PHYSICIAN
■ For acute and short term repeated exposures to methanol:
• Toxicity results from accumulation of formaldehyde/formic acid.
• Clinical signs are usually limited to CNS, eyes and GI tract Severe metabolic acidosis may produce dyspnea and profound systemic effects which may become intractable. All symptomatic patients should have arterial pH measured. Evaluate airway, breathing and circulation.
• Stabilise obtunded patients by giving naloxone, glucose and thiamine.
• Decontaminate with Ipecac or lavage for patients presenting 2 hours post-ingestion. Charcoal does not absorb well; the usefulness of cathartic is not established.
• Forced diuresis is not effective; haemodialysis is recommended where peak methanol levels exceed 50 mg/dL (this correlates with serum bicarbonate levels below 18 mEq/L).
• Ethanol, maintained at levels between 100 and 150 mg/dL, inhibits formation of toxic metabolites and may be indicated when peak methanol levels exceed 20 mg/dL. An intravenous solution of ethanol in D5W is optimal.
• Folate, as leucovorin, may increase the oxidative removal of formic acid. 4-methylpyrazole may be an effective adjunct in the treatment. 8.Phenytoin may be preferable to diazepam for controlling seizure.
[Ellenhorn Barceloux: Medical Toxicology]
BIOLOGICAL EXPOSURE INDEX - BEI

Determinant	Index	Sampling Time	Comment
1. Methanol in urine	15 mg/l	End of shift	B, NS
2. Formic acid in urine	80 mg/gm creatinine	Before the shift at end of workweek	B, NS

B: Background levels occur in specimens collected from subjects NOT exposed.

NS: Non-specific determinant - observed following exposure to other materials.
for poisons (where specific treatment regime is absent):

continued...

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 oedema .
• 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 hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
• Drug therapy should be considered for pulmonary oedema.
• Hypotension with signs of hypovolaemia 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

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

FIRE FIGHTING
• Alert Fire Brigade and tell them location and nature of hazard.
• May be violently or explosively reactive.
• Wear full body protective clothing with breathing apparatus.
• Prevent, by any means available, spillage from entering drains or water course.
• Consider evacuation (or protect in place).
• Fight fire from a safe distance, with adequate cover.
• If safe, switch off electrical equipment until vapour fire hazard removed.
• Use water delivered as a fine spray to control fire and cool adjacent area.
• Avoid spraying water onto liquid pools.
• 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.

FIRE/EXPLOSION HAZARD
■ WARNING: In use may form flammable/ explosive vapour-air mixtures.
WARNING:
• Can become highly flammable in use.
• Avoid evaporation.

continued...

- Hot organic vapours or mist are capable of sudden spontaneous combustion when mixed with air even at temperatures below their published autoignition temperatures.
- The temperature of ignition decreases with increasing vapour volume and vapour/air contact times and is influenced by pressure change.
- Ignition may occur under elevated-temperature process conditions especially in processes performed under vacuum subjected to sudden ingress of air or in processes performed at elevated pressure, where sudden escape of vapours or mists to the atmosphere occurs.
- Liquid and vapour are highly flammable.
- Severe fire hazard when exposed to heat, flame and/or oxidisers.
- Vapour may travel a considerable distance to source of ignition.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
- On combustion, may emit toxic fumes of carbon monoxide (CO).

Combustion products include: carbon dioxide (CO_2), formaldehyde, other pyrolysis products typical of burning organic material.

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

PERSONAL PROTECTION

Glasses:	Gloves:	Respirator:
Safety Glasses.	PVC chemical resistant type.	Type AX Filter of sufficient capacity

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS
- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb small quantities with vermiculite or other absorbent material.
- Wipe up.
- Collect residues in a flammable waste container.

MAJOR SPILLS
- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- May be violently or explosively reactive.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.
- Consider evacuation (or protect in place).
- No smoking, naked lights or ignition sources.
- Increase ventilation.
- Stop leak if safe to do so.
- Water spray or fog may be used to disperse vapour.
- Contain or absorb spill with sand, earth or vermiculite.
- Use only spark-free shovels and explosion proof equipment.
- Collect recoverable product into labelled containers for recycling.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- If contamination of drains or waterways occurs, advise emergency services.

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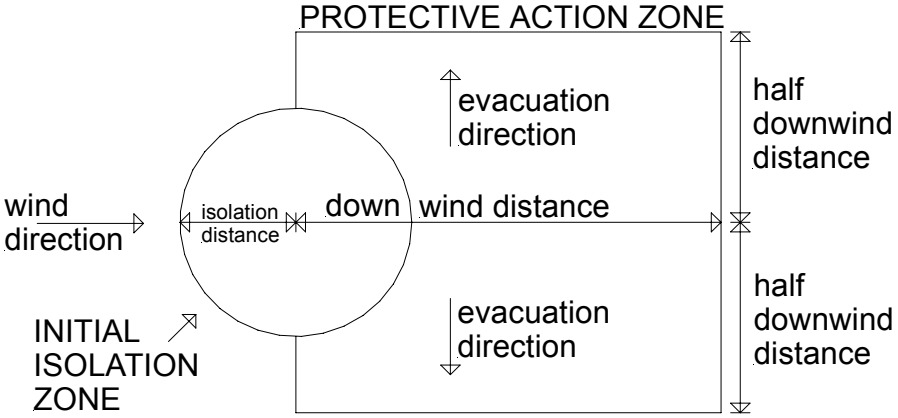
PROTECTIVE ACTIONS FOR SPILL



From IERG (Canada/Australia)

Isolation Distance	50 metres
Downwind Protection Distance	300 metres
IERG Number	16

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 131 is taken from the US DOT emergency response guide book.
6 IERG information is derived from CANUTEC - Transport Canada.

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:
methanol 5000ppm

irreversible or other serious effects or symptoms which could impair an individual's ability to take protective action is:
methanol 1000ppm

other than mild, transient adverse effects without perceiving a clearly defined odour is:
methanol 200ppm

American Industrial Hygiene Association (AIHA)

Ingredients considered according to the following cutoffs

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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

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

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- DO NOT allow clothing wet with material to stay in contact with skin.
- 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.
- Avoid smoking, naked lights, heat or ignition sources.
- When handling, DO NOT eat, drink or smoke.
- Vapour may ignite on pumping or pouring due to static electricity.
- DO NOT use plastic buckets.
- Earth and secure metal containers when dispensing or pouring product.
- Use spark-free tools when handling.
- Avoid contact with incompatible materials.
- Keep containers securely sealed.
- 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.

SUITABLE CONTAINER

- Packing as supplied by manufacturer.
- Plastic containers may only be used if approved for flammable liquid.
- Check that containers are clearly labelled and free from leaks.
- For low viscosity materials (i) : Drums and jerry cans must be of the non-removable head type. (ii) : 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)
- For manufactured product having a viscosity of at least 250 cSt. (23 deg. C)
- Manufactured product that requires stirring before use and having a viscosity of at least 20 cSt (25 deg. C)

(i) : Removable head packaging;
(ii) : Cans with friction closures and
(iii) : 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 there must be sufficient inert absorbent to absorb any spillage, unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.

STORAGE INCOMPATIBILITY

- Avoid reaction with oxidising agents.

STORAGE REQUIREMENTS

- Store in original containers in approved flame-proof area.

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• No smoking, naked lights, heat or ignition sources.
• DO NOT store in pits, depressions, basements or areas where vapours may be trapped.
• Keep containers securely sealed.
• Store away from incompatible materials in a cool, dry well ventilated area.
• Protect containers against physical damage and check regularly for leaks.
• Observe manufacturer's storing and handling recommendations.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS

X	X	X	X	X	+

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

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

Source	Material	TWA ppm	TWA mg/m³	STEL ppm	STEL mg/m³	Notes
Australia Exposure Standards	methanol (Methyl alcohol)	200	262	250	328	Sk

The following materials had no OELs on our records
• phenolphthalein: CAS:77- 09- 8

EMERGENCY EXPOSURE LIMITS

Material	Revised IDLH Value (mg/m3)	Revised IDLH Value (ppm)
methanol		6, 000

MATERIAL DATA
PHENOLPHTHALEIN SOLUTION 1% W/V IN METHANOL:
Not available

METHANOL:
■ For methanol:
Odour Threshold Value: 4.2-5960 ppm (detection), 53.0-8940 ppm (recognition)
NOTE: Detector tubes for methanol, measuring in excess of 50 ppm, are commercially available.
Exposure at or below the recommended TLV-TWA is thought to substantially reduce the significant risk of headache, blurred vision and other ocular and systemic effects.
Odour Safety Factor (OSF)
OSF=2 (METHANOL).

PHENOLPHTHALEIN:
■ 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.

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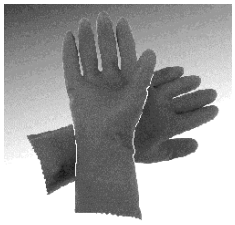
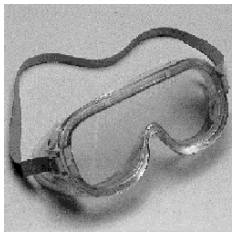
NOTE: The ACGIH occupational exposure standard for Particles Not Otherwise Specified (P.N.O.S) does NOT apply.

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 or safety gumboots, eg. Rubber.

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

RESPIRATOR

■ Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Breathing Zone Level ppm (volume)	Maximum Protection Factor	Half- face Respirator	Full- Face Respirator
1000	10	AX- AUS	-
1000	50	-	AX- AUS
5000	50	Airline *	-
5000	100	-	AX- 2
10000	100	-	AX- 3
	100+		Airline**

* - Continuous Flow ** - Continuous-flow or positive pressure demand.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required. For further information consult your

continued...

Occupational Health and Safety Advisor.

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 vapours.
- 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.

For flammable liquids and flammable gases, local exhaust ventilation or a process enclosure ventilation system may be required. Ventilation equipment should be explosion-resistant.

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, vapours, degreasing 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, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5- 1 m/s (100- 200 f/min.)
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.)

Within each range the appropriate value depends on:

continued...

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 m/s (200-400 f/min.) for extraction of solvents generated in a tank 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

APPEARANCE
Colourless, flammable liquid; mixes with water.

PHYSICAL PROPERTIES
Liquid.
Mixes with water.
Toxic or noxious vapours/gas.

State	Liquid	Molecular Weight	Not Applicable
Melting Range (°C)	Not Available	Viscosity	Not Available
Boiling Range (°C)	Not Available	Solubility in water (g/L)	Miscible
Flash Point (°C)	12	pH (1% solution)	Not Available
Decomposition Temp (°C)	Not Available	pH (as supplied)	Not Available
Autoignition Temp (°C)	464	Vapour Pressure (kPa)	13.332
Upper Explosive Limit (%)	37.0	Specific Gravity (water=1)	0.79
Lower Explosive Limit (%)	7.3	Relative Vapour Density (air=1)	Not Available
Volatile Component (%vol)	Not Available	Evaporation Rate	Not Available

Material	Value
METHANOL:	
log Kow	- 0.82- - 0.66

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY
• Presence of incompatible materials.
• Product is considered stable.
• Hazardous polymerisation will not occur.
For incompatible materials - refer to Section 7 - Handling and Storage.

continued...

Section 11 - TOXICOLOGICAL INFORMATION

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.
■ Methanol may produce a burning or painful sensation in the mouth, throat, chest, and stomach. This may be accompanied by nausea, vomiting, headache, dizziness, shortness of breath, weakness, fatigue, leg cramps, restlessness, confusion, drunken behaviour, visual disturbance, drowsiness, coma and death. These symptoms may not occur until several hours after exposure. Visual impairment produces blurring, double vision, colour distortion, reduced visual field, and blindness. In higher doses, the liver, kidney, heart and muscle can all be damaged. 10mL can cause blindness, and 60-200mL will cause death in adults.
■ Constant use of purgatives/laxatives may decrease the sensitivity of the intestinal mucosa causing a diminished response to normal stimuli. The redevelopment of a normal habit is thus prevented.

EYE
■ There is some evidence that material may produce eye irritation in some persons and produce eye damage 24 hours or more after instillation. Moderate inflammation may be expected with redness; conjunctivitis may occur with prolonged exposure.
■ The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

SKIN
■ Skin contact with the material may produce toxic effects; systemic effects may result following absorption.
■ There is some evidence to suggest that the material may cause moderate inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering.
■ 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.
■ The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

INHALED
■ Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may produce toxic effects.
■ The material is not thought to produce respiratory irritation (as classified by EC Directives using animal models). Nevertheless inhalation of vapours, fumes or aerosols, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress.
■ Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo.

CHRONIC HEALTH EFFECTS
■ There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population.
■ There is ample evidence that this material can be regarded as being able to cause cancer in humans based on experiments and other information.
■ Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.
Long-term exposure to methanol vapour, at concentrations exceeding 3000 ppm, may produce cumulative effects characterised by gastrointestinal disturbances (nausea, vomiting), headache, ringing in the ears, insomnia, trembling, unsteady gait, vertigo, conjunctivitis and clouded or double vision. Liver and/or kidney injury may also result. Some individuals show severe eye damage following prolonged exposure to 800 ppm of the vapour.

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Extended use of purgatives and laxatives can cause a profuse, watery diarrhoea with severe dehydration, mineral losses, weakness and weight loss. Absorption from the bowel may become impaired and damage to the heart and kidneys can also occur.

TOXICITY AND IRRITATION
■ None assigned. Refer to individual constituents.

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

TOXICITY	IRRITATION
Oral (human) LDLo: 143 mg/kg	Skin (rabbit): 20 mg/24 h- Moderate
Oral (man) LDLo: 6422 mg/kg	Eye (rabbit): 40 mg- Moderate
Oral (man) TDLo: 3429 mg/kg	Eye (rabbit): 100 mg/24h- Moderate
Oral (rat) LD50: 5628 mg/kg	
Inhalation (human) TCLo: 86000 mg/m³	
Inhalation (human) TCLo: 300 ppm	
Inhalation (rat) LC50: 64000 ppm/4h	
Dermal (rabbit) LD50: 15800 mg/kg	

■ The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.

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

TOXICITY	IRRITATION
Oral (rat) LD: >1000 mg/kg	Nil Reported
Oral (human) TDLo: 29 mg/kg	
Intraperitoneal (Rat) LD: 500 mg/kg	
Subcutaneous (Rat) TDLo: 95 mg/kg	
Subcutaneous (Rat) TDLo: 160 mg/kg	

■ For phenolphthalein

Phenolphthalein is absorbed in the small bowel and is conjugated in the liver to form phenolphthalein glucuronide, which is eliminated in the bile. As it passes through the small intestine, it is partially deconjugated and reabsorbed. Phenolphthalein and its glucuronide enhance oxygen radical production and cause oxidative damage in vitro. Phenolphthalein has also been shown to have low oestrogenic activity in some model systems. Phenolphthalein induced micronucleated erythrocytes in mice given multiple but not single treatments by gavage or in feed. Abnormal spermatozoa were induced in male mice but not male rats treated with phenolphthalein in the feed for 13 weeks. The malignant thymic lymphomas induced by phenolphthalein in female heterozygous p53-deficient mice showed loss of the normal p53 allele.
Phenolphthalein induced chromosomal aberrations, Hprt gene mutations and morphological transformation but not aneuploidy or ouabain-resistant mutations or sister chromatid exchange in cultured mammalian cells. It did not induce gene mutations in bacteria.

The main target organ for the toxic effects of phenolphthalein is reported to be the intestine.
Indiscriminate use of phenolphthalein results in chronic constipation and laxative dependence, loss of normal bowel function and bowel irritation. Habitual use for several years may cause a "cathartic colon", i.e. a poorly functioning colon with atonic dilatation, especially on the right side, resulting in extensive retention of the bowel contents. The clinical condition, which resembles chronic ulcerative colitis both radiologically and pathologically, involves thinning of the intestinal wall and loss of the normal mucosal pattern of the terminal ileum .
Anecdotal cases of long-term use or overdose of phenolphthalein have been associated with abdominal pain, diarrhoea, vomiting, electrolyte imbalance (hypokalaemia, hypocalcaemia and/or metabolic acidosis or alkalosis), dehydration, malabsorption, protein-losing gastroenteropathy, steatorrhoea, anorexia, weight loss, polydipsia, polyuria, cardiac arrhythmia, muscle weakness, prostration and histopathological lesions . Kidney, muscle and central nervous system disturbances are thought to be due to electrolyte imbalance. Loss of intestinal sodium and water stimulates compensatory renin production and secondary aldosteronism, leading to

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sodium conservation and potassium loss by the kidney. The hypokalaemia contributes to renal insufficiency and is sometimes associated with rhabdomyolysis.
Abuse of phenolphthalein-containing laxatives has been associated with gastrointestinal bleeding, iron-deficient anaemia, acute pancreatitis and multiple organ damage in cases of massive overdose, including fulminant hepatic failure and disseminated intravascular coagulation
Allergy to phenolphthalein is often manifested as cutaneous inflammatory reactions or fixed drug eruptions, i.e. solitary or multiple, well-defined, erythematous macules that may progress to vesicles and/or bullae. These lesions characteristically recur in the same location with each subsequent dose of phenolphthalein and generally leave residual hyperpigmentation that increases in intensity with each exposure; numerous melanin-containing dermal macrophages have been found in pigmented areas In extreme cases, recurrences have progressively more severe lesions characterised as bullous erythema multiforme, with focal haemorrhage and necrosis and perivascular lymphocytic infiltration and, in one case report, toxic epidermal necrolysis
A review of 204 cases of phenolphthalein ingestion in children aged five years and younger reported to the Pittsburgh Poison Center (USA) over a 30-month period indicated that ingestion of < 1 g was associated with a minimal risk of developing dehydration due to excessive diarrhoea and resulting fluid loss
Despite the profile of low acute toxicity documented in this study, cases of fatal poisoning of children have been reported; symptoms of pulmonary and cerebral oedema, multiple organ effects and encephalitis were attributed to hypersensitivity reactions. Repeated administration of phenolphthalein-containing laxatives to children has led to serious illness and multiple hospitalisations

Analogy with related biphenolic compounds suggests that phenolphthalein has oestrogenic activity; however, studies with MCF-7 human breast cancer cells in tissue culture and in rat uterus in vivo suggested only a weak oestrogenic response.
Phenolphthalein is a partial oestrogen in immature rat uteri. Doses of 1-10 mg given subcutaneously twice daily for two days to female Wistar rats weighing 35-40 g induced a dose-related increase in uterine weight, but the maximum increase was only about half of that induced by oestradiol. Phenolphthalein was shown to bind to the oestrogen receptor and was a competitive antagonist to oestradiol.
In a study reported in an abstract, exposure of female B6C3F1 mice to 1895 mg/kg bw phenolphthalein orally [method not stated] daily for 30 or 60 days caused no changes in weight gain, oestrous cycles or the numbers of oocyte-containing follicles of any class (primordial, primary, growing or antral), or any detectable pathological
change in ovarian cells. In a 1997 study there was no evidence of reproductive toxicity in female B6C3F1 mice or male or female Fischer 344/N rats. Lower epididymal weights and lower sperm density (number of sperm/g of crude epididymal tissue) were observed in male mice at 12 000, 25 000 and 50 000 mg/kg

Studies have shown that phenolphthalein, at high dose levels, is carcinogenic in mice and has a weak genotoxic (clastogenic) activity in vivo. With respect to the carcinogenicity study, the US FDA has stated that " the systemic exposures in rodents were approximately 40 to 70 fold and 60 to 100 fold the human exposure for rats and mice, respectively

Phenolphthalein is reasonably anticipated to be a human carcinogen based on sufficient evidence of increased incidence of malignant and/or combination of malignant and benign tumors in multiple tissue sites and in multiple species (IARC 2000). In a two-year B6C3F1 mouse carcinogenicity study, NTP (1996) concluded that phenolphthalein, administered in feed, induced significant increases in the incidence of histiocytic sarcoma and lymphomas of thymic origin in males and females and malignant lymphoma (all types) and benign ovarian sex cord stromal tumors in females. In the corresponding Fischer 344 rat dietary carcinogenicity study, phenolphthalein induced significant increases in the incidence of benign pheochromocytoma of the adrenal medulla in males and females and renal tubule adenoma in males (NTP 1996). In a 6-month dietary study with female heterozygous p53-deficient transgenic mice, phenolphthalein induced a significant increase in the incidence of malignant lymphoma of thymic origin .
A few epidemiological studies have investigated the association between the use of phenolphthalein-containing laxatives and colon cancer or adenomatous colorectal polyps. No consistent association was found.

Phenolphthalein has been identified as a multisite carcinogen in rodents, but the molecular species responsible for the carcinogenicity is not known. A catechol metabolite hydroxyphenolphthalein , w recently identified and may be the molecular species responsible for at least part of the toxicity/carcinogenicity The metabolite is an extremely potent mixed-type inhibitor of the O-methylation of the catechol estrogens. It has been suggested that chronic administration of phenolphthalein may enhance

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metabolic redox cycling of both the metabolite and the catechol estrogens and this, in turn, may contribute to hydroxyphenolphthalein-induced tumourigenesis.
Toxicol Appl. Pharmacol Vol 162(2) pp 124-131 2000

Although negative for mutagenicity and DNA damage in bacteria, phenolphthalein exhibits genetic activity in several in vitro and in vivo mammalian assays. Phenolphthalein was positive for the induction of chromosomal aberrations in cultured Chinese hamster ovary cells in the presence of metabolic activation and induced hprt gene mutations, chromosomal aberrations, and morphological transformation in Syrian hamster embryo cells. Phenolphthalein was also positive for the
induction of micronucleated erythrocytes in mice following multiple, but not single, treatments administered by gavage or dosed feed.
Phenolphthalein also induced micronuclei in female heterozygous p53-deficient transgenic mice exposed via dosed feed for 26 weeks.
Phenolphthalein was negative for Na/K ATPase gene mutations and aneuploidy in Syrian hamster embryo cells.
Tenth Annual Report on Carcinogens: Substance anticipated to be Carcinogen
[National Toxicology Program: U.S. Dep. of Health & Human Services 2002].
WARNING: This substance has been classified by the IARC as Group 2B: Possibly Carcinogenic to Humans.
Oral (rat) TDLo: 324000 mg/kg/13W-C

CARCINOGEN

Phenolphthalein	International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs	Group	2B

SKIN

methanol	Australia Exposure Standards - Skin	Notes	Sk

Section 12 - ECOLOGICAL INFORMATION

methanol 96 hr LC50 (100) mg/L Fathead minnow Fish Source: Experimental

Refer to data for ingredients, which follows:

METHANOL:
PHENOLPHTHALEIN:
BDH PHENOLPHTHALEIN SOLUTION 1% W/V IN METHANOL:
■ DO NOT discharge into sewer or waterways.

PHENOLPHTHALEIN SOLUTION

METHANOL:
■ For methanol:
log Kow : -0.82- -0.66
Half-life (hr) air : 427
Half-life (hr) H2O surface water : 5.3-64
Henry's atm m3 /mol: 1.35E-04
BOD 5 0.76-1.12
COD : 1.05-1.50, 99%
ThOD : 1.5
BCF : 0.2-10
Environmental Fate
TERRESTRIAL FATE: An estimated Koc value of 1 indicates that methanol is expected to have very high mobility in soil. Volatilisation of methanol from moist soil surfaces is expected to be an important fate process

continued...

given a Henry's Law constant of 4.55x10-6 atm-cu m/mole. The potential for volatilisation of methanol from dry soil surfaces may exist based upon a vapor pressure of 127 mm Hg. Biodegradation is expected to be an important fate process for methanol based on half-lives of 1 and 3.2 days measured in a sandy silt loam and sandy loam from Texas and Mississippi, respectively.
AQUATIC FATE: The estimated Koc indicates that methanol is not expected to adsorb to suspended solids and sediment. Volatilization from water surfaces is expected based upon a Henry's Law constant Usi
Henry's Law constant estimated volatilisation half-lives for a model river and model lake are 3 and 35 days, respectively. A BCF of less than 10 measured in fish, suggests bioconcentration in aquatic organisms is low. Hydrolysis and photolysis in sunlit surface waters is not expected to be an important environmental fate process for methanol since this compound lacks functional groups that hydrolyse or absorb light under environmentally relevant conditions. Methanol has been shown to undergo rapid biodegradation in a variety of screening studies using sewage seed and activated sludge inoculum, which suggests that biodegradation will occur in aquatic environments.
ATMOSPHERIC FATE: According to a model of gas/particle partitioning of semivolatile organic compounds in the atmosphere and vapour pressure, methanol is expected to exist solely as a vapor in the ambient atmosphere. Vapour-phase methanol is degraded in the atmosphere by reaction with photochemically-produced hydroxyl radicals(SRC); the half-life for this reaction in air is estimated to be 17 days, calculated from its rate constant of 9.4x10-13 cu cm/molecule-sec at 25 deg C
Ecotoxicity:
Fish LC50 (96 h) fathead minnow (Pimephales promelus) 29000 mg/l; rainbow trout (Oncorhyncus mykiss) 19000 mg/l; bluegill (Lepomis macrochirus) 15400 mg/l
Fish LC50 (7 d): guppy 10860 mg/l (14 d): 11.5 mg/l (semistatic)
Daphnia pulex LC50 (18 h): 19500 mg/l
Brine shrimp (Artemia salina) LC50 24 h): 1101.46-1578.84 mg/l (static)
Brown shrimp (Crangon crangon) LC50 (96 h): 1340 mg/l (semistatic)
Mussel (Mytilus edulis) LC50 (96 h): 15900 mg/l
Marine bacterium (Photobacterium posphoreum) LC50 (4 h): 7690 mg/l
Protozoa (Tetrahymena pyriformis) LC50 (48 h) 18756 mg/l.

PHENOLPHTHALEIN:

Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
methanol	LOW		LOW	HIGH
phenolphthalein	HIGH		LOW	LOW

Section 13 - DISPOSAL CONSIDERATIONS

- Recycle wherever possible.
- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- Dispose of by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or Incineration in a licenced apparatus (after admixture with suitable combustible material).
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.
- Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.

Otherwise:

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- Where possible retain label warnings and MSDS and observe all notices pertaining to the product.

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Section 14 - TRANSPORTATION INFORMATION

Labels Required: FLAMMABLE LIQUID,TOXIC

HAZCHEM:
□ *2WE Use alcohol resistant foam

Land Transport UNDG:

Class or division:	3	Subsidiary risk:	6.1
UN No.:	1230	UN packing group:	II

Shipping Name:METHANOL

Air Transport IATA:

ICAO/IATA Class:	3 (6.1)	ICAO/IATA Subrisk:	None
UN/ID Number:	1230	Packing Group:	II
Special provisions:	A104		

Shipping Name: METHANOL

Maritime Transport IMDG:

IMDG Class:	3	IMDG Subrisk:	6.1
UN Number:	1230	Packing Group:	II
EMS Number:	F- E, S- D	Special provisions:	279
Limited Quantities:	1 L		

Shipping Name: METHANOL

Section 15 - REGULATORY INFORMATION

REGULATIONS
Regulations for ingredients

methanol (CAS: 67-56-1) is found on the following regulatory lists;
"Australia - New South Wales Hazardous Substances Prohibited for Specific Uses","Australia Exposure Standards","Australia Hazardous Substances","Australia High Volume Industrial Chemical List (HVICL)","Australia Inventory of Chemical Substances (AICS)","Australia National Pollutant Inventory","Australia Standard for the Uniform Scheduling of Drugs and Poisons (SUSDP) - Appendix E (Part 2)","Australia Standard for the Uniform Scheduling of Drugs and Poisons (SUSDP) - Appendix F (Part 3)","Australia Standard for the Uniform Scheduling of Drugs and Poisons (SUSDP) - Schedule 5","Australia Standard for the Uniform Scheduling of Drugs and Poisons (SUSDP) - Schedule 6","GESAMP/EHS Composite List - GESAMP Hazard Profiles","IMO IBC Code Chapter 17: Summary of minimum requirements","IMO MARPOL 73/78 (Annex II) - List of Other Liquid Substances","International Council of Chemical Associations (ICCA) - High Production Volume List","OECD Representative List of High Production Volume (HPV) Chemicals"

phenolphthalein (CAS: 77-09-8) is found on the following regulatory lists;
"Australia Inventory of Chemical Substances (AICS)","International Agency for Research on Cancer (IARC) - Agents Reviewed by the IARC Monographs"

No data for Phenolphthalein Solution

continued...

Section 16 - OTHER INFORMATION

Denmark Advisory list for selfclassification of dangerous substances

Substance	CAS	Suggested codes
phenolphthalein	77- 09- 8	Xn Carc3; R40 Mut3; R68

REPRODUCTIVE HEALTH GUIDELINES

Ingredient	ORG	UF	Endpoint	CR	Adeq TLV
methanol	262 mg/m3	NA	NA	NA	Yes

■ These exposure guidelines have been derived from a screening level of risk assessment and should not be construed as unequivocally safe limits. ORGS represent an 8-hour time-weighted average unless specified otherwise.
CR = Cancer Risk/10000; UF = Uncertainty factor:
TLV believed to be adequate to protect reproductive health:
LOD: Limit of detection
Toxic endpoints have also been identified as:
D = Developmental; R = Reproductive; TC = Transplacental carcinogen
Jankovic J., Drake F.: A Screening Method for Occupational Reproductive
American Industrial Hygiene Association Journal 57: 641-649 (1996).
■ Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by using available literature 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.

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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