

GHS Safety Data Sheet Version No:2.0

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

OLEYL ALCOHOL

OTHER NAMES

C18-H36-O, CH3(CH2)7CH=CH(CH2)7CH2OH, "9-octadecen-1-ol, (Z)-", "9-octadecen-1-ol, (Z)-", lancol, cis-9-octadecen-1-ol, loxanol, "olive alcohol"

PRODUCT USE

Found naturally in fish-oil where it is usually found as a mixture of C16 and C18 unsaturated alcohols with C18 predominating. In the manufacture of sulfuric esters (detergents and wetting agents), as an anti-foam agent; metal cutting lubricants; in carbon paper, stencil paper, printing ink; plasticiser and softening agent; carrier for medications

SUPPLIER

Company: S D FINE- CHEM LIMITED

Address:

315-317, T.V. INDUSTRIAL ESTATE,

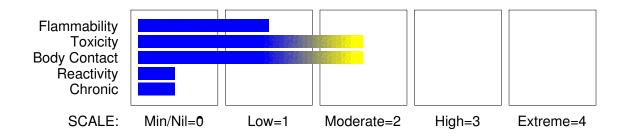
248, WORLI,

MUMBAI- 400030.INDIA. technical@sdfine.com

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HAZARD RATINGS



Section 2 - HAZARDS IDENTIFICATION

GHS Classification

Eye Irritation Category 2B Respiratory Effects Category 3

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Section 2 - HAZARDS IDENTIFICATION

Skin Corrosion/Irritation Category 2



EMERGENCY OVERVIEW

HAZARD

WARNING
Determined by using GHS criteria:
H336 H315 H320
May cause drowsiness and dizziness
Causes skin irritation
Causes eye irritation

PRECAUTIONARY STATEMENTS

Prevention

Wash thoroughly after handling. Wash hands thoroughly after handling.

Response

IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.

If skin irritation occurs, seek medical advice/attention.

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.

Wash/Decontaminate removed clothing before reuse. IF ON SKIN: Gently wash with plenty of soap and water. Remove/Take off immediately all contaminated clothing

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME CAS RN % oleyl alcohol 143-28-2 >98

Section 4 - FIRST AID MEASURES

SWALLOWED

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

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.

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Section 4 - FIRST AID MEASURES

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 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.

NOTES TO PHYSICIAN

To treat poisoning by the higher aliphatic alcohols:

- · Gastric lavage with copious amounts of water.
- · It may be beneficial to instill 60 ml of mineral oil into the stomach.
- · Oxygen and artificial respiration as needed.
- Electrolyte balance: it may be useful to start 500 ml. M/6 sodium bicarbonate intravenously but maintain a cautious and conservative attitude toward electrolyte replacement unless shock or severe acidosis threatens.
- · To protect the liver, maintain carbohydrate intake by intravenous infusions of glucose.
- · Haemodialysis if coma is deep and persistent. [GOSSELIN, SMITH HODGE: Clinical Toxicology of Commercial Products, Ed 5)

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 shock.
- · Monitor and treat, where necessary, for pulmonary oedema.
- · Anticipate and treat, where necessary, for seizures.
- \cdot 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.
- · Give activated charcoal.

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.
- \cdot If the patient is hypoglycaemic (decreased or loss of consciousness, tachycardia, pallor, dilated pupils, diaphoresis and/or dextrose strip or glucometer readings below 50 mg), give 50% dextrose.
- · Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- · Drug therapy should be considered for pulmonary oedema.
- · Treat seizures with diazepam.
- · Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT		

continued...

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Section 4 - FIRST AID MEASURES

- · Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- · Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- · Acidosis may respond to hyperventilation and bicarbonate therapy.
- · Haemodialysis might be considered in patients with severe intoxication.
- · Consult a toxicologist as necessary. BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994.

Section 5 - FIRE FIGHTING MEASURES

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 course.
- · 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

- Combustible.
- · Slight fire hazard when exposed to heat or flame.
- · Heating may cause expansion or decomposition leading to violent rupture of containers.
- · On combustion, may emit toxic fumes of carbon monoxide (CO).
- May emit acrid smoke.
- Mists containing combustible materials may be explosive.

FIRE INCOMPATIBILITY

Avoid mixing with strong oxidisers as ignition may result.

Personal Protective Equipment

Gloves, boots (chemical resistant).

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

Slippery when spilt.

- · 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.

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Section 6 - ACCIDENTAL RELEASE MEASURES

- · Contain and absorb spill with sand, earth, inert material or vermiculite.
- · Wipe up.
- · Place in a suitable labelled container for waste disposal.

MAJOR SPILLS

Slippery when spilt.

Minor hazard.

- · Clear area of personnel and move upwind.
- · 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 course.
- No smoking, naked lights or ignition sources.
- · Increase ventilation.
- · Stop leak if safe to do so.
- · Contain spill with sand, earth or vermiculite.
- · Collect recoverable product into labelled containers for recycling.
- · Absorb remaining product with sand, earth or vermiculite.
- · Collect solid residues and seal in labelled drums for disposal.
- · Wash area and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise emergency services.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS













- +: 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.

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Section 7 - HANDLING AND STORAGE

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

STORAGE INCOMPATIBILITY

Segregate from strong oxidisers.

STORAGE REQUIREMENTS

- Store in original containers.
- · Keep containers securely sealed.
- · No smoking, naked lights or ignition sources.
- · 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

oleyl alcohol:

CAS:143- 28- 2 CAS:84286- 21- 5 CAS:8014- 60- 6 CAS:8038- 59- 3 CAS:8029- 00- 3

MATERIAL DATA

No exposure limits set by NOHSC or ACGIH.

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

Nitrile gloves or Neoprene gloves or Polyethylene gloves. Wear chemical protective gloves, eg. PVC. Wear safety footwear.

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

OTHER

- · Overalls.
- · Barrier cream
- · Eyewash unit.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required.

For further information consult your

Occupational Health and Safety Advisor.

ENGINEERING CONTROLS

General exhaust is adequate under normal operating conditions. If risk of overexposure exists, wear SAA approved respirator. Correct fit is essential to obtain adequate protection. Provide adequate ventilation in warehouse or closed storage areas. 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 0.25- 0.5 m/s (50- 100 f/min) from tank (in still air) aerosols, fumes from pouring operations, 0.5- 1 m/s (100- 200 f/min.) intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation) direct spray, spray painting in shallow booths, 1- 2.5 m/s (200- 500 f/min) drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion) grinding, abrasive blasting, tumbling, high 2.5- 10 m/s (500- 2000 f/min.) speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).

Within each range the appropriate value depends on:

Lower end of the range

1: Room air currents minimal or favourable to
capture

2: Contaminants of low toxicity or of nuisance
value only

3: Intermittent, low production.

4: Large hood or large air mass in motion

Upper end of the range
1: Disturbing room air currents
2: Contaminants of high toxicity
3: High production, heavy use
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.

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Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

Oily pale yellow liquid; does not mix with water. Soluble in alcohol, ether.

PHYSICAL PROPERTIES

Liquid.

Does not mix with water.

Floats on water.

Molecular Weight: 268.47
Melting Range (℃): 13- 19
Solubility in water (g/L): Immiscible
pH (1% solution): Not applicable
Volatile Component (%vol): Not available
Relative Vapour Density (air=1): >1
Lower Explosive Limit (%): Not available
Autoignition Temp (℃): Not available

State: Liquid

log Kow : **0**.72

Boiling Range (°C): 305- 370 Specific Gravity (water=1): 0.85 pH (as supplied): Not applicable Vapour Pressure (kPa): Not available Evaporation Rate: Not available

Flash Point (°C): >110

Upper Explosive Limit (%): Not available 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. Effects on the nervous system characterise over-exposure to higher aliphatic alcohols. These include headache, muscle weakness, giddiness, ataxia, (loss of muscle coordination), confusion, delirium and coma. Gastrointestinal effects may include nausea, vomiting and diarrhoea. In the absence of effective treatment, respiratory arrest is the most common cause of death in animals acutely poisoned by the higher alcohols. Aspiration of liquid alcohols produces an especially toxic response as they are able to penetrate deeply in the lung where they are absorbed and may produce pulmonary injury. Those possessing lower viscosity elicit a greater response. The result is a high blood level and prompt death at doses otherwise tolerated by ingestion without aspiration. As a general observation, alcohols are more powerful central nervous system depressants than their aliphatic analogues. In sequence of decreasing depressant potential, tertiary alcohols with multiple substituent OH groups are more potent than secondary alcohols, which, in turn, are more potent than primary alcohols. The potential for overall systemic toxicity increases with molecular weight, principally because the water solubility is diminished

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Section 11 - TOXICOLOGICAL INFORMATION

and lipophilicity is increased.

EYE

Limited evidence exists, or practical experience suggests, that the material may cause eye irritation in a substantial number of individuals and/or is expected to 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 material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

SKIN

Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.

Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.

Most liquid alcohols appear to act as primary skin irritants in humans. Significant percutaneous absorption occurs in rabbits but not apparently in man.

The liquid may produce skin discomfort following prolonged contact. Defatting and/or drying of the skin may lead to dermatitis.

The material may produce severe skin irritation after prolonged or repeated exposure, and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) thickening of the epidermis.

Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.

INHALED

The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

Not normally a hazard due to non-volatile nature of product.

Inhalation hazard is increased at higher temperatures.

CHRONIC HEALTH EFFECTS

Principal routes of exposure are usually by skin contact and inhalation of vapour from heated material.

As with any chemical product, contact with unprotected bare skin; inhalation of vapour, mist or dust in work place atmosphere; or ingestion in any form, should be avoided by observing good occupational work practice.

TOXICITY AND IRRITATION

TOXICITY

IRRITATION

Nil Reported Skin (human): 75 mg/3d - I - Mild

Skin (rat) LD50: 100 mg/24h - Moderate

Skin (rabbit): 500 mg/24h - Mild

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Section 11 - TOXICOLOGICAL INFORMATION

Skin (rabbit): 100 mg/24h- SEVERE Eye (rabbit): 100 mg/24h - Mild Skin (gpg): 100 mg/24 - SEVERE

Section 12 - ECOLOGICAL INFORMATION

log Kow : 0.72

Toxicity Fish: LC50(96)72.83-102.04mg/L Toxicity invertebrate: LC50(96)68.95mg/L

Section 13 - DISPOSAL CONSIDERATIONS

- · Consult manufacturer for recycling options and recycle where possible .
- · Consult State Land Waste Management Authority for disposal.
- · Incinerate residue at an approved site.
- · 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

oleyl alcohol (CAS: 143-28-2) 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 oleyl alcohol as CAS: 84286-21-5, CAS: 8014-60-6, CAS: 8038-59-3, CAS: 8029-00-3.

Section 16 - OTHER INFORMATION

Denmark Advisory list for selfclassification of dangerous substances

Substance CAS Suggested codes olevl alcohol 143- 28- 2 N: R51/53

INGREDIENTS WITH MULTIPLE CAS NUMBERS

Ingredient Name oleyl alcohol

CAS 143- 28- 2, 84286- 21- 5, 8014 - 60- 6, 8038-59- 3, 8029- 00- 3

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Section 16 - OTHER INFORMATION

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.

Issue Date: 30-Mar-2018