

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 1 of 13

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

BARIUM NITRATE PURIFIED

OTHER NAMES

Ba-N2-O6, Ba(NO3)2, "barium dinitrate", "nitric acid, barium salt"

PROPER SHIPPING NAME

BARIUM NITRATE

PRODUCT USE

Manufacture of borium peroxide; pyrotechnics for green fire; green signal lights; in the vacuum-tube industry.

SUPPLIER

Company: S D FINE- CHEM LIMITED

Address:

315- 317, T.V. INDUSTRIAL ESTATE,

248, WORLI,

MUMBAI- 400030.INDIA.

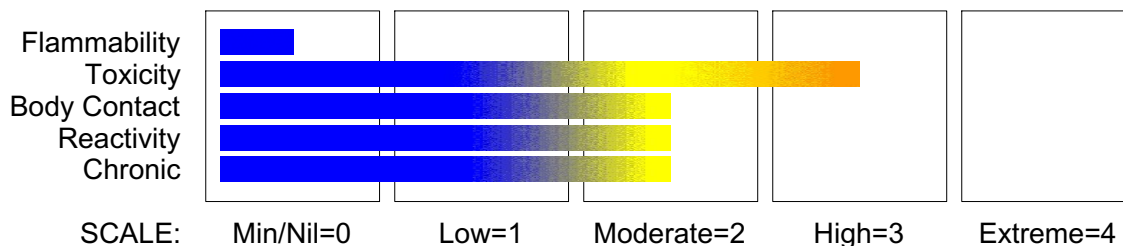
technical@sdfine.com

Telephone: 91- 22- 24959898

Telephone: 91- 22- 24959899

Fax: 91- 22- 24937232

HAZARD RATINGS



Section 2 - HAZARDS IDENTIFICATION

GHS Classification

Acute Aquatic Hazard Category 3

Acute Toxicity (Inhalation) Category 4

Acute Toxicity (Oral) Category 3

Eye Irritation Category 2A

Oxidizing Solid Category 2

Respiratory Irritation Category 3

Skin Corrosion/Irritation Category 3

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 2 of 13

Section 2 - HAZARDS IDENTIFICATION



EMERGENCY OVERVIEW

HAZARD

DANGER

Determined by using GHS criteria:

H335 H272 H301 H332 H316 H319 H402

May cause respiratory irritation

May intensify fire; oxidizer

Toxic if swallowed

Harmful if inhaled

Causes mild skin irritation

Causes serious eye irritation

Harmful to aquatic life

PRECAUTIONARY STATEMENTS

Prevention

Keep away from heat/sparks/open flames/hot surfaces. - No smoking.

Keep/Store away from clothing and other combustible materials.

Take any precaution to avoid mixing with combustibles.

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.

Avoid release to the environment.

Wear protective gloves/protective clothing/eye protection/face protection.

Response

IF SWALLOWED: Immediately call a POISON CENTER or doctor/physician.

IF INHALED: 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.

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

Rinse mouth.

If skin irritation occurs: Get medical advice/ attention.

If eye irritation persists: Get medical advice/attention.

Storage

Store in a well-ventilated place. Keep container tightly closed.

Store locked up.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
barium nitrate	10022-31-8	> 97

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 3 of 13

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 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:

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

SKIN

If skin contact occurs:

- Immediately remove all contaminated clothing, including footwear.
- Flush skin and hair with running water (and soap if available).
- Seek medical attention in event of irritation.

INHALED

- If 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

- After ingestion of barium acid salts, severe gastro-intestinal irritation followed by muscle twitching, progressive flaccid paralysis and severe hypokalemia and hypertension, occurs.
- Respiratory failure, renal failure and occasional cardiac dysrhythmias may result from an acute ingestion.
- Use sodium sulfate as a cathartic. Add 5-10 gm of sodium sulfate to lavage solution or as fluid supplement to Ipecac syrup (the sulfate salt is not absorbed)
- Monitor cardiac rhythm and serum potassium closely to establish the trend over the first 24 hours. Large doses of potassium may be needed to correct the hypokalemia.
- Administer generous amounts of fluid replacement but monitor the urine and serum for

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 4 of 13

Section 4 - FIRST AID MEASURES

evidence of renal failure. [Ellenhorn and Barceloux: Medical Toxicology].

The toxicity of nitrates and nitrites result from their vasodilating properties and their propensity to form methaemoglobin.

- Most produce a peak effect within 30 minutes.
- Clinical signs of cyanosis appear before other symptoms because of the dark pigmentation of methaemoglobin.
- Initial attention should be directed towards improving oxygen delivery, with assisted ventilation, if necessary. Hyperbaric oxygen has not demonstrated conclusive benefits.
- Institute cardiac monitoring, especially in patients with coronary artery or pulmonary disease.
- Hypotension should respond to Trendelenburg's position and intravenous fluids; otherwise dopamine may be needed.
- Naloxone, glucose and thiamine should be given if a multiple ingestion is suspected.
- Decontaminate using Ipecac Syrup for alert patients or lavage for obtunded patients who present within 2-4 hours of ingestion.
- Symptomatic patients with methaemoglobin levels over 30% should receive methylene blue. (Cyanosis alone, is not an indication for treatment). The usual dose is 1-2 mg/kg of a 1% solution (10 mg/ml) IV over 5 minutes; repeat, using the same dose if symptoms of hypoxia fail to subside within 1 hour.

[Ellenhorn and Barceloux: Medical Toxicology]

BIOLOGICAL EXPOSURE INDEX - BEI

These represent the determinants observed in specimens collected from a healthy worker who has been exposed at the Exposure Standard (ES or TLV):

Determinant	Index	Sampling Time	Comments
1. Methaemoglobin in blood	1.5% of haemoglobin	During or end of shift	B, NS, SQ

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

NS: Non-specific determinant; also observed after exposure to other materials

SQ: Semi-quantitative determinant - Interpretation may be ambiguous; should be used as a screening test or confirmatory test.

Section 5 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA

- Water spray or fog - Flooding quantities only.
- Foam.
- BCF (where regulations permit).
- Dry chemical Powder.
- 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 courses.
- Fight fire from a safe distance, with adequate cover.
- Extinguishers should be used only by trained personnel.
- Use water delivered as a fine spray to control fire and cool adjacent area.
- DO NOT approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.
- If fire gets out of control withdraw personnel and warn against entry.
- Equipment should be thoroughly decontaminated after use.

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 5 of 13

Section 5 - FIRE FIGHTING MEASURES

FIRE/EXPLOSION HAZARD

- Will not burn but increases intensity of fire.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
- Heat affected containers remain hazardous.
- Contact with combustibles such as wood, paper, oil or finely divided metal may produce spontaneous combustion or violent decomposition.
- May emit irritating, poisonous or corrosive fumes.

Decomposes on heating and produces acid and toxic fumes of: nitrogen oxides (NO_x).

FIRE INCOMPATIBILITY

- Oxidising agents as a class are not necessarily combustible themselves, but can increase the risk and intensity of fire in many other substances.

Avoid contact with acids, bases, acid anhydrides, reducing agents, magnesium, barium peroxide, zinc, aluminium and magnesium alloys.

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

- Clean up all spills immediately.
- No smoking, naked lights, ignition sources.
- Avoid all contact with any organic matter including fuel, solvents, sawdust, paper or cloth and other incompatible materials, as ignition may result.
- Avoid breathing dust or vapours and all contact with skin and eyes.
- Control personal contact by using protective equipment.
- Contain and absorb spill with dry sand, earth, inert material or vermiculite.
- DO NOT use sawdust as fire may result.
- Scoop up solid residues and seal in labelled drums for disposal.
- Neutralise/decontaminate area.

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 courses.
- No smoking, flames or ignition sources.
- Increase ventilation.
- Contain spill with sand, earth or other clean, inert materials.
- NEVER USE organic absorbents such as sawdust, paper or cloth.
- Use spark-free and explosion-proof equipment.
- Collect any recoverable product into labelled containers for possible recycling.
- Avoid contamination with organic matter to prevent subsequent fire and explosion.
- DO NOT mix fresh with recovered material.
- Collect residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- Decontaminate equipment and launder all protective clothing before storage and re-use.
- If contamination of drains or waterways occurs advise emergency services.

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

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 6 of 13

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Avoid personal contact and inhalation of dust, mist or vapours.
- Provide adequate ventilation.
- Always wear protective equipment and wash off any spillage from clothing.
- Keep material away from light, heat, flammables or combustibles.
- Keep cool, dry and away from incompatible materials.
- Avoid physical damage to containers.
- DO NOT repack or return unused portions to original containers. Withdraw only sufficient amounts for immediate use.
- Contamination can lead to decomposition leading to possible intense heat and fire.
- When handling NEVER smoke, eat or drink.
- Always wash hands with soap and water after handling.
- Use only good occupational work practice.
- Observe manufacturer's storing and handling directions.

SUITABLE CONTAINER

Plastic container.

Plastic drum.

Polylined drum.

- Check that containers are clearly labelled.
- Packaging as recommended by manufacturer.

STORAGE INCOMPATIBILITY

- Oxidising agents as a class are not necessarily combustible themselves, but can increase the risk and intensity of fire in many other substances.
- Avoid contact with acids, bases, acid anhydrides, reducing agents, magnesium, barium peroxide, zinc, aluminium and magnesium alloys.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed as supplied.
- Store in a cool, well ventilated area.
- Keep dry.
- Store under cover and away from sunlight.
- Store away from flammable or combustible materials, debris and waste. Contact may cause fire or violent reaction.
- Store away from incompatible materials and foodstuff containers.
- DO NOT stack on wooden floors or pallets.
- Protect containers from physical damage.
- Check regularly for leaks.
- Observe manufacturer's storage and handling recommendations.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



X X X X X 0

+: May be stored together

O: May be stored together with specific preventions

X: Must not be stored together

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 7 of 13

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

- barium nitrate: CAS:10022- 31- 8 CAS:34053- 87- 7

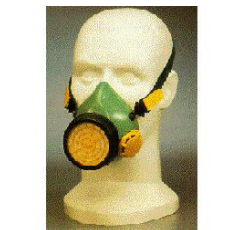
EMERGENCY EXPOSURE LIMITS

Material	Revised IDLH Value (mg/m3)	Revised IDLH Value (ppm)
barium nitrate	50	

MATERIAL DATA

The recommended TLV-TWA is based on satisfactory results achieved while employing an internal limit for barium nitrate at a national laboratory. It is not known what degree of added safety this limit incorporates.

PERSONAL PROTECTION



EYE

- Chemical goggles.
- Full face shield may be required for supplementary but never for primary protection of eyes
- Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].

HANDS/FEET

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

OTHER

- Eyewash unit.
- Ensure there is ready access to a safety shower.
Rubber apron.

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	-

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 8 of 13

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

100+ x ES	-	Air- line*	-
		Air- line**	PAPR- P3

* - Negative pressure demand ** - Continuous flow.

The local concentration of material, quantity and conditions of use determine the type of personal protective equipment required. For further information consult site specific data (if available), or your Occupational Health and Safety Advisor.

ENGINEERING CONTROLS

General exhaust is adequate under normal operating conditions. Local exhaust ventilation may be required in specific circumstances. If risk of overexposure exists, wear 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 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.)
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 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

Odourless, white crystals. Freely soluble in water.

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 9 of 13

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

PHYSICAL PROPERTIES

Solid.

Mixes with water.

Molecular Weight: 261.36

Melting Range (°C): 592

Solubility in water (g/L): Miscible

pH (1% solution): Not available.

Volatile Component (%vol): Nil.

Relative Vapour Density (air=1): Not applicable

Lower Explosive Limit (%): Not applicable

Autoignition Temp (°C): Not applicable

State: Divided solid

Boiling Range (°C): Decomposes > 592

Specific Gravity (water=1): 3.24

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 under normal handling conditions.
- Prolonged exposure to heat.
- Hazardous polymerisation will not occur.

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

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

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

All cases of acute oral barium poisoning in adults exhibit gastrointestinal disturbances as the initial symptoms. These include gastric pain, vomiting, and diarrhea.

Ingestion of soluble barium compounds may result in ulceration of the mucous membranes of the gastrointestinal tract, tightness in the muscles of the face and neck, gastroenteritis, vomiting, diarrhoea, muscular tremors and paralysis, anxiety, weakness, laboured breathing, cardiac irregularity due to contractions of smooth, striated and cardiac muscles (often violent and painful), slow irregular pulse, hypertension, convulsions and respiratory failure.

The predominant musculoskeletal effect observed in cases of barium toxicity in humans is progressive muscle weakness, often leading to partial or total paralysis. In severe cases, the paralysis affects the respiratory system. The likely cause of the muscle weakness was the barium-induced hypokalaemia (low potassium levels) rather than a direct effect on muscles.

Numbness and tingling around the mouth and neck were sometimes among the first symptoms of barium toxicity in humans. Occasionally, these neurological symptoms extended to the extremities. Partial and complete paralysis occurred in severe cases, often accompanied by an absence of deep tendon reflexes

Toxic effects on the kidneys have been observed in several adult cases of acute barium poisoning. Effects include hemoglobin in the urine (which may be indicative of kidney damage), renal insufficiency, degeneration of the kidneys, and acute renal failure.

Studies in animals suggest that the kidney is a critical target of barium toxicity. An

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 10 of 13

Section 11 - TOXICOLOGICAL INFORMATION

increase in relative kidney weight (kidney/brain weight ratio) was observed in male and female rats receiving a single gavage dose of 198 mg barium/kg/day as barium chloride in water. Acute exposure to presumably high doses of barium carbonate, barium sulfate, or barium chloride can result in serious effects on heart rhythm. Barium adversely affects cardiac automaticity resulting in ventricular tachycardia and other disruptions of rhythm. Hypotension has also been reported in some cases. The likely cause of these effects was barium-induced hypokalaemia. Several human studies have investigated a possible association between exposure to low levels of barium and alterations in blood pressure and cardiac rhythms. In a small-scale (11 subjects) study of individuals exposed to 0.1 or 0.2 mg barium/kg/day as barium chloride in drinking water for 4 weeks, no significant alterations in blood pressure or ECG readings were found. There was no significant alteration in blood pressure measurements or alterations in hypertension, heart disease, or stroke among residents of two communities with elevated (0.2 mg barium/kg/day) or low (0.003 mg barium/kg/day) levels of barium in drinking water. Significantly higher mortality rates for cardiovascular disease and heart disease (arteriosclerosis) were found in the elevated barium communities (0.06-0.3 mg barium/kg/day) than in the low barium communities (0.006 mg barium/kg/day). The largest difference between the groups was in individuals 65 years of age and older. These results should be interpreted cautiously because the study did not control for a number of potential confounding variables such as the use of water softeners, which would reduce the amount of barium and increase sodium levels, duration of exposure, or actual barium intakes.

Several animal studies have examined potential cardiovascular end points following acute-, intermediate-, or chronic-duration exposures. Significant increases in systolic blood pressure were observed in rats exposed to 8.6 or 11 mg barium/kg/day for 1 or 4 months, respectively; no effect levels were 1.0 and 1.2 mg barium/kg/day. When the duration of exposure was longer (8-16 months), the LOAEL for increased blood pressure was 0.80 mg barium/kg/day and the NOAEL was 0.17 mg barium/kg/day. Depressed rates of cardiac contraction and cardiac conductivity and decreased cardiac ATP levels were observed in another group of rats exposed to 7.2 mg barium/kg/day. In contrast to the findings in this study, a second study could find no significant alterations in blood pressure were observed in rats exposed to up to 150 mg barium/kg/day in drinking water for 16 weeks; it should be noted that the second was conducted in uninephrectomized rats or Dahl salt-sensitive and salt-resistant rats. NTP (1994) also found no significant alterations in blood pressure, heart rate, or ECG readings in rats exposed to 180 mg barium/kg/day for 45 or 90 days. The low metal diet used in the first study may have influenced the study outcome.

When evaluating the health effects of barium compounds, it is important to keep in mind that different barium compounds have different solubilities in water and body fluids and therefore serve as variable sources of the Ba²⁺ ion. The Ba²⁺ ion and the soluble compounds of barium (notably chloride, nitrate, and hydroxide) are generally highly toxic to humans and experimental animals. The insoluble barium compounds (notably sulfate) are inefficient sources of the Ba²⁺ ion and therefore are generally nontoxic. Although barium carbonate is insoluble in water, barium ions would be released from ingested barium carbonate in the acid milieu of the stomach.

The substance and/or its metabolites may bind to haemoglobin inhibiting normal uptake of oxygen. This condition, known as "methaemoglobinemia", is a form of oxygen starvation (anoxia).

Symptoms include cyanosis (a bluish discolouration skin and mucous membranes) and breathing difficulties. Symptoms may not be evident until several hours after exposure.

At about 15% concentration of blood methaemoglobin there is observable cyanosis of the lips, nose and earlobes. Symptoms may be absent although euphoria, flushed face and headache are commonly experienced. At 25-40%, cyanosis is marked but little disability occurs other than that produced on physical exertion. At 40-60%, symptoms include weakness, dizziness, lightheadedness, increasingly severe headache, ataxia, rapid shallow respiration, drowsiness, nausea, vomiting, confusion, lethargy and stupor. Above 60% symptoms include dyspnea, respiratory depression, tachycardia or bradycardia, and convulsions. Levels exceeding 70% may be fatal.

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 11 of 13

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 material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

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.

Solution of material in moisture on the skin, or perspiration, may increase irritant effects.

Open cuts, abraded or irritated skin should not be exposed to this material.

The material may cause 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) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

INHALED

Limited evidence exists, or practical experience predicts, that the material produces irritation of the respiratory system in a significant number of individuals following inhalation.

Barium fumes are respiratory irritants. Over-exposure to barium dusts and fume may result in rhinitis, frontal headache, wheezing, laryngeal spasm, salivation and anorexia. Long term effects include nervous disorders and adverse effects on the heart, circulatory system and musculature. Heavy exposures may result in a benign pneumoconiosis.

CHRONIC HEALTH EFFECTS

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

Workers exposed to barium compounds have been reported to show an increased incidence of hypertension, irritation of the respiratory system, and damage to the spleen, liver and bone marrow. Long term exposure to some barium compounds (especially inorganic species) may produce a condition known as baritosis, a form of benign pneumoconiosis. X-ray may show this when no other abnormal signs are present. 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. Barium sulfate produces noncollagenous pneumoconiosis identified by minimal stromal reaction, consisting mainly of reticulin fibres, an intact alveolar architecture and is potentially reversible. Miners of ores containing barium sulfate do not show symptoms, abnormal physical signs, an incapacity to work, diminished lung function, an increased likelihood of developing pulmonary or other bronchial infections or other thoracic disease despite the fact that particulate matter may have been retained in the lungs for many years. No changes in mortality were observed in rats chronically exposed to doses as high as 60 mg barium/kg/day as barium chloride in the drinking water. An increase in mortality, attributable to nephropathy, was observed in mice chronically exposed to 160 mg barium/kg/day as barium chloride in drinking water; the number of deaths was similar to controls in mice exposed to 75 mg barium/kg/day. In male mice exposed to 0.95 mg barium/kg/day as barium acetate in drinking water, a significant

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 12 of 13

Section 11 - TOXICOLOGICAL INFORMATION

decrease in longevity (defined as average lifespan of the last five surviving animals) was observed; however, no significant differences in mean lifespan were observed. Similarly, lifespan was not significantly altered in female mice exposed to 0.95 mg barium/kg/day or male or female rats exposed to 0.7 mg barium/kg/day as barium acetate in drinking water.

TOXICITY AND IRRITATION

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

TOXICITY

Oral (rat) LD50: 355 mg/kg

IRRITATION

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

Eye (rabbit): 100 mg/24h - Moderate

Section 12 - ECOLOGICAL INFORMATION

Harmful to aquatic organisms.

This material and its container must be disposed of as hazardous waste.

Section 13 - DISPOSAL CONSIDERATIONS

- Recycle wherever possible. Special hazard may exist - specialist advice may be required.
- Consult manufacturer for recycling options.
- Consult State Land Waste Management Authority for disposal.
- Treat and neutralise residue at an approved site.
- Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.
- Puncture containers to prevent re-use and bury at an authorised landfill.

Section 14 - TRANSPORTATION INFORMATION



Labels Required: OXIDIZING AGENT, TOXIC
HAZCHEM: 1Y

UNDG:

Dangerous Goods 5.1
Class:
UN Number: 1446
Shipping Name: BARIUM NITRATE

Subrisk: 6.1

Packing Group: II

Air Transport IATA:

ICAO/IATA Class: 5.1
UN/ID Number: 1446
Special provisions: None
Shipping Name: BARIUM NITRATE

ICAO/IATA Subrisk: 6.1

Packing Group: II

continued...

BARIUM NITRATE PURIFIED

GHS Safety Data Sheet

Version No:2.0

Page 13 of 13

Section 14 - TRANSPORTATION INFORMATION

Maritime Transport IMDG:

IMDG Class: 5.1
UN Number: 1446
EMS Number: F- A, S- Q
Limited Quantities: 1 kg
Shipping Name: BARIUM NITRATE

IMDG Subrisk: 6.1
Packing Group: II
Special provisions: None

Section 15 - REGULATORY INFORMATION

REGULATIONS

barium nitrate (CAS: 10022-31-8) is found on the following regulatory lists;
International Agency for Research on Cancer (IARC) Carcinogens
OECD Representative List of High Production Volume (HPV) Chemicals

barium nitrate (CAS: 34053-87-7) is found on the following regulatory lists;
International Agency for Research on Cancer (IARC) Carcinogens

Section 16 - OTHER INFORMATION

INGREDIENTS WITH MULTIPLE CAS NUMBERS

Ingredient Name	CAS
barium nitrate	10022- 31- 8, 34053- 87- 7

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 determine the suitability of the information for their particular purpose.

Issue Date: 12-May-2018