2-BUTOXYETHANOL

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME
2-BUTOXYETHANOL

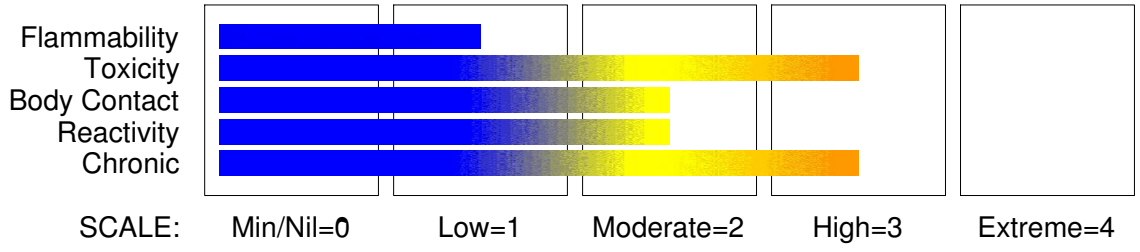
OTHER NAMES

C6-H14-O2, HOCH2-CH2-OC4-H9, "ethylene glycol monobutylether", butoxyethanol, "butyl cellosolve", n-butoxyethanol, n-butoxyethanol, 2-butoxyethan-1-o1, 2-butoxyethan-1-o1, "Ektasolve EB", "glycol ether EB", "o-butyl ethylene glycol", "o-butyl ethylene glycol", "Dowanol EB", "ethylene glycol n-butyl ether", "ethylene glycol n-butyl ether", "butyl glycol ether", "butyl oxitol", "butyl icinol", "butyl glysolv", 3-oxo-1-heptanol, 3-oxo-1 -heptanol, "Jeffersol EB", 2-butoxy-1-ethanol, 2-butoxy-1-ethanol, "Poly-solv EB", "ethanol, 2-butoxy-", "ethanol, 2-butoxy-", "2-butoxy ethanol", "2-butoxy ethanol", 2 -butoxyethanol, 2-butoxyethanol, "ethylene glycol mono-n-butyl ether", "ethylene glycol mono-n-butyl ether", BGE, 2-BE, 2-BE, EGMBE

PRODUCT USE
General solvent in paints, lacquers, varnishes, enamels, retarder thinners.
In combination with water in high flash cleaning solvents.
As a component of "soluble" mineral oils.

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



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Section 2 - HAZARDS IDENTIFICATION

GHS Classification

Acute Toxicity (Dermal) Category 4
Acute Toxicity (Inhalation) Category 3
Acute Toxicity (Oral) Category 3
Eye Irritation Category 2A
Reproductive Toxicity Category 1B
Reproductive Toxicity Category 2
Respiratory Effects Category 3
Skin Corrosion/Irritation Category 2

EMERGENCY OVERVIEW

HAZARD

DANGER
Determined by using GHS criteria:
H336 H331 H301 H312 H315 H319 H360 H361
May cause drowsiness and dizziness
Toxic if inhaled
Toxic if swallowed
Harmful in contact with skin
Causes skin irritation
Causes serious eye irritation
May damage the unborn child
Suspected of damaging fertility

PRECAUTIONARY STATEMENTS

Prevention

Do not breathe dust/fume/gas/mist/vapours/spray.
Use only outdoors or in a well ventilated area.
Obtain special instructions before use.
Wash thoroughly after handling.
Avoid breathing dust/fume/gas/mist/vapours/spray.
Wear protective gloves/clothing
Wash hands thoroughly after handling.
Do not eat, drink or smoke when using this product.
Do not handle until all safety precautions have been read and understood.
Use personal protective equipment as required.

Response

Keep container tightly closed.

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Wash contaminated clothing before reuse.
If eye irritation persists, get medical advice/attention.
If exposed or concerned: Get medical attention advice.
Wear eye/face protection.
IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
If skin irritation occurs, seek medical advice/attention.
Call a POISON CENTER or doctor/physician if you feel unwell.
Remove/Take off immediately all contaminated clothing
IF SWALLOWED: Immediately call a POISON CENTER or doctor/physician.
Specific treatment: refer to Label or MSDS.
IF INHALED: Remove to fresh air and keep at rest in a position comfortable for breathing.
Immediately call a POISON CENTER or doctor/physician.
IF ON SKIN: Gently wash with plenty of soap and water.
Wash/Decontaminate removed clothing before reuse.

Storage

Store locked up.

Disposal

Dispose of contents and container in accordance with relevant legislation.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
ethylene glycol monobutyl ether	111-76-2	>95

Section 4 - FIRST AID MEASURES

SWALLOWED

· IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.
· For advice, contact a Poisons Information Centre or a doctor.
· Urgent hospital treatment is likely to be needed.
· In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition.
· If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the MSDS should be provided. Further action will be the responsibility of the medical specialist.
· If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the MSDS.
· Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:
· INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
NOTE: Wear a protective glove when inducing vomiting by mechanical means.

EYE

If this product comes in contact with the eyes:
· Immediately hold eyelids apart and flush the eye continuously with running water.
· Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and

continued...

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.

NOTES TO PHYSICIAN

Followed acute or short term repeated exposures to ethylene glycol monoalkyl ethers and their acetates:
· Hepatic metabolism produces ethylene glycol as a metabolite.
· Clinical presentation, following severe intoxication, resembles that of ethylene glycol exposures.
· Monitoring the urinary excretion of the alkoxyacetic acid metabolites may be a useful indication of exposure.
[Ellenhorn and Barceloux: Medical Toxicology].
For acute or short term repeated exposures to ethylene glycol:
· Early treatment of ingestion is important. Ensure emesis is satisfactory.
· Test and correct for metabolic acidosis and hypocalcaemia.
· Apply sustained diuresis when possible with hypertonic mannitol.
· Evaluate renal status and begin haemodialysis if indicated. [I.L.O]
· Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective.
· Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution.
· Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites.
· Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days.
· Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis.
[Ellenhorn and Barceloux: Medical Toxicology]
It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated with

continued...

such exposures.
Laitinen J., et al: Occupational & Environmental Medicine 1996; 53, 595-600.

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.
· Wear full body protective clothing with breathing apparatus.
· 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.
Combustion products include: carbon dioxide (CO_2), other pyrolysis products typical of burning organic material.
May emit poisonous fumes.
May emit corrosive fumes.

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

Personal Protective Equipment
Breathing apparatus.
Chemical splash suit.

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

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.

continued...

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

MAJOR SPILLS

Moderate 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.

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:
ethylene glycol monobutyl ether 700 ppm

irreversible or other serious effects or symptoms which could impair an individual's ability to take protective action is:
ethylene glycol monobutyl ether 100 ppm

other than mild, transient adverse effects without perceiving a clearly defined odour is:
ethylene glycol monobutyl ether 50 ppm

The threshold concentration below which most people will experience no appreciable risk of health effects:
ethylene glycol monobutyl ether 50 ppm

American Industrial Hygiene Association (AIHA)

Ingredients considered according to the following cutoffs

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

where percentage is percentage of ingredient found in the mixture

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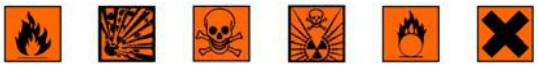
SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



+	X	+	X	0	+

+: May be stored together

continued...

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

DO NOT allow clothing wet with material to stay in contact with skin.
The substance accumulates peroxides which may become hazardous only if it evaporates or is distilled or otherwise treated to concentrate the peroxides. The substance may concentrate around the container opening for example.
Purchases of peroxidisable chemicals should be restricted to ensure that the chemical is used completely before it can become peroxidised.
· A responsible person should maintain an inventory of peroxidisable chemicals or annotate the general chemical inventory to indicate which chemicals are subject to peroxidation. An expiration date should be determined. The chemical should either be treated to remove peroxides or disposed of before this date.
· The person or laboratory receiving the chemical should record a receipt date on the bottle. The individual opening the container should add an opening date.
· Unopened containers received from the supplier should be safe to store for 18 months.
· Opened containers should not be stored for more than 12 months.
· 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 or ignition sources.
· 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.

SUITABLE CONTAINER

DO NOT use aluminium or galvanised containers.
· Metal can or drum
· Packaging as recommended by manufacturer.
· Check all containers are clearly labelled and free from leaks.

STORAGE INCOMPATIBILITY

Glycol ethers may form peroxides under certain conditions. In the presence of strong bases or the salts of strong bases, at elevated temperatures, the potential exists for runaway reactions. Contact with aluminium should be avoided. Release of hydrogen gas may result.
Avoid reaction with oxidising agents.

continued...

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

• ethylene glycol monobutyl ether: CAS:111- 76- 2

EMERGENCY EXPOSURE LIMITS

Material	Revised IDLH Value (mg/m3)	Revised IDLH Value (ppm)
ethylene glycol monobutyl ether		700 [Unch]

ODOUR SAFETY FACTOR (OSF)

OSF=2E2 (2-BUTOXY ETHANOL)

MATERIAL DATA

Exposed individuals are reasonably expected to be warned, by smell, that the Exposure Standard is being exceeded.
Odour Safety Factor (OSF) is determined to fall into either Class A or B.
The Odour Safety Factor (OSF) is defined as:
OSF= Exposure Standard (TWA) ppm/ Odour Threshold Value (OTV) ppm
Classification into classes follows:

Class	OSF	Description
A	550	Over 90% of exposed individuals are aware by smell that the Exposure Standard (TLV- TWA for example) is being reached, even when distracted by working activities
B	26- 550	As " A" for 50- 90% of persons being distracted
C	1- 26	As " A" for less than 50% of persons being distracted
D	0.18- 1	10- 50% of persons aware of being tested perceive by smell that the Exposure Standard is being reached
E	<0.18	As " D" for less than 10% of persons aware of being tested

.

Odour Threshold Value: 0.10 ppm (detection), 0.35 ppm (recognition)
Although rats appear to be more susceptible than other animals anaemia is

continued...

not uncommon amongst humans following exposure. The TLV reflects the need to maintain exposures below levels found to cause blood changes in experimental animals. It is concluded that this limit will reduce the significant risk of irritation, haematologic effects and other systemic effects observed in humans and animals exposed to higher vapour concentrations. The toxic effects typical of some other glycol ethers (pancytopenia, testis atrophy and teratogenic effects) are not found with this substance.

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

Suitability and durability of glove type is dependent on usage. Factors such as:
· frequency and duration of contact,
· chemical resistance of glove material,
· glove thickness and
· dexterity,
are important in the selection of gloves.
Wear chemical protective gloves, eg. PVC.
Wear safety footwear or safety gumboots, eg. Rubber.

OTHER

· Overalls.
· P.V.C. apron.
· Barrier cream.
· Skin cleansing cream.
· Eye wash unit.

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:
" Forsberg Clothing Performance Index" .
The effect(s) of the following substance(s) are taken into account in the

continued...

computer- generated selection: ethylene glycol monobutyl ether

BUTYL	A
PE/EVAL/PE	A
SARANEX- 23	A
NITRILE	B
PVC	B
NEOPRENE	B
NAT+NEOPR+NITRILE	C
PVA	C
NATURAL RUBBER	C

A: Best Selection
B: Satisfactory; may degrade after 4 hours continuous immersion
C: Poor to Dangerous Choice for other than short term immersion
NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -
* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

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	A- AUS	-
1000	50	-	A- AUS
5000	50	Airline *	-
5000	100	-	A- 2
10000	100	-	A- 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 Occupational Health and Safety Advisor.

ENGINEERING CONTROLS

Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection.
An approved self contained breathing apparatus (SCBA) may be required in some situations.
Provide adequate ventilation in warehouse or closed storage area. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine

continued...

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

Colourless liquid with slight rancid odour. Mixes with water and most organic solvents.

PHYSICAL PROPERTIES

Liquid.
Mixes with water.

Molecular Weight: 118.2	Boiling Range (°C): 171- 172
Melting Range (°C): - 70	Specific Gravity (water=1): 0.90 @ 20 C

continued...

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

Solubility in water (g/L): Miscible
pH (1% solution): Not available
Volatile Component (%vol): Approx. 100
Relative Vapour Density (air=1): 4.1
Lower Explosive Limit (%): 1.1
Autoignition Temp (°C): 238
State: Liquid

pH (as supplied): Not applicable
Vapour Pressure (kPa): 0.08 @ 20 C
Evaporation Rate: 0.1 BuAc=1
Flash Point (°C): 60- 68
Upper Explosive Limit (%): 10.6
Decomposition Temp (°C): Not available
Viscosity: Not Available

log Kow (Prager 1995): 0.83
log Kow (Sangster 1997): 0.8
log Kow: 0.76-0.83

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 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.

EYE
Evidence exists, or practical experience predicts, that the material may cause severe 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. Eye contact may cause significant inflammation with pain. Corneal injury may occur; permanent impairment of vision may result unless treatment is prompt and adequate. Repeated or prolonged exposure to irritants may cause inflammation characterised by a temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

SKIN
Skin contact with the material may be harmful; systemic effects may result following absorption.
Skin contact with the material may produce toxic effects; systemic effects may result following absorption.
The material produces mild skin irritation; evidence exists, or practical experience predicts, that the material either

· produces mild inflammation of the skin in a substantial number of individuals following

continued...

direct contact, and/or
· produces significant, but mild, 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.
Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

INHALED
Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful.
Inhalation hazard is increased at higher temperatures.
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.
If exposure to highly concentrated solvent atmosphere is prolonged this may lead to narcosis, unconsciousness, even coma and possible death.
Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.

CHRONIC HEALTH EFFECTS
On the basis, primarily, of animal experiments, concern has been expressed by at least one classification body that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment.
On the basis, primarily, of animal experiments, concern has been expressed that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment.
Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.
There is some evidence that human exposure to the material may result in developmental toxicity. This evidence is based on animal studies where effects have been observed in the absence of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not secondary non-specific consequences of the other toxic effects.
Exposure to the material may cause concerns for human fertility, on the basis that similar materials provide some evidence of impaired fertility in the absence of toxic effects, or evidence of impaired fertility occurring at around the same dose levels as other toxic effects, but which are not a secondary non-specific consequence of other toxic effects.
.
Studies with some ethylene glycol ethers and their esters indicate reproductive changes, testicular atrophy, infertility and kidney function changes. The metabolic acetic acid derivatives of the glycol ethers, not the ether itself, have been found to be the proximal reproductive toxin in animals. The potency of these metabolites decrease significantly as the chain length of the ether increases. Consequently glycol ethers with longer substituents (e.g diethylene glycols, triethylene glycols) have not generally been

continued...

associated with reproductive effects. One of the most sensitive indicators of toxic effects observed from many of the glycol ethers is an increase in the erythrocytic osmotic fragility in rats. This appears to be related to the development of haemoglobinuria (blood in the urine) at higher exposure levels or as a result of chronic exposure. Ethylene glycol ethers and acetates are mainly metabolised to alkoxyacetic acids but there is also a minor pathway through ethylene glycol to oxalic acid. The main pathway of ethylene glycol ethers is associated with significant clinical or experimental health effects, but the minor pathway is also interesting because formation of urinary stones depends principally upon urinary concentration of oxalate and calcium. In one study (1) the tendency to form urinary stones was 2.4 times higher amongst silk-screen printers exposed to ethylene glycol ethers, than among office workers. (1) Laitinen J., et al: Occupational Environmental Medicine 1996, 53 595-600.
Exposure of pregnant rats at 100 ppm or rabbits at 200 ppm during organogenesis resulted in maternal toxicity and embryotoxicity including a decreased number of viable implantations per litter. Slight foetoxicity in the form of poorly ossified or unossified skeletal elements was also apparent in rats. Teratogenic effects were not observed in other species.
At least one researcher has stated that the reproductive effects were less than that of other monoalkyl ethers of ethylene glycol.
Chronic exposure may cause anaemia, macrocytosis, abnormally large red cells and abnormal red cell fragility.
Exposure of male and female rats and mice for 14 weeks to 2 years produced a regenerative haemolytic anaemia and subsequent effects on the haemopoietic system in rats and mice. In addition, 2-butoxyethanol exposures caused increases in the incidence of neoplasms and nonneoplastic lesions (1). The occurrence of the anaemia was concentration-dependent and more pronounced in rats and females. In this study it was proposed that 2-butoxyethanol at concentrations of 500 ppm and greater produced an acute disseminated thrombosis and bone infarction in male and female rats as a result of severe acute haemolysis and reduced deformability of erythrocytes or through anoxic damage to endothelial cells that compromise blood flow. In two-year studies, 2-butoxyethanol continued to affect circulating erythroid mass, inducing a responsive anaemia. Rats showed a marginal increase in the incidence of benign or malignant pheochromocytomas (combined) of the adrenal gland. In mice, 2-butoxyethanol exposure resulted in a concentration dependent increase in the incidence of squamous cell papilloma or carcinoma of the forestomach. It was hypothesised that exposure-induced irritation produced inflammatory and hyperplastic effects in the forestomach and that the neoplasia were associated with a continuation of the injury/ degeneration process. Exposure also produced a concentration -dependent increase in the incidence of haemangiosarcoma of the liver of male mice and hepatocellular carcinoma.
1: NTP Toxicology Program Technical report Series 484, March 2000.

TOXICITY AND IRRITATION

TOXICITY
Oral (rat) LD50: 470 mg/kg
Dermal (rabbit) LD50: 220 mg/kg
Inhalation (human) TCLo: 100 ppm
Inhalation (human) TCLo: 195 ppm/8h * [Union Carbide]
Inhalation (rat- male) LC50: 486 ppm *
Inhalation (rat- female) LC50: 450 ppm *

IRRITATION
Skin (rabbit): 500 mg, open; Mild
Eye (rabbit): 100 mg/24h- Moderate
Eye (rabbit): 100 mg SEVERE

The material may produce severe irritation to the eye causing pronounced inflammation.
Repeated or prolonged exposure to irritants may produce conjunctivitis.

continued...

Section 11 - TOXICOLOGICAL INFORMATION

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.
NOTE: Changes in kidney, liver, spleen and lungs are observed in animals exposed to high concentrations of this substance by all routes.

Section 12 - ECOLOGICAL INFORMATION

Fish LC50 (96hr.) (mg/l):	1490
BCF<100:	0.4
log Kow (Prager 1995):	0.83
log Kow (Sangster 1997):	0.8
Half- life Soil - High (hours):	672
Half- life Soil - Low (hours):	168
Half- life Air - High (hours):	32.8
Half- life Air - Low (hours):	3.28
Half- life Surface water - High (hours):	672
Half- life Surface water - Low (hours):	168
Half- life Ground water - High (hours):	1344
Half- life Ground water - Low (hours):	336
Aqueous biodegradation - Aerobic - High (hours):	672
Aqueous biodegradation - Aerobic - Low (hours):	168
Aqueous biodegradation - Anaerobic - High (hours):	2688
Aqueous biodegradation - Anaerobic - Low (hours):	672
Photooxidation half- life air - High (hours):	32.8
Photooxidation half- life air - Low (hours):	3.28
Fish LC50 (96hr.) (mg/l):	1250- 1650
Daphnia magna EC50 (48hr.) (mg/l):	600- 1000

DO NOT discharge into sewer or waterways.
log Kow: 0.76-0.83
Koc: 67
Half-life (hr) air: 17
Henry's atm m^3 /mol: 2.08E-08
BOD 5 if unstated: 0.71
COD: 2.2
Log BCF: 0.4
Fish toxicity:
(-) 24h LD50: 983-1650 mg/L
(Fathead minnow) 96h LC50: 1700 mg/L **
Invertebrate toxicity:
cell mult. inhib.91-900mg/L
(Daphnia) 48h LC50: >1000 mg/L **
Bioaccumulation: not sig
Effects on algae and plankton: cell mult. inhib.35-900mg/L
Degradation Biological: rapid
processes Abiotic: no hydrol&photol,RxnOH*

** [Union Carbide]

continued...

Section 13 - DISPOSAL CONSIDERATIONS

· Recycle wherever possible or consult manufacturer for recycling options.
· Consult State Land Waste Authority for disposal.
· Bury or incinerate residue at an approved site.
· Recycle containers if possible, or dispose of in an authorised landfill.
· 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.

Section 14 - TRANSPORTATION INFORMATION

HAZCHEM: None

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

Section 15 - REGULATORY INFORMATION

REGULATIONS

ethylene glycol monobutyl ether (CAS: 111-76-2) is found on the following regulatory lists;
IMO MARPOL 73/78 (Annex II) - List of Other Liquid Substances
International Agency for Research on Cancer (IARC) Carcinogens
OECD Representative List of High Production Volume (HPV) Chemicals

Section 16 - OTHER INFORMATION

REPRODUCTIVE HEALTH GUIDELINES

Established occupational exposure limits frequently do not take into consideration reproductive end points that are clearly below the thresholds for other toxic effects. Occupational reproductive guidelines (ORGs) have been suggested as an additional standard. These have been established after a literature search for reproductive no -observed-adverse effect-level (NOAEL) and the lowest-observed-adverse-effect-level (LOAEL). In addition the US EPA's procedures for risk assessment for hazard identification and dose-response assessment as applied by NIOSH were used in the creation of such limits. Uncertainty factors (UFs) have also been incorporated.

Ingredient	ORG	UF	Endpoint	CR	Adeq TLV

continued...

ethylene glycol monobutyl ether	3.6 mg/m3	100	D	NA	-

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).

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Issue Date: 26-Mar-2018