

p-TOLUENE SULPHONIC ACID MONOHYDRATE

GHS Safety Data Sheet

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

p-TOLUENE SULPHONIC ACID MONOHYDRATE

OTHER NAMES

C7-H10-O4-S, "para-toluene-sulphonic acid monohydrate", "p-toluene sulfonic acid", "methylbenzenesulphonic acid", "toluenesulfonic acid".

PROPER SHIPPING NAME

ALKYLSULPHONIC ACIDS, SOLID
ARYLSULPHONIC ACIDS, SOLID

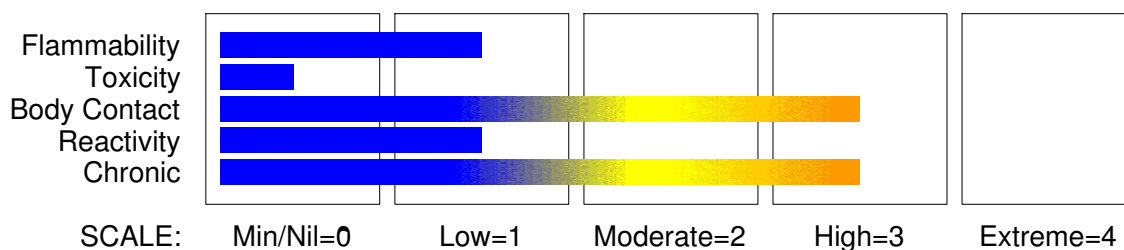
PRODUCT USE

The use of a quantity of material in an unventilated or confined space may result in increased exposure and an irritating atmosphere developing.
Before starting consider control of exposure by mechanical ventilation.
Manufacture of dyes, organic synthesis and as a catalyst.
Used in solution as accelerator, hardener, catalyst for amino and phenolic resins in coatings, foundry binders.

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 (Oral) Category 4
Carcinogen Category 1B
Metal Corrosion Category 1
Respiratory Effects Category 3
Respiratory Sensitizer Category 1
Skin Corrosion/Irritation Category 1C



EMERGENCY OVERVIEW

HAZARD

DANGER

Determined by using GHS criteria:

H336 H302 H334 H350 H290 H314

May cause drowsiness and dizziness

Harmful if swallowed

May cause allergic or asthmatic symptoms or breathing difficulties if inhaled

May cause cancer by inhalation

May be corrosive to metals

Causes severe skin burns and eye damage

PRECAUTIONARY STATEMENTS

Prevention

Wash hands thoroughly after handling.

Do not eat, drink or smoke when using this product.

Wash thoroughly after handling.

Do not breathe dust or mist.

In case of inadequate ventilation wear respiratory protection.

Use personal protective equipment as required.

Wear protective gloves/clothing and eye/face protection.

Do not handle until all safety precautions have been read and understood.

Avoid breathing dust/fume/gas/mist/vapours/spray.

Obtain special instructions before use.

Response

Wash contaminated clothing before reuse.

If experiencing respiratory symptoms call a POISON CENTER or doctor/physician.

If exposed or concerned: Get medical attention advice.

IF INHALED: If breathing is difficult, remove to fresh air and keep at rest in a position comfortable for breathing.

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

IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.

Specific treatment: refer to Label or MSDS.

If on skin or hair: remove/take off immediately all contaminated clothing. Rinse with

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Section 2 - HAZARDS IDENTIFICATION

water/shower.

Absorb spillage to prevent material damage.

Immediately call a POISON CENTER or doctor/physician.

IF INHALED: Remove to fresh air and keep at rest in a position comfortable for breathing.

Storage

Store in a corrosive resistant container with a resistant inliner.

Store locked up.

Disposal

Dispose of contents and container in accordance with relevant legislation.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
toluene- 4- sulfonic acid monohydrate	6192-52-5	>98
sulfuric acid	7664-93-9	<2
toluene	108-88-3	<0.5

Section 4 - FIRST AID MEASURES

SWALLOWED

- For advice, contact a Poisons Information Centre or a doctor at once.
- Urgent hospital treatment is likely to be needed.
- If swallowed do NOT induce vomiting.
- If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.
- Observe the patient carefully.
- Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.
- Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.
- Transport to hospital or doctor without delay.

EYE

If this product comes in contact with the eyes:

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

SKIN

If skin or hair contact occurs:

- Immediately flush body and clothes with large amounts of water, using safety shower if available.
- Quickly 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.

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Section 4 - FIRST AID MEASURES

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

For acute or short term repeated exposures to strong acids:

- Airway problems may arise from laryngeal edema and inhalation exposure. Treat with 100% oxygen initially.
- Respiratory distress may require cricothyroidotomy if endotracheal intubation is contraindicated by excessive swelling
- Intravenous lines should be established immediately in all cases where there is evidence of circulatory compromise.
- Strong acids produce a coagulation necrosis characterised by formation of a coagulum (eschar) as a result of the dessicating action of the acid on proteins in specific tissues.

INGESTION:

- Immediate dilution (milk or water) within 30 minutes post ingestion is recommended.
- DO NOT attempt to neutralise the acid since exothermic reaction may extend the corrosive injury.
- Be careful to avoid further vomit since re-exposure of the mucosa to the acid is harmful. Limit fluids to one or two glasses in an adult.
- Charcoal has no place in acid management.
- Some authors suggest the use of lavage within 1 hour of ingestion.

SKIN:

- Skin lesions require copious saline irrigation. Treat chemical burns as thermal burns with non-adherent gauze and wrapping.
- Deep second-degree burns may benefit from topical silver sulfadiazine.

EYE:

- Eye injuries require retraction of the eyelids to ensure thorough irrigation of the conjunctival cul-de-sacs. Irrigation should last at least 20-30 minutes. DO NOT use neutralising agents or any other additives. Several litres of saline are required.
- Cycloplegic drops, (1% cyclopentolate for short-term use or 5% homatropine for longer term use) antibiotic drops, vasoconstrictive agents or artificial tears may be indicated dependent on the severity of the injury.
- Steroid eye drops should only be administered with the approval of a consulting ophthalmologist).

[Ellenhorn and Barceloux: Medical Toxicology].

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.

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Section 5 - FIRE FIGHTING MEASURES

- Prevent, by any means available, spillage from entering drains or water course.
- Use fire fighting procedures suitable for surrounding area.
- Do not approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.
- Equipment should be thoroughly decontaminated after use.

FIRE/EXPLOSION HAZARD

- Combustible solid which burns but propagates flame with difficulty.
 - Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust may burn rapidly and fiercely if ignited.
 - Dry dust can be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport.
 - Build-up of electrostatic charge may be prevented by bonding and grounding.
 - Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting.
 - All movable parts coming in contact with this material should have a speed of less than 1-meter/sec.
 - Combustible.
 - Slight fire hazard when exposed to heat or flame.
 - Acids may react with metals to produce hydrogen, a highly flammable and explosive gas.
 - Heating may cause expansion or decomposition leading to violent rupture of containers.
 - May emit acrid smoke and corrosive fumes.
- Combustion products include: carbon monoxide (CO), carbon dioxide (CO₂), sulfur oxides (SO_x), other pyrolysis products typical of burning organic material.
- Contains low boiling substance: Closed containers may rupture due to pressure buildup under fire conditions.

FIRE INCOMPATIBILITY

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

Personal Protective Equipment

Gas tight chemical resistant suit.

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

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

MAJOR SPILLS

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.

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Section 6 - ACCIDENTAL RELEASE MEASURES

- Consider evacuation (or protect in place).
- Stop leak if safe to do so.
- Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labelled containers for recycling.
- Neutralise/decontaminate residue.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- If contamination of drains or waterways occurs, advise emergency services.

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:

toluene-4-sulfonic acid monohydrate	500 mg/m ³
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irreversible or other serious effects or symptoms which could impair an individual's ability to take protective action is:

toluene-4-sulfonic acid monohydrate	200 mg/m ³
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other than mild, transient adverse effects without perceiving a clearly defined odour is:

toluene-4-sulfonic acid monohydrate	30 mg/m ³
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The threshold concentration below which most people will experience no appreciable risk of health effects:

toluene-4-sulfonic acid monohydrate	10 mg/m ³
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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

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

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

Contains low boiling substance:

Storage in sealed containers may result in pressure buildup causing violent rupture of containers not rated appropriately.

- Check for bulging containers.
- Vent periodically
- Always release caps or seals slowly to ensure slow dissipation of vapours.
- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Avoid contact with moisture.
- 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.

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Section 7 - HANDLING AND STORAGE

- Work clothes should be laundered separately. Launder contaminated clothing before re-use.
- 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

DO NOT use aluminium or galvanised containers.
Check regularly for spills and leaks.

STORAGE INCOMPATIBILITY

Reacts with mild steel, galvanised steel / zinc producing hydrogen gas which may form an explosive mixture with air.
Avoid strong bases.
Segregate from alkalies, oxidising agents and chemicals readily decomposed by acids, i.e. cyanides, sulfides, carbonates.

STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- Store in a cool, dry, well-ventilated area.
- Store away from incompatible materials and foodstuff containers.
- Protect containers against physical damage and check regularly for leaks.
- Observe manufacturer's storing and handling recommendations.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



+ + + + + +

+: May be stored together

O: May be stored together with specific precautions

X: Must not be stored together

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

- toluene- 4- sulfonic acid monohydrate: CAS:6192- 52- 5 CAS:104- 15- 4
- sulfuric acid: CAS:7664- 93- 9
- toluene: CAS:108- 88- 3

EMERGENCY EXPOSURE LIMITS

Material	Revised IDLH Value (mg/m3)	Revised IDLH Value (ppm)
sulfuric acid	15	
toluene		500

ODOUR SAFETY FACTOR (OSF)

OSF=17 (toluene-4-sulfonic acid monohydrate)

Exposed individuals are NOT reasonably expected to be warned, by smell, that the Exposure Standard is being exceeded.

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

Odour Safety Factor (OSF) is determined to fall into either Class C, D or E.

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

MATERIAL DATA

INGREDIENT DATA

SULFURIC ACID:

NOTE: Detector tubes for sulfuric acid, measuring in excess of 1 mg/m³, are commercially available.

Based on controlled inhalation studies the TLV-TWA is thought to be protective against the significant risk of pulmonary irritation and incorporates a margin of safety so as to prevent injury to the skin and teeth seen in battery workers acclimatised to workplace concentrations of 16 mg/m³. Experimental evidence in normal unacclimated humans indicates the recognition, by all subjects, of odour, taste or irritation at 3 mg/m³ or 5 mg/m³. All subjects reported these levels to be objectionable but to varying degrees.

INGREDIENT DATA

WATER:

No exposure limits set by NOHSC or ACGIH.

TOLUENE:

Exposure limits with "skin" notation indicate that vapour and liquid may be absorbed through intact skin. Absorption by skin may readily exceed vapour inhalation exposure. Symptoms for skin absorption are the same as for inhalation. Contact with eyes and mucous membranes may also contribute to overall exposure and may also invalidate the exposure standard.

Odour Threshold Value: 0.16-6.7 (detection), 1.9-69 (recognition)

NOTE: Detector tubes measuring in excess of 5 ppm, are available.

High concentrations of toluene in the air produce depression of the central nervous system (CNS) in humans. Intentional toluene exposure (glue-sniffing) at maternally-intoxicating concentration has also produced birth defects. Foetotoxicity appears at levels associated with CNS narcosis and probably occurs only in those with chronic toluene-induced kidney failure. Exposure at or below the recommended TLV-TWA is thought to prevent transient headache and irritation, to provide a measure of

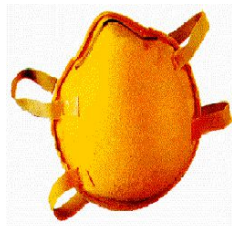
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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

safety for possible disturbances to human reproduction, the prevention of reductions in cognitive responses reported amongst humans inhaling greater than 40 ppm, and the significant risks of hepatotoxic, behavioural and nervous system effects (including impaired reaction time and incoordination). Although toluene/ethanol interactions are well recognised, the degree of protection afforded by the TLV-TWA among drinkers is not known.

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 or safety gumboots, eg. Rubber.

OTHER

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

RESPIRATOR

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

* - Negative pressure demand ** - Continuous flow.

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

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

ENGINEERING CONTROLS

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

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

Type of Contaminant:

direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).

Air Speed:

1- 2.5 m/s (200- 500 f/min.)

2.5- 10 m/s (500- 2000 f/min.)

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 4-10 m/s (800-2000 f/min) for extraction of crusher dusts generated 2 metres distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

White pinkish crystalline acidic solid. Slight characteristic odour

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Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

Soluble in water, alcohol and ether.

PHYSICAL PROPERTIES

Solid.
Mixes with water.
Corrosive.
Acid.

Molecular Weight: 190.22
Melting Range (°C): 140
Solubility in water (g/L): Soluble
pH (1% solution): 2 approx
Volatile Component (%vol): <0.5
Relative Vapour Density (air=1): > 1.0
Lower Explosive Limit (%): Not available
Autoignition Temp (°C): Not available
State: Divided solid

Boiling Range (°C): 220
Specific Gravity (water=1): 1.4 approx
pH (as supplied): Not applicable
Vapour Pressure (kPa): Negligible
Evaporation Rate: Non volatile
Flash Point (°C): Not Available
Upper Explosive Limit (%): Not available
Decomposition Temp (°C): Not Available
Viscosity: Not Applicable

log Kow (Sangster 1997): 2.73
log Kow: 2.1-3

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

Contact with alkaline material liberates heat.

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion.

The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern.

Ingestion of acidic corrosives may produce circumoral burns with a distinct discolouration of the mucous membranes of the mouth, throat and oesophagus. Immediate pain and difficulties in swallowing and speaking may also be evident. Oedema of the epiglottis may produce respiratory distress and possibly, asphyxia. Nausea, vomiting, diarrhoea and a pronounced thirst may occur. More severe exposures may produce a vomitus containing fresh or dark blood and large shreds of mucosa. Shock, with marked hypotension, weak and rapid pulse, shallow respiration and clammy skin may be symptomatic of the exposure. Circulatory collapse may, if left untreated, result in renal failure. Severe cases may show gastric and oesophageal perforation with peritonitis, fever and abdominal rigidity. Stricture of the oesophageal, gastric and pyloric sphincter may occur as within several weeks or may be delayed for years. Death may be rapid and often results from asphyxia, circulatory collapse or aspiration of even minute amounts. Delayed deaths may

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Section 11 - TOXICOLOGICAL INFORMATION

be due to peritonitis, severe nephritis or pneumonia. Coma and convulsions may be terminal.

EYE

When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation.

The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating.

The liquid produces a high level of eye discomfort and is capable of causing pain and severe conjunctivitis. Corneal injury may develop, with possible permanent impairment of vision, if not promptly and adequately treated.

Direct eye contact with acid corrosives may produce pain, lachrymation, photophobia and burns. Mild burns of the epithelia generally recover rapidly and completely. Severe burns produce long-lasting and possible irreversible damage. The appearance of the burn may not be apparent for several weeks after the initial contact. The cornea may ultimately become deeply vascularised and opaque resulting in blindness.

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

SKIN

The material can produce chemical burns following direct contact with the skin.

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.

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.

Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue.

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

INHALED

Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system in a substantial number of individuals following inhalation.

Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled.

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

Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.

The use of a quantity of material in an unventilated or confined space may result in increased exposure and an irritating atmosphere developing.

Before starting consider control of exposure by mechanical ventilation.

Acidic corrosives produce respiratory tract irritation with coughing, choking and mucous membrane damage. Symptoms of exposure may include dizziness, headache, nausea and weakness. In more severe exposures, pulmonary oedema may be evident either immediately or after a latent period of 5-72 hours. Symptoms of pulmonary oedema include a tightness in the chest, dyspnoea, frothy sputum and cyanosis. Examination may reveal hypotension, a weak and rapid pulse and moist rates. Death, due to anoxia, may occur several hours after onset of the pulmonary oedema.

The material may produce respiratory tract irritation. Symptoms of pulmonary irritation may include coughing, wheezing, laryngitis, shortness of breath, headache, nausea, and a burning sensation.

Unlike most organs, the lung can respond to a chemical insult or a chemical agent, by first removing or neutralising the irritant and then repairing the damage (inflammation

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Section 11 - TOXICOLOGICAL INFORMATION

of the lungs may be a consequence).

The repair process (which initially developed to protect mammalian lungs from foreign matter and antigens) may, however, cause further damage to the lungs (fibrosis for example) when activated by hazardous chemicals. Often, this results in an impairment of gas exchange, the primary function of the lungs. Therefore prolonged exposure to respiratory irritants may cause sustained breathing difficulties.

Exposure to high concentrations causes bronchitis and is characterised by the onset of haemorrhagic pulmonary oedema.

CHRONIC HEALTH EFFECTS

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

Repeated or prolonged exposure to acids may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis.

Long term exposure to high dust concentrations may cause changes in lung function (i.e. pneumoconiosis) caused by particles less than 0.5 micron penetrating and remaining in the lung. A prime symptom is breathlessness. Lung shadows show on X-ray.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

Limited evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a significant number of individuals at a greater frequency than would be expected from the response of a normal population.

Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking.

Occupational exposure to strong inorganic acid mists containing sulfuric acid is designated by IARC to be carcinogenic, increased risk of laryngeal cancer being seen with chronic exposures. Repeated minor exposures to mists can cause erosion of teeth and inflammation of the upper respiratory tract leading to chronic bronchitis. Repeated skin contact with dilute solutions may produce dermatitis. Lungs of sulfuric acid plant workers appear to be less affected than the lungs of workers exposed to "dust". There is evidence that corrosion of tooth enamel occurs at 1 mg/m³ but that acclimated workers could tolerate three to four times that level. Forming room workers in a battery factory exposed to 3 to 16 mg/m³ sulfuric acid mist concentrations exhibited the most serious signs of erosion whilst charging room workers, exposed to 0.08 to 2.5 mg/m³ were affected to a lesser degree. Workers chronically exposed to sulfuric acid mists may show various skin lesions, tracheobronchitis, stomatitis, conjunctivitis and gastritis.

Absorbed sulfonates are quickly distributed through living systems and are readily excreted. Toxic effects may result from the effects of binding to proteins and the ability of sulfonates to translocate potassium and nitrate (NO₃⁻) ions from cellular to interstitial fluids. Airborne sulfonates may be responsible for respiratory allergies and

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Section 11 - TOXICOLOGICAL INFORMATION

, in some instances, minor dermal allergies.

Chronic solvent inhalation exposures may result in nervous system impairment and liver and blood changes. [PATTYS].

TOXICITY AND IRRITATION

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

TOXICITY

Oral (rat) LD50: 2480 mg/kg

IRRITATION

Nil Reported

SULFURIC ACID:

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

TOXICITY

Oral (rat) LD50: 2140 mg/kg

Inhalation (rat) LC50: 510 mg/m³/2h

Inhalation (human) TCLO: 3 mg/m³/24w

IRRITATION

Eye (rabbit): 1.38 mg SEVERE

Eye (rabbit): 5 mg/30sec SEVERE

WARNING: For inhalation exposure ONLY: This substance has been classified by the IARC as Group 1: CARCINOGENIC TO HUMANS.

Occupational exposures to strong inorganic acid mists of sulfuric acid:

WATER:

unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.
No significant acute toxicological data identified in literature search.

TOLUENE:

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

TOXICITY

Oral (human) LDLo: 50 mg/kg

Oral (rat) LD50: 636 mg/kg

Inhalation (human) TCLO: 100 ppm

Inhalation (man) TCLO: 200 ppm

Inhalation (rat) LC50: >26700 ppm/1h

Dermal (rabbit) LD50: 12124 mg/kg

IRRITATION

Skin (rabbit):20 mg/24h- Moderate

Skin (rabbit):500 mg - Moderate

Eye (rabbit):0.87 mg - Mild

Eye (rabbit): 2mg/24h - SEVERE

Eye (rabbit):100 mg/30sec - Mild

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

Section 12 - ECOLOGICAL INFORMATION

Prevent, by any means available, spillage from entering drains or water courses.

DO NOT discharge into sewer or waterways.

Refer to data for ingredients, which follows:

SULFURIC ACID:

Prevent, by any means available, spillage from entering drains or water courses.

DO NOT discharge into sewer or waterways.

Sulfuric acid is soluble in water and remains indefinitely in the environment as sulfate.

Large discharges may contribute to the acidification of water and be fatal to aquatic life and soil micro-organisms.

Large discharges may contribute to the acidification of effluent treatment systems and injure sewage treatment organisms. [ICI UK]

TOLUENE:

Hazardous Air Pollutant:

Yes

continued...

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Section 12 - ECOLOGICAL INFORMATION

Fish LC50 (96hr.) (mg/l):	7.3- 22.8
BCF<100:	13.2 (EELS)
log Kow (Sangster 1997):	2.73
log Pow (Verschuereen 1983):	2.69
BOD5:	5%
COD:	21%
ThOD:	3.13
Half- life Soil - High (hours):	528
Half- life Soil - Low (hours):	96
Half- life Air - High (hours):	104
Half- life Air - Low (hours):	10
Half- life Surface water - High (hours):	528
Half- life Surface water - Low (hours):	96
Half- life Ground water - High (hours):	672
Half- life Ground water - Low (hours):	168
Aqueous biodegradation - Aerobic - High (hours):	528
Aqueous biodegradation - Aerobic - Low (hours):	96
Aqueous biodegradation - Anaerobic - High (hours):	5040
Aqueous biodegradation - Anaerobic - Low (hours):	1344
Aqueous biodegradation - Removal secondary treatment - High (hours):	75%
Photolysis maximum light absorption - High (nano- m):	268
Photolysis maximum light absorption - Low (nano- m):	253.5
Photooxidation half- life water - High (hours):	1284
Photooxidation half- life water - Low (hours):	321
Photooxidation half- life air - High (hours):	104
Photooxidation half- life air - Low (hours):	10

The lower molecular weight hydrocarbons are expected to form a "slick" on the surface of waters after release in calm sea conditions. This is expected to evaporate and enter the atmosphere where it will be degraded through reaction with hydroxy radicals.

Some of the material will become associated with benthic sediments, and it is likely to be spread over a fairly wide area of sea floor. Marine sediments may be either aerobic or anaerobic. The material, in probability, is biodegradable, under aerobic conditions (isomerised olefins and alkenes show variable results). Evidence also suggests that the hydrocarbons may be degradable under anaerobic conditions although such degradation in benthic sediments may be a relatively slow process.

Under aerobic conditions the material will degrade to water and carbon dioxide, while under anaerobic processes it will produce water, methane and carbon dioxide.

Based on test results, as well as theoretical considerations, the potential for bioaccumulation may be high. Toxic effects are often observed in species such as blue mussel, daphnia, freshwater green algae, marine copepods and amphipods.

DO NOT discharge into sewer or waterways.

log Kow: 2.1-3

log Koc: 1.12-2.85

Koc: 37-250

log Kom: 1.39-2.89

Half-life (hr) air: 2.4-104

Half-life (hr) H₂O surface water: 5.55-528

Half-life (hr) H₂O ground: 168-2628

Half-life (hr) soil: <48-240

Henry's Pa m³ /mol: 518-694

Henry's atm m³ /mol: 5.94E-03

BOD 5 if unstated: 0.86-2.12,5%

COD: 0.7-2.52,21-27%

ThOD: 3.13

BCF: 1.67-380

continued...

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Section 12 - ECOLOGICAL INFORMATION

Log BCF: 0.22-3.28

Section 13 - DISPOSAL CONSIDERATIONS

Recycle wherever possible.

- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- Treat and neutralise at an approved treatment plant. Treatment should involve : Mixing or slurring in water; Neutralisation with soda-lime or soda-ash followed by: Burial in a licenced land-fill or Incineration in a licenced apparatus (after admixture with suitable combustible material)
- Decontaminate empty containers with 5% aqueous sodium hydroxide or soda ash, followed by water. Observe all label safeguards until containers are cleaned and destroyed.
- Containers may still present a chemical hazard/ danger when empty.
- Return to supplier for reuse/ recycling if possible.

Otherwise:

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

WASTE DISPOSAL PROCEDURES

- Dissolve the recoverable quantities of p- toluenesulfonic acid in a hydrocarbon solvent and incinerate in an incinerator equipped with an afterburner and scrubber [Armour 1996].

SPILLAGE DISPOSAL

- Wear eye protection, protective clothing and nitrile rubber gloves to control personal contact from p- toluenesulfonic acid. Collect the compound and add to a container of cold water. Neutralise with sodium carbonate and empty into the drain [Armour 1996].

Section 14 - TRANSPORTATION INFORMATION



Labels Required: CORROSIVE
HAZCHEM: 2X

UNDG:

Dangerous Goods Class: 8

UN Number: 2585

Subrisk:

Packing Group:

None

III

Shipping Name:ALKYLSULPHONIC ACIDS, SOLID
ARYLSULPHONIC ACIDS, SOLID

continued...

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Section 14 - TRANSPORTATION INFORMATION

Air Transport IATA:

ICAO/IATA Class:	8	ICAO/IATA Subrisk:	None
UN/ID Number:	2585	Packing Group:	III
Special provisions:	None		
Shipping Name: ALKYL SULPHONIC ACIDS, SOLID WITH 5% OR LESS FREE SULPHURIC ACID			

Maritime Transport IMDG:

IMDG Class:	8	IMDG Subrisk:	None
UN Number:	2585	Packing Group:	III
EMS Number:	F- A, S- B	Special provisions:	None
Shipping Name: ALKYL SULPHONIC ACIDS, SOLID or ARYL SULPHONIC ACIDS, SOLID with not more than 5% free sulphuric acid			

Section 15 - REGULATORY INFORMATION

REGULATIONS

toluene-4-sulfonic acid monohydrate (CAS: 6192-52-5) is found on the following regulatory lists;
International Council of Chemical Associations (ICCA) - High Production Volume List
OECD Representative List of High Production Volume (HPV) Chemicals

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
toluene	9.6 mg/m ³	10	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).

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

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Section 16 - OTHER INFORMATION

of the properties of the product. User should make their own investigation to determine the suitability of the information for their particular purpose.

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