

CHOLINE CHLORIDE

GHS Safety Data Sheet

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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

CHOLINE CHLORIDE

OTHER NAMES

C5-H14-Cl-NO, "ethanaminium, 2-hydroxy-N, N, N-trimethyl-, chloride", "ammonium, (2-hydroxyethyl)trimethyl-, chloride", "choline chlorhydrate", "cholinium chloride", "(2-hydroxyethyl)trimethylammonium chloride", Biocolina, Hepacholine, Lipotril

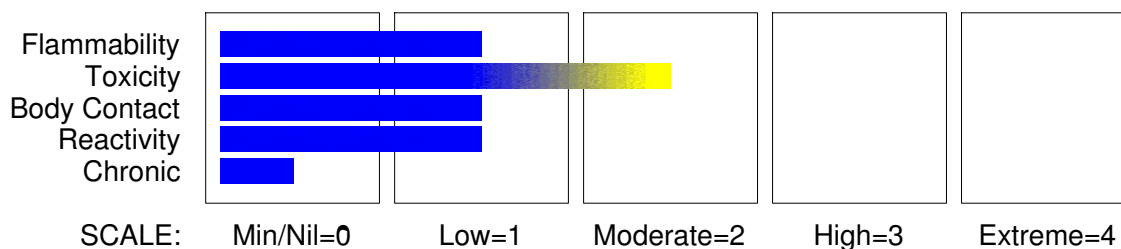
PRODUCT USE

Dietary supplement (lipotropic factor).
 Choline functions as a methyl donor in metabolic processes.
 Though choline is an essential factor in animal and human nutrition it is not strictly a vitamin. Choline deficiency can be produced by limiting the intake of both choline and protein together.
 Has been given in disorders believed to be associated with cholinergic activity in the brain e.g. ataxia (loss of muscle co-ordination), Huntington's chorea, Alzheimer's disease and tardive dyskinesia (characterised by continuous chewing movements).

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 Aquatic Hazard Category 2
Acute Toxicity (Oral) Category 5

EMERGENCY OVERVIEW

HAZARD

WARNING
Determined by using GHS criteria:
H303 H401
May be harmful if swallowed
Toxic to aquatic life

PRECAUTIONARY STATEMENTS

Response

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

Disposal

Dispose of contents and container in accordance with relevant legislation.

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
choline chloride	67-48-1	>98

Section 4 - FIRST AID MEASURES

SWALLOWED

For advice, contact a Poisons Information Centre or a doctor.
· 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.
· Immediately give a glass of water.

EYE

If this product comes in contact with the eyes:
· Wash out immediately with fresh running water.
· Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
· If pain persists or recurs seek medical attention.
· Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

SKIN

If skin contact occurs:
· Immediately remove all contaminated clothing, including footwear.

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Section 4 - FIRST AID MEASURES

- Flush skin and hair with running water (and soap if available).
- Seek medical attention in event of irritation.

INHALED

- If dust is inhaled, remove from contaminated area.
- Encourage patient to blow nose to ensure clear passage of breathing.
- If irritation or discomfort persists seek medical attention.
- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.
- Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
- Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.
- Transport to hospital, or doctor, without delay.

NOTES TO PHYSICIAN

For exposures to quaternary ammonium compounds;

- For ingestion of concentrated solutions (10% or higher): Swallow promptly a large quantity of milk, egg whites / gelatin solution. If not readily available, a slurry of activated charcoal may be useful. Avoid alcohol. Because of probable mucosal damage omit gastric lavage and emetic drugs.

- For dilute solutions (2% or less): If little or no emesis appears spontaneously, administer syrup of Ipecac or perform gastric lavage.

- If hypotension becomes severe, institute measures against circulatory shock.

- If respiration laboured, administer oxygen and support breathing mechanically.

Oropharyngeal airway may be inserted in absence of gag reflex. Epiglottic or laryngeal edema may necessitate a tracheotomy.

- Persistent convulsions may be controlled by cautious intravenous injection of diazepam or short-acting barbiturate drugs. [Gosselin et al, Clinical Toxicology of Commercial Products].

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 breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water courses.
- 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

- Solid which exhibits difficult combustion or is difficult to ignite.

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Section 5 - FIRE FIGHTING MEASURES

- 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 also 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-metre/sec.
- Combustion products include: carbon monoxide (CO), nitrogen oxides (NO_x) and hydrogen chloride.

FIRE INCOMPATIBILITY

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

Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS

- Clean up all spills immediately.
- Avoid contact with skin and eyes.
- Wear impervious gloves and safety glasses.
- 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 spilled material in clean, dry, sealable, labelled container.

MAJOR SPILLS

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Control personal contact by using protective equipment and dust respirator.
- Prevent spillage from entering drains, sewers or water courses.
- Avoid generating dust.
- Sweep, shovel up. Recover product wherever possible.
- Put residues in labelled plastic bags or other containers for disposal.
- If contamination of drains or waterways occurs, advise emergency services.

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS



+: May be stored together

O: May be stored together with specific preventions

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Section 6 - ACCIDENTAL RELEASE MEASURES

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

- Avoid generating and breathing dust
- Avoid contact with skin and eyes.
- Wear nominated personal protective equipment when handling.
- Use in a well-ventilated area.
- Use good occupational work practices.
- Observe manufacturer's storing and handling recommendations.

SUITABLE CONTAINER

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

STORAGE INCOMPATIBILITY

Avoid reaction with oxidising agents.

STORAGE REQUIREMENTS

- Store in a cool area and away from sunlight.
- 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.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records

- choline chloride:

CAS:67- 48- 1

MATERIAL DATA

CEL TWA: 0.04 mg/m³

[Russian OEL STEL: 0.2 mg/m³]

PERSONAL PROTECTION



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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EYE

No special equipment for minor exposure i.e. when handling small quantities.

· OTHERWISE:

- Safety glasses with side shields.
- 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

No special equipment needed when handling small quantities.

OTHERWISE: Wear general protective gloves, eg. light weight rubber gloves.

OTHER

No special equipment needed when handling small quantities.

OTHERWISE:

- Overalls.
- Barrier cream.
- Eyewash unit.

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.

ENGINEERING CONTROLS

Enclosed local exhaust ventilation is required at points of dust, fume or vapour generation.

HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapours.

Barrier protection or laminar flow cabinets should be considered for laboratory scale handling.

When handling quantities up to 500 kilogram, work in either a standard laboratory with general dilution ventilation (e.g. 6-12 air changes per hour) is preferred. Quantities up to 1 kilogram may require a designated laboratory using fume hood, biological safety cabinet, or approved vented enclosures. Quantities exceeding 1 kilogram should be handled in a designated laboratory or containment laboratory using appropriate barrier/

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

containment technology.

Manufacturing and pilot plant operations require barrier/ containment and direct coupling technologies.

Barrier/ containment technology and direct coupling (totally enclosed processes that create a barrier between the equipment and the room) typically use double or split butterfly valves and hybrid unidirectional airflow/ local exhaust ventilation solutions (e.g. powder containment booths). Glove bags, isolator glove box systems are optional. HEPA filtration of exhaust from dry product handling areas is required.

Fume-hoods and other open-face containment devices are acceptable when face velocities of at least 1 m/s (200 feet/minute) are achieved. Partitions, barriers, and other partial containment technologies are required to prevent migration of the material to uncontrolled areas. For non-routine emergencies maximum local and general exhaust are necessary. 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:

solvent, vapours, etc. evaporating from tank (in still air)

aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers (released at low velocity into zone of active generation)

direct spray, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)

Air Speed:

0.25- 0.5 m/s (50- 100 f/min.)

0.5- 1 m/s (100- 200 f/min.)

1- 2.5 m/s (200- 500 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 1-2.5 m/s (200-500 f/min.) for extraction of gases discharged 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.

The need for respiratory protection should also be assessed where incidental or accidental exposure is anticipated: Dependent on levels of contamination, PAPR, full face air purifying devices with P2 or P3 filters or air supplied respirators should be evaluated.

The following protective devices are recommended where exposures exceed the recommended

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

exposure control guidelines by factors of:

10; high efficiency particulate (HEPA) filters or cartridges

10-25; loose-fitting (Tyvek or helmet type) HEPA powered-air purifying respirator.

25-50; a full face-piece negative pressure respirator with HEPA filters

50-100; tight-fitting, full face-piece HEPA PAPR

100-1000; a hood-shroud HEPA PAPR or full face-piece supplied air respirator operated in pressure demand or other positive pressure mode.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

White, hygroscopic, crystalline powder; mixes with water and alcohol.

PHYSICAL PROPERTIES

Solid.

Mixes with water.

Molecular Weight: 139.6

Melting Range (°C): 303- 305 (decomp)

Solubility in water (g/L): Miscible

pH (1% solution): 5- 6 (10%)

Volatile Component (%vol): Not applicable.

Relative Vapour Density (air=1): Not applicable

Lower Explosive Limit (%): Not available.

Autoignition Temp (°C): Not available.

State: Divided solid

Boiling Range (°C): Not available.

Specific Gravity (water=1): Not available.

pH (as supplied): Not applicable

Vapour Pressure (kPa): Not applicable.

Evaporation Rate: Not applicable

Flash Point (°C): Not applicable

Upper Explosive Limit (%): Not available.

Decomposition Temp (°C): 303

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be damaging to the health of the individual.

Concentrated solutions of many cationics may cause corrosive damage to mucous membranes and the oesophagus. Nausea and vomiting (sometimes bloody) may follow ingestion. Serious exposures may produce an immediate burning sensation of the mouth, throat and abdomen with profuse salivation, ulceration of mucous membranes, signs of circulatory shock (hypotension, laboured breathing, and cyanosis) and a feeling of apprehension, restlessness, confusion and weakness. Weak convulsive movements may precede central

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Section 11 - TOXICOLOGICAL INFORMATION

nervous system depression. Erosion, ulceration, and petechial haemorrhage may occur through the small intestine with glottic, brain and pulmonary oedema. Death may result from asphyxiation due to paralysis of the muscles of respiration or cardiovascular collapse. Fatal poisoning may arise even when the only pathological signs are visceral congestion, swallowing, mild pulmonary oedema or varying signs of gastrointestinal irritation. Individuals who survive a period of severe hypertension may develop kidney failure. Cloudy swelling, patchy necrosis and fatty infiltration in such visceral organs as the heart, liver and kidneys shows at death.

EYE

Although the material is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may produce transient discomfort characterised by tearing or conjunctival redness (as with windburn).

The dust may produce eye discomfort causing transient smarting, blinking.

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.

INHALED

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

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.

CHRONIC HEALTH EFFECTS

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

No human exposure data available. For this reason health effects described are based on experience with chemically related materials.

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

TOXICITY AND IRRITATION

TOXICITY

Oral (rat) LD50: 3400 mg/kg

Intraperitoneal (mouse) LD50: 320 mg/kg

Intravenous (mouse) LD50: 53 mg/kg

IRRITATION

Nil Reported

Section 12 - ECOLOGICAL INFORMATION

Cationic substances, and their polymers and those polymers that are reasonably anticipated to become cationic in the natural aquatic environment (pH range 4-9) may be environmental hazards.

Exempt from this concern are those polymers to be used only in solid phase, such as ion-exchange resins, and where the FGEW (Functional Group Equivalent Weight) of cationic groups is not 5000 and above.

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Section 12 - ECOLOGICAL INFORMATION

Cationic groups such as alkylsulfoniums, alkylphosphoniums and quaternary ammonium polymers are highly toxic to fish and other aquatic organisms. Similarly potentially cationic groups such as amines and isocyanates are of concern. Some cationics, however, may fall into the category of PLCs (polymers of low concern) provided they possess low charge density, and/or are not water-soluble or are not self-dispersing polycarboxylates or poly- (aromatic or aliphatic) sulfonate polymers.

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.
- Bury or incinerate 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

HAZCHEM: None

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

Section 15 - REGULATORY INFORMATION

REGULATIONS

choline chloride (CAS: 67-48-1) is found on the following regulatory lists;
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk
International Council of Chemical Associations (ICCA) - High Production Volume List
OECD Representative List of High Production Volume (HPV) Chemicals
WHO Guidelines for Drinking-water Quality - Chemicals for which guideline values have not been established

Section 16 - OTHER INFORMATION

The above information is believed to be accurate and represent the best information currently available to us, but does not represent any warranty expressed or implied of the properties of the product. User should make their own investigation to determine the suitability of the information for their particular purpose.

Issue Date: 12-May-2018