



CAESIUM CARBONATE

GHS Safety Data Sheet

Version No:4
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Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

CAESIUM CARBONATE

OTHER NAMES

Cs₂CO₃, "carbonic acid dicesium salt", "dicesium carbonate", "dicaesium carbonate"

PRODUCT USE

Used in brewing, mineral waters, specialty glasses, polymerization catalyst for ethylene oxide; laboratory reagent for preparing cesium carboxylate which reacts with halogenides to give esters and lactones.

SUPPLIER

Company: S D FINE- CHEM LIMITED

Address:

315- 317, T.V.Ind.Estate,

248, Worli Road

Mumbai- 400030, India

www.sdfine.com

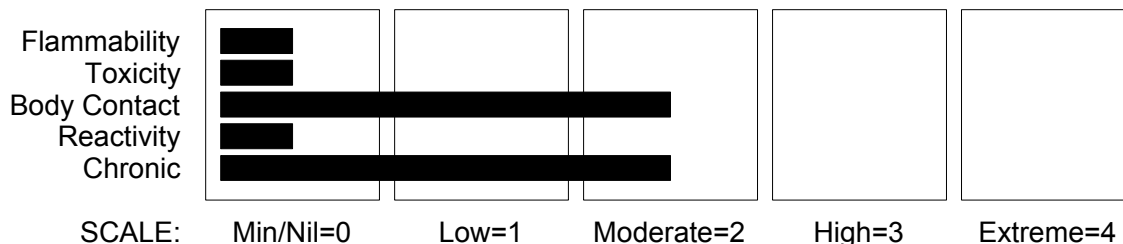
Telephone: 91- 22 24959898/99

Fax: 91- 22 2493 7232

Email: technical@sdfine.com

Section 2 - HAZARDS IDENTIFICATION

HAZARD RATINGS



GHS Classification

Acute Toxicity Category 5

Eye Irritation Category 2A

Germ Cell Mutagen Category 2

Skin Corrosion/Irritation Category 2

STOT - SE Category 3

continued...

CAESIUM CARBONATE



EMERGENCY OVERVIEW

HAZARD WARNING

Determined by using GHS criteria

H303	May be harmful if swallowed
H315	Causes skin irritation.
H319	Causes serious eye irritation.
H335	May cause respiratory irritation.
H341	Suspected of causing genetic defects.

PRECAUTIONARY STATEMENTS

Prevention

P201	Obtain special instructions before use.
P202	Do not handle until all safety precautions have been read and understood.
P261	Avoid breathing dust/fume/gas/mist/vapours/spray.
P264	Wash ... thoroughly after handling.
P271	Use only outdoors or in a well- ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P281	Use personal protective equipment as required.

Response

P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P308+P313	IF exposed or concerned: Get medical advice/attention.
P312	Call a POISON CENTER or doctor/physician if you feel unwell.
P337+P313	If eye irritation persists: Get medical advice/attention.

Storage

P403+P233	Store in a well- ventilated place. Keep container tightly closed.
P405	Store locked up.

Disposal

P501	Dispose of contents/container to ...
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Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
caesium carbonate	534-17-8	100

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Section 4 - FIRST AID MEASURES

SWALLOWED

- Immediately give a glass of water.
- First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor.

EYE

- If this product comes in contact with the eyes:
 - Wash out immediately with fresh running water.
 - Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
 - Seek medical attention without delay; 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.
 - Flush skin and hair with running water (and soap if available).
 - Seek medical attention in event of irritation.

INHALED

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

NOTES TO PHYSICIAN

- Treat symptomatically.

Section 5 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA

- There is no restriction on the type of extinguisher which may be used.
 - Use extinguishing media suitable for surrounding area.
- Note: CO₂ is unsuitable for some caesium salts.

FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves for fire only.
- 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

- Non combustible.
- Not considered a significant fire risk, however containers may burn.

CAESIUM CARBONATE

May emit poisonous fumes.
May emit corrosive fumes.

FIRE INCOMPATIBILITY

- None known.

Section 6 - ACCIDENTAL RELEASE MEASURES

MINOR SPILLS

- Clean up all spills immediately.
- Avoid breathing dust and 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, shovel 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

- Moderate hazard.
- CAUTION: Advise personnel in area.
- Alert Emergency Services and tell them location and nature of hazard.
- Control personal contact by wearing protective clothing.
- Prevent, by any means available, spillage from entering drains or water courses.
- Recover product wherever possible.
- IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal.
- ALWAYS: Wash area down with large amounts of water and prevent runoff into drains.
- If contamination of drains or waterways occurs, advise Emergency Services.

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

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- 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.
- DO NOT allow material to contact humans, exposed food or food utensils.
- 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. 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.

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CAESIUM CARBONATE

SUITABLE CONTAINER

- Polyethylene or polypropylene container.
- Check all containers are clearly labelled and free from leaks.

STORAGE INCOMPATIBILITY

- None known.

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

- caesium carbonate:

CAS:534- 17- 8

MATERIAL DATA

CAESIUM CARBONATE:

■ It is the goal of the ACGIH (and other Agencies) to recommend TLVs (or their equivalent) for all substances for which there is evidence of health effects at airborne concentrations encountered in the workplace. At this time no TLV has been established, even though this material may produce adverse health effects (as evidenced in animal experiments or clinical experience). Airborne concentrations must be maintained as low as is practically possible and occupational exposure must be kept to a minimum.

NOTE: The ACGIH occupational exposure standard for Particles Not Otherwise Specified (P.N.O.S) does NOT apply.

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be

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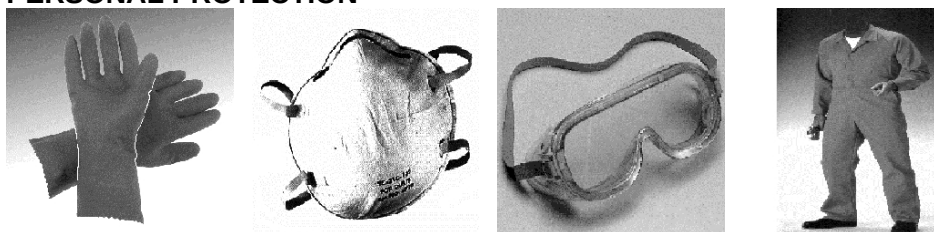
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consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- cause inflammation
- cause increased susceptibility to other irritants and infectious agents
- lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and
- acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

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], [AS/NZS 1336 or national equivalent].

HANDS/FEET

■ Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- frequency and duration of contact,
- chemical resistance of glove material,
- glove thickness and
- dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- Contaminated gloves should be replaced.

Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present.

- polychloroprene
- nitrile rubber

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- butyl rubber
- fluorocautchouc
- polyvinyl chloride

Gloves should be examined for wear and/ or degradation constantly.

OTHER

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

RESPIRATOR

- Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)
- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure - ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory . These may be government mandated or vendor recommended.
- Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- Use approved positive flow mask if significant quantities of dust becomes airborne.
- Try to avoid creating dust conditions.

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

■ Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.

The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

- 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.
- 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.

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Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

White, hygroscopic crystalline powder. No odour. Soluble in water. Soluble in alcohol, ether. Very thermally stable, can be heated to high temperatures without loss of CO₂.

PHYSICAL PROPERTIES

Solid.

Mixes with water.

State	Divided solid	Molecular Weight	325.82
Melting Range (°C)	Not available	Viscosity	Not available
Boiling Range (°C)	Not available	Solubility in water (g/L)	Miscible
Flash Point (°C)	Not applicable	pH (1% solution)	Not available
Decomposition Temp (°C)	Not available	pH (as supplied)	Not available
Autoignition Temp (°C)	Not available	Vapour Pressure (kPa)	Not applicable
Upper Explosive Limit (%)	Not available	Specific Gravity (water=1)	Not available
Lower Explosive Limit (%)	Not available	Relative Vapour Density (air=1)	Not applicable
Volatile Component (%vol)	Not applicable	Evaporation Rate	Not applicable

Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

CONDITIONS CONTRIBUTING TO INSTABILITY

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

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

Section 11 - TOXICOLOGICAL INFORMATION

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

■ Although ingestion is not thought to produce harmful effects (as classified under EC Directives), 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.

■ Caesium, in common with other alkali metals, is distributed widely in body tissues with the most tenacious retention occurring in the muscle. In the first week of administration liver, spleen and kidney accumulate the ion at a greater rate. Skeletal accumulation is lower than other organs. The hydroxide appears to be the only caesium compound which exhibits any significant toxic effect.

Hyperirritability and spasm represent the toxic syndromes produced when caesium replaces potassium in the diet. Such replacement resulted in the death of rats after 10-17 days.

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Decreased appetite, nausea, and diarrhea were reported in a man who ingested about 34 mg Cs/kg (as cesium chloride) after morning and evening meals for 36 days; this man also experienced apparent neurological changes within 15 minutes of dosing. Prolonged QT syndrome and associated cardiac arrhythmias have been described in patients who have ingested cesium chloride as a component of homeopathic remedies. Animal studies indicate that cesium is of relatively low toxicity. Acute oral LD50 values for rats and mice range from 800 to 2,000 mg Cs/kg, cesium hydroxide being more toxic than cesium iodide or cesium chloride. Single oral doses of cesium chloride, administered to female mice at dose levels ranging from 125 to 500 mg/kg, have been shown to result in significant increases in chromosomal breaks in bone marrow cells.

EYE

■ Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals.

Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

SKIN

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

■ The material may accentuate any pre-existing dermatitis condition.

■ 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.

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

■ Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds 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

■ Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.

■ 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.

If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures.

CHRONIC HEALTH EFFECTS

■ Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems.

Strong evidence exists that the substance may cause irreversible but non-lethal mutagenic effects following a single exposure.

Exposure to the material may result in a possible risk of irreversible effects. The material may produce

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CAESIUM CARBONATE

mutagenic effects in man. This concern is raised, generally, on the basis of appropriate studies using mammalian somatic cells in vivo. Such findings are often supported by positive results from in vitro mutagenicity studies.

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

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 human data are available regarding health effects of caesium. Most studies involve radio-isotopes of caesium such as ^{137}Cs and ^{134}Cs . These radionuclides are products of either neutron activation or nuclear fission and may, therefore, be released from sites where nuclear fission occurs, from radioactive material removed from such sites, or from leakage of radioactive cesium sources. Both ^{137}Cs and ^{134}Cs emit beta radiation (that travels short distances and can penetrate the skin and superficial body tissues) and gamma radiation (that penetrates the entire body).

Once radioactive cesium is internalised, it is absorbed, distributed, and excreted in the same manner as stable cesium. The internal radiation dose from cesium is a measure of the amount of energy that the beta and gamma emissions deposit in tissue. The short-range beta radiation produces a localized dose while the more penetrating gamma radiation contributes to a whole body dose. Molecular damage results from the direct ionization of atoms that are encountered by beta and gamma radiation and by interactions of resulting free radicals with nearby atoms. Tissue damage results when the molecular damage is extensive and not sufficiently repaired in a timely manner.

TOXICITY AND IRRITATION

CAESIUM CARBONATE:

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

TOXICITY

Oral (mouse) LD50: 2170 mg/kg
Intraperitoneal (Rat) LD50: 810 mg/kg
Subcutaneous (Rat) LD50: 2200 mg/kg
Intravenous (Rat) LD50: 877 mg/kg
Subcutaneous (Mouse) LD50: 2300 mg/kg
Intravenous (Mouse) LD50: 940 mg/kg
Oral (Rat) LD50: 2333 mg/kg
Intraperitoneal (Mouse) LD50: 1000 mg/kg
Intravenous (Cat) LD50: 640 mg/kg

IRRITATION

Nil Reported

■ 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.

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Section 12 - ECOLOGICAL INFORMATION

CAESIUM CARBONATE:

■ For caesium:

Environmental fate:

Caesium compounds released to the atmosphere will eventually settle to earth by wet and dry deposition. Radioactive forms of cesium such as ^{137}Cs and ^{134}Cs are continuously transformed to stable isotopes of barium or xenon by the natural process of radioactive decay.

Caesium salts and most caesium compounds are generally very water soluble, with the exception of caesium alkyl and aryl compounds, which have low water solubility. Caesium cations have low hydration energy and can react with clay minerals, zeolites, or soils with a high percentage of exchangeable potassium, forming insoluble, immobile complexes. Under normal environmental conditions, Cs^+ cations are neither degraded nor transformed, but may adsorb to suspended solids and sediment in the water column, forming insoluble complexes. Since caesium does not volatilise from water, transport of caesium from water to the atmosphere is not considered likely, except by windblown sea sprays. Most of the caesium released to water will adsorb to suspended solids in the water column and ultimately be deposited in the sediment core. Caesium can also bioconcentrate and has been shown to bioaccumulate in both terrestrial and aquatic food chains. Mean bioconcentration factors (BCF) for ^{137}Cs of 146, 124, and 63 were reported for fish, brown macroalgae, and molluscs, respectively. The levels of ^{137}Cs in lake trout from Great Slave Lake, Canada were consistently higher than levels found in food sources and a biomagnification factor of 1.9 was calculated for lake trout, relative to their food sources. It was shown that the bioconcentration and bioaccumulation of ^{137}Cs by aquatic organisms is significantly reduced in waters with a large humic content and high levels of potassium cations.

In soil surfaces, caesium has low mobility in comparison to other metals and usually does not migrate below a depth of 40 cm. The major portion of caesium is retained in the upper 20 cm of the soil surface. Studies have reported that clay and zeolite minerals strongly bind caesium cations and can therefore reduce the bioavailability of caesium and the uptake in plants by irreversibly binding caesium in interlayer positions of the clay particles. Soils rich in organic matter adsorb caesium, but the cesium adsorbed in the organic fraction is readily exchangeable and highly available for plant uptake.

DO NOT discharge into sewer or waterways.

Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
caesium carbonate	LOW	No Data Available	LOW	HIGH

Section 13 - DISPOSAL CONSIDERATIONS

- 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.
- Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

- Reduction
- Reuse

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Section 13 - DISPOSAL CONSIDERATIONS

- Recycling

- Disposal (if all else fails)

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate. In most instances the supplier of the material should be consulted.

- DO NOT allow wash water from cleaning or process equipment to enter drains.
- It may be necessary to collect all wash water for treatment before disposal.
- In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- Where in doubt contact the responsible authority.

For small quantities:

- Neutralise an aqueous solution of the material.
 - Filter solids for disposal to approved land fill.
 - Flush solution to sewer (subject to local regulation)
 - Heat and fumes evolved during reaction may be controlled by rate of addition.
 - Recycle wherever possible or consult manufacturer for recycling options.
 - Consult State Land Waste Management Authority for disposal.
 - Bury residue in an authorised landfill.
 - Recycle containers if possible, or dispose of in an authorised landfill.
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Section 14 - TRANSPORTATION INFORMATION

HAZCHEM:

None

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

Section 15 - REGULATORY INFORMATION

REGULATIONS

No data for caesium carbonate (CAS: , 534-17-8)

Section 16 - OTHER INFORMATION

■ The (M)SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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Section 16 - OTHER INFORMATION

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

Issue Date: 22-Dec-2017