PHLOROGLUCINOL

Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

PRODUCT NAME

PHLOROGLUCINOL

OTHER NAMES

C6-H6-O3, C6H3(OH)3, benzene-s-triol, benzene-s-triol, floroglucinol, "benzene-1, 3, 5 -triol", "benzene-1, 3, 5-triol", Spasfon-Lyoc, "1, 3, 5-benzenetriol", "1, 3, 5 -benzenetriol", "3, 5-dihydroxyphenol", "3, 5-dihydroxyphenol", 5-hydroxyresorcinol, 5 -hydroxyresorcinol, 5-oxyresorcinol, 5-oxyresorcinol, phloroglucin, phloroglucine, s -trihydroxybenzene, s-trihydroxybenzene, sym-trihydroxybenzene, "1, 3, 5 -trihydroxybenzene", "1, 3, 5-trihydroxybenzene", "1, 3, 5-trihydroxycyclohexatriene", "1 , 3, 5-trihydroxycyclohexatriene"

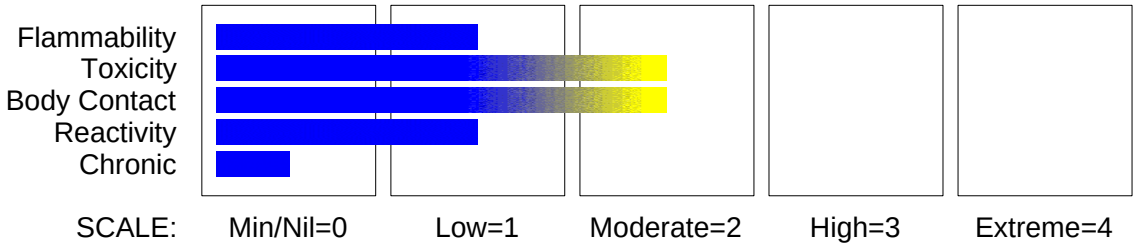
PRODUCT USE

Analytical chemistry (reagent for pentoses and with vanillin for determining the presence of free hydrogen chloride), decalcifying agent for bones, preparation of pharmaceuticals and dyes, resins.
Has been used as an anti-spasmodic.
Also used as preservative for cut flowers, textile dyeing and printing.

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 5

EMERGENCY OVERVIEW

HAZARD

WARNING
Determined by using GHS criteria:
H303
May be harmful if swallowed

PRECAUTIONARY STATEMENTS

Response

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

Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
phloroglucinol	108-73-6	> 99

Section 4 - FIRST AID MEASURES

SWALLOWED

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

EYE

If this product comes in contact with the eyes:
· 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.

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SKIN

If skin or hair contact occurs:
· 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.

NOTES TO PHYSICIAN

Treatment of phloroglucinol intoxication may be similar to phenol and aniline treatment.
For acute or short term repeated exposures to phenols/ cresols:
· Phenol is absorbed rapidly through lungs and skin. [Massive skin contact may result in collapse and death]*
· [Ingestion may result in ulceration of upper respiratory tract; perforation of oesophagus and/or stomach, with attendant complications, may occur. Oesophageal stricture may occur.]*
· An initial excitatory phase may present. Convulsions may appear as long as 18 hours after ingestion. Hypotension and ventricular tachycardia that require vasopressor and antiarrhythmic therapy, respectively, can occur.
· Respiratory arrest, ventricular dysrhythmias, seizures and metabolic acidosis may complicate severe phenol exposures so the initial attention should be directed towards stabilisation of breathing and circulation with ventilation, intubation, intravenous lines, fluids and cardiac monitoring as indicated.
· [Vegetable oils retard absorption; do NOT use paraffin oils or alcohols. Gastric lavage , with endotracheal intubation, should be repeated until phenol odour is no longer detectable; follow with vegetable oil. A saline cathartic should then be given.]*
ALTERNATIVELY: Activated charcoal (1g/kg) may be given. A cathartic should be given after oral activated charcoal.
· Severe poisoning may require slow intravenous injection of methylene blue to treat methaemoglobinaemia.
· [Renal failure may require haemodialysis.]*
· Most absorbed phenol is biotransformed by the liver to ethereal and glucuronide sulfates and is eliminated almost completely after 24 hours. [Ellenhorn and Barceloux: Medical Toxicology] *[Union Carbide]
BIOLOGICAL EXPOSURE INDEX - BEI
These represent the determinants observed in specimens collected from a healthy worker who has been exposed to the Exposure Standard (ES or TLV):

Determinant	Index	Sampling Time	Comments
1. Total phenol in blood	250 mg/gm creatinine	End of shift	B, NS

B: Background levels occur in specimens collected from subjects NOT exposed
NS: Non-specific determinant; also seen in exposure to other materials.
The material may induce methaemoglobinaemia following exposure.
· Initial attention should be directed at oxygen delivery and assisted ventilation if necessary. Hyperbaric oxygen has not demonstrated substantial benefits.
· Hypotension should respond to Trendelenburg's position and intravenous fluids; otherwise dopamine may be needed.
· Symptomatic patients with methaemoglobin levels over 30% should receive methylene blue. (Cyanosis, alone, is not an indication for treatment). The usual dose is 1-2 mg/kg of a 1% solution (10 mg/ml) IV over 50 minutes; repeat, using the same dose, if symptoms of hypoxia fail to subside within 1 hour.
· Thorough cleansing of the entire contaminated area of the body, including the scalp and nails, is of utmost importance.

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BIOLOGICAL EXPOSURE INDEX - BEI
These represent the determinants observed in specimens collected from a healthy worker exposed at the Exposure Standard (ES or TLV):

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

B: Background levels occur in specimens collected from subjects NOT exposed
NS: Non-specific determinant; also observed after exposure to other materials
SQ: Semi-quantitative determinant - Interpretation may be ambiguous; should be used as a screening test or confirmatory test.

Section 5 - FIRE FIGHTING MEASURES

EXTINGUISHING MEDIA
· Water spray or fog.
· 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 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
· Solid which exhibits difficult combustion or is difficult to ignite.
· 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 dioxide (CO_2).

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

Personal Protective Equipment
Chemical splash suit.

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Section 6 - ACCIDENTAL RELEASE MEASURES

EMERGENCY PROCEDURES

MINOR SPILLS
- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid contact with skin and eyes.
- Control personal contact by using protective equipment.
- Use dry clean up procedures and avoid generating dust.
- Place in a suitable labelled container for waste disposal.

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

SAFE STORAGE WITH OTHER CLASSIFIED CHEMICALS

\+ + + + + +

+: May be stored together
O: May be stored together with specific preventions
X: Must not be stored together

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

Section 7 - HANDLING AND STORAGE

PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Prevent concentration in hollows and sumps.
- DO NOT enter confined spaces until atmosphere has been checked.
- Avoid smoking, naked lights or ignition sources.
- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.

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· Work clothes should be laundered separately.
· Use good occupational work practice.
· Observe manufacturer's storing and handling recommendations.
· Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.

SUITABLE CONTAINER

Glass container.
Plastic container.
Plastic drum.
· Metal can or drum
· Packaging as recommended by manufacturer.
· Check all containers are clearly labelled and free from leaks.

STORAGE INCOMPATIBILITY

Avoid reaction with oxidising agents.
Avoid acid chlorides and acid anhydrides. Avoid bases.

STORAGE REQUIREMENTS

· Store in original containers.
· Keep containers securely sealed.
· No smoking, naked lights or ignition sources.
· Store in a cool, dry, well-ventilated area.
· Store away from incompatible materials and foodstuff containers.
· Protect containers against physical damage and check regularly for leaks.
· Observe manufacturer's storing and handling recommendations.
Protect from light.

Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

EXPOSURE CONTROLS

The following materials had no OELs on our records
• phloroglucinol: CAS:108- 73- 6 CAS:6099- 90- 7

MATERIAL DATA

These "dusts" have little adverse effect on the lungs and do not produce toxic effects or organic disease. Although there is no dust which does not evoke some cellular response at sufficiently high concentrations, the cellular response caused by P.N.O.C.s has the following characteristics:
· the architecture of the air spaces remain intact,
· scar tissue (collagen) is not synthesised to any degree,
· tissue reaction is potentially reversible.
Extensive concentrations of P.N.O.C.s may:
· seriously reduce visibility,
· cause unpleasant deposits in the eyes, ears and nasal passages,
· contribute to skin or mucous membrane injury by chemical or mechanical action, per se, or by the rigorous skin cleansing procedures necessary for their removal. [ACGIH]
This limit does not apply:
· to brief exposures to higher concentrations
· nor does it apply to those substances that may cause physiological impairment at lower concentrations but for which a TLV has as yet to be determined.
This exposure standard applies to particles which
· are insoluble or poorly soluble* in water or, preferably, in aqueous lung fluid (if data is available) and
· have a low toxicity (i.e.. are not cytotoxic, genotoxic, or otherwise chemically

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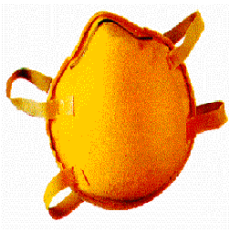
reactive with lung tissue, and do not emit ionizing radiation, cause immune sensitization , or cause toxic effects other than by inflammation or by a mechanism of lung overload).

PERSONAL PROTECTION

EYE
· Safety glasses.
· Safety glasses with side shields.
· Chemical goggles.
· Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].

HANDS/FEET
Wear protective gloves, eg. PVC.

OTHER
· Overalls.
· 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
General exhaust is adequate under normal operating conditions. If risk of overexposure exists, wear SAA approved respirator. Correct fit is essential to obtain adequate protection. Provide adequate ventilation in warehouse or closed storage areas. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

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Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

Type of Contaminant:	Air Speed:
solvent, vapours, degreasing etc., evaporating from tank (in still air)	0.25- 0.5 m/s (50- 100 f/min)
aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation)	0.5- 1 m/s (100- 200 f/min.)
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion)	1- 2.5 m/s (200- 500 f/min)
grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion).	2.5- 10 m/s (500- 2000 f/min.)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood - local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min.) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

APPEARANCE

Odourless white to yellowish crystals with sweet taste. Sparingly soluble in water. Soluble in alcohol, ether and pyridine. Discolours in light.

PHYSICAL PROPERTIES

Solid.
Does not mix with water.

Molecular Weight: 126.12	Boiling Range (°C): Not applicable.
Melting Range (°C): 218	Specific Gravity (water=1): Not available.
Solubility in water (g/L): Immiscible	pH (as supplied): Not applicable
pH (1% solution): Not available.	Vapour Pressure (kPa): Negligible.
Volatile Component (%vol): Negligible	Evaporation Rate: Not applicable
Relative Vapour Density (air=1): >1	Flash Point (°C): Not available
Lower Explosive Limit (%): Not available.	Upper Explosive Limit (%): Not available.
Autoignition Temp (°C): Not available.	Decomposition Temp (°C): Not available.
State: Divided solid	

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log Kow : -0.19

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

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

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

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
Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.
The material is not thought to be a skin irritant (i.e. is unlikely to produce irritant dermatitis as described in EC Directives using animal models). Temporary discomfort, however, may result from prolonged dermal exposures. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.
The material may accentuate any pre-existing skin condition.
Toxic effects may result from skin absorption.

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,

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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	IRRITATION
Oral (rat) LD50: 5200 mg/kg	Nil Reported

Section 12 - ECOLOGICAL INFORMATION

Fish LC50 (96hr.) (mg/l):	630 (48hr)
Daphnia magna EC50 (48hr.) (mg/l):	0.6
Algae IC50 (72hr.) (mg/l):	200
log Pow (Verschueren 1983):	- 0.19
BOD5:	0.468 (31%
ThOD:	1.523

log Kow : -0.19
BOD 5 if unstated: 0.468,31%
COD: 100%
ThOD: 1.523
Toxicity Fish: LD50 1-10mg/L
Effects on algae and plankton: no effect to 10mg/L

Section 13 - DISPOSAL CONSIDERATIONS

- Consult manufacturer for recycling options and recycle where possible .
- Consult State Land Waste Management Authority for disposal.
- Incinerate residue at an approved site.
- Recycle containers if possible, or dispose of in an authorised landfill.

Section 14 - TRANSPORTATION INFORMATION

HAZCHEM: None

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

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Section 15 - REGULATORY INFORMATION

REGULATIONS

No regulations applicable
No data available for phloroglucinol as CAS: 108-73-6, CAS: 6099-90-7.

Section 16 - OTHER INFORMATION

Denmark Advisory list for selfclassification of dangerous substances

Substance	CAS	Suggested codes
phloroglucinol	108- 73- 6	R43

INGREDIENTS WITH MULTIPLE CAS NUMBERS

Ingredient Name	CAS
phloroglucinol	108- 73- 6, 6099- 90- 7

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

Issue Date: 30-Mar-2018