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Quality Control Dept.

Product Specification

E Control	QC2\DATAD\ID\PS\56388XPS.xls		
PRODUCT CODE	56388		
PRODUCT NAME	ISOPROPYL IODIDE (For Synthesis)		
SYNONYMS	2-Iodopropane		
C.I. NO.	---		
CASR NO.	75-30-9		
ATOMIC OR MOLECULAR FORMULA	(CH ₃) ₂ CHI		
ATOMIC OR MOLECULAR WEIGHT	169.99		
PROPERTIES	---		

PARAMETER	LIMIT		
Description	Clear colourless to pale yellow heavy liquid		
Minimum Assay	99.0%		
Boiling point	87° C to 90°C		
Density (at 25°C)	1.698 to 1.703		
Moisture Content	Max.0.10%		
MAXIMUM LIMIT OF IMPURITIES			
Note(s) : Assay (if applicable) method mentioned.			
HAZARD WARNING HAZARD STATEMENT : Flammable liquid and vapour. Causes skin irritation. Causes serious eye irritation. Harmful if inhaled. May cause respiratory irritation.		IMDG Code :3/III UN No. :2392 IATA :3	
Precautionary statement: Prevention : Keep away from heat/sparks/open flames/hot surfaces. - No smoking. Keep container tightly closed. Ground/bond container and receiving equipment. Use explosion- proof electrical/ventilating/lighting/ ... /equipment Use only non- sparking tools. Take precautionary measures against static discharge. Avoid breathing dust/ fume/ gas/ mist/ vapours/ spray. Wash ... thoroughly after handling. Use only outdoors or in a well-ventilated area. Wear protective gloves/protective clothing/eye protection/face protection. Response : IF ON SKIN: Wash with plenty of soap and water. IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower. IF INHALED: Remove victim 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. Call a POISON CENTER or doctor/physician if you feel unwell. If skin irritation occurs: Get medical advice/attention. If eye irritation persists: Get medical advice/attention. Take off contaminated clothing and wash before re-use.			
Disposal : ---			
Hazard(s) :--			
 Flammable			
 Skin irritation			
Prepared By :	Checked By:	Approved By:	Issue Date : 05.10.2015
Name/Dept. : Officer (Q.A.)	Name/Dept.:Incharge(Q.A.)	Name/Dept. : Incharge (Tech.)	Revision No.: 00
Sign. :	Sign. :	Sign. :	Revision dt. : --
Date : 03.10.2015	Date : 03.10.2015	Date : 05.10.2015	AMEND NO. : --

