

3. Hazards Identification

Emergency Overview

DANGER! MAY BE FATAL IF SWALLOWED, INHALED OR ABSORBED THROUGH SKIN. CONTACT WITH ACIDS LIBERATES POISONOUS GAS. CAUSES BURNS TO SKIN, EYES, AND **RESPIRATORY TRACT. AFFECTS BLOOD, CARDIOVASCULAR SYSTEM, CENTRAL NERVOUS** SYSTEM AND THYROID.

SAF-T-DATA^(tm) Ratings (Provided here for your convenience)

Health Rating: 3 - Severe (Poison) Flammability Rating: 0 - None Reactivity Rating: 2 - Moderate Contact Rating: 3 - Severe (Life) Lab Protective Equip: GOGGLES & SHIELD; LAB COAT & APRON; VENT HOOD; PROPER GLOVES Storage Color Code: Blue (Health)

Potential Health Effects _____

In most cases, cyanide poisoning causes a deceptively healthy pink to red skin color. However, if a physical injury or lack of oxygen is involved, the skin color may be bluish. Reddening of the eyes and pupil dilation are symptoms of cyanide poisoning. Cyanosis (blue discoloration of the skin) tends to be associated with severe cyanide poisonings.

Inhalation:

Corrosive to the respiratory tract. The substance inhibits cellular respiration and may cause blood, central nervous system, and thyroid changes. May cause headache, weakness, dizziness, labored breathing nausea and vomiting, which can be followed by weak and irregular heart beat, unconsciousness, convulsions, coma and death. **Ingestion:**

Highly Toxic! Corrosive to the gastro-intestinal tract with burning in the mouth and esophagus, and abdominal pain. Larger doses may produce sudden loss of consciousness and prompt death from respiratory arrest. Smaller but still lethal doses may prolong the illness for one or more hours. Bitter almonds odor may be noted on the breath or vomitus. Other symptoms may be similar to those noted for inhalation exposure. **Skin Contact:**

Corrosive. May cause severe pain and skin burns. Solutions are corrosive to the skin and eyes, and may cause deep ulcers which heal slowly. May be absorbed through the skin, with symptoms similar to those noted for inhalation.

Eye Contact:

Corrosive. Symptoms may include redness, pain, blurred vision, and eye damage. Chronic Exposure: Prolonged or repeated skin exposure may cause a "cyanide" rash and nasal sores.

Aggravation of Pre-existing Conditions:

Workers using cyanides should have a preplacement and periodic medical exam. Those with history of central nervous system, thyroid, skin, heart or lung diseases may be more susceptible to the effects of this substance.

4. First Aid Measures

IN CASE OF CYANIDE POISONING, start first aid treatment immediately, then get medical attention. A cyanide antidote kit (amyl nitrite, sodium nitrite and sodium thiosulfate) should be available in any cyanide work area. Actions to be taken in case of cyanide poisoning should be planned and practiced before beginning work with cyanides. Oxygen and amyl nitrite can be given by a first responder before medical help arrives. Allow victim to inhale amyl nitrite for 15-30 seconds per minute until sodium nitrite and sodium thiosulfate can be administered intravenously (see Note to Physician). A new amyl nitrite ampule should be used every 3 minutes. If conscious but symptoms (nausea, difficult breathing, dizziness, etc.) are evident, give oxygen. If conscious but breathing, give oxygen and amyl nitrite by means of a respirator. If not breathing, give oxygen and amyl nitrite immediately by means of a positive pressure respirator (artificial respiration).

Inhalation:

If inhaled, remove to fresh air. Administer antidote kit and oxygen per pre-planned instructions if symptoms occur. Keep patient warm and at rest. Do not give mouth to mouth resuscitation.

Ingestion:

If ingested, antidote kit and oxygen should be administered per above. If the patient is conscious, immediately give the patient activated charcoal slurry. Never give anything by mouth to an unconscious person. Do not induce vomiting as it could interfere with resuscitator use.

Skin Contact:

Immediately flush skin with plenty of water for at least 15 minutes while removing contaminated clothing and shoes. Get medical attention immediately. Wash clothing before reuse. Thoroughly clean shoes before reuse. Administer antidote kit and oxygen per preplanned instructions if symptoms occur.

Eye Contact:

Immediately flush eyes with plenty of water for at least 15 minutes, lifting lower and upper eyelids occasionally. Get medical attention immediately.

Note to Physician:

If patient does not respond to amyl nitrite, inject intravenously with 10mL of a 3% solution of sodium nitrite at a rate of not more than 2.5 to 5 mL per minute.Once nitrite administration is complete, follow directly with 50 mL of a 25% solution of sodium thiosulfate at the same rate by the same route. Give victim oxygen and keep under observation. If exposure was severe, watch victim for 24-48 hours. If signs of cyanide poisoning persist or reappear, repeat nitrite and thiosulfate injections 1 hour later in 1/2 the original doses. Cyanocabalamin (B12), 1 mg intramuscularly, may speed recovery. Moderate cyanide exposures need be treated only by supportive measures such as bed rest and oxygen.

5. Fire Fighting Measures

Fire:

Not combustible, but upon decomposition or contact with acids, this material releases highly flammable and toxic hydrogen cyanide gas.

Explosion:

Not considered an explosion hazard, but upon heating with chlorates or nitrites to 450C (842F) may cause an explosion. Violent explosion occurs if melted with nitrite salt. Sealed containers may rupture when heated. **Fire Extinguishing Media:**

Use any means suitable for extinguishing surrounding fire. Do Not use carbon dioxide. Carbon dioxide can react with this material in the presence of moisture to produce hydrogen cyanide. Water spray may be used to keep fire exposed containers cool. Reacts slowly with water to form hydrogen cyanide.

Special Information:

In the event of a fire, wear full protective clothing and NIOSH-approved self-contained breathing apparatus with full facepiece operated in the pressure demand or other positive pressure mode.

6. Accidental Release Measures

Spills: Ventilate area of leak or spill. Allow only qualified personnel to handle spill. Clean-up personnel require protective clothing and respiratory protection from vapors. Collect material and place in a closed container for recovery or disposal. Do not flush to sewer! Decontaminate liquid or solid residues in spill area with sodium or calcium hypochlorite solution.

US Regulations (CERCLA) require reporting spills and releases to soil, water and air in excess of reportable quantities. The toll free number for the US Coast Guard National Response Center is (800) 424-8802.

7. Handling and Storage

Keep in a tightly closed container, stored in a cool, dry, ventilated area. Protect against physical damage. Separate from incompatibles. Workers must carefully follow good hygienic practices, including no eating, drinking, or smoking in workplace. Proper use and maintenance of protective equipment is essential. Workers using cyanide need preplacement and annual medical exams. Special training should be given to workers using cyanide. Containers of this material may be hazardous when empty since they retain product residues (dust, solids); observe all warnings and precautions listed for the product. Do not store near combustibles or flammables because subsequent fire fighting with water could lead to cyanide solution runoff. Do not store under sprinkler systems. All persons with the potential for cyanide poisoning should be trained to provide immediate First Aid using oxygen and amyl nitrite.

Important: A cyanide antidote kit (amyl nitrite, sodium nitrite, and sodium thiosulfate) should be readily available in cyanide workplaces. The antidotes should be checked annually to ensure they are still within their shelf-lives. Identification of community hospital resources and emergency medical squads in order to equip and train them on handling cyanide emergencies is essential.

8. Exposure Controls/Personal Protection

Airborne Exposure Limits:

- -OSHA Permissible Exposure Limit (PEL):
- 5 mg/m3 skin (TWA) (as CN)
- -ACGIH Threshold Limit Value (TLV):
- 5 mg/m3 (STEL) Ceiling, skin, as CN

Ventilation System:

A system of local and/or general exhaust is recommended to keep employee exposures below the Airborne Exposure Limits. Local exhaust ventilation is generally preferred because it can control the emissions of the contaminant at its source, preventing dispersion of it into the general work area. Please refer to the ACGIH document, *Industrial Ventilation, A Manual of Recommended Practices*, most recent edition, for details.

Personal Respirators (NIOSH Approved):

If the exposure limit is exceeded and engineering controls are not feasible, wear a supplied air, full-facepiece respirator, airlined hood, or full-facepiece self-contained breathing apparatus. Breathing air quality must meet the requirements of the OSHA respiratory protection standard (29CFR1910.134).

Skin Protection:

Wear impervious protective clothing, including boots, gloves, lab coat, apron or coveralls, as appropriate, to prevent skin contact.

Eye Protection:

Use chemical safety goggles and/or full face shield where dusting or splashing of solutions is possible. Maintain eye wash fountain and quick-drench facilities in work area.

9. Physical and Chemical Properties

Appearance:

White deliquescent granular solid. **Odor:** Almond odor. Bitter almonds. Solubility: 48 g/100 cc @ 10C (50F) **Specific Gravity:** 1.60 @ 25C/4C pH: Aqueous solutions are strongly alkaline. % Volatiles by volume @ 21C (70F): 0 **Boiling Point:** 1496C (2725F) **Melting Point:** 564C (1047F) Vapor Density (Air=1): No information found. Vapor Pressure (mm Hg): 1 @ 817C (1503F) **Evaporation Rate (BuAc=1):** No information found.

10. Stability and Reactivity

Stability:

Very stable when dry. Moisture will cause slow decomposition, releasing poisonous hydrogen cyanide gas. Hazardous Decomposition Products: Emits toxic fumes of cyanide and oxides of nitrogen when heated to decomposition. Hazardous Polymerization: Will not occur.

Incompatibilities:

Acid. nitrates, nitrites, chlorates, fluorine, magnesium, and strong oxidizers. Reacts with acids to liberate toxic and flammable hydrogen cyanide gas. Water or weak alkaline solutions can produce dangerous amounts of hydrogen cyanide in confined areas. Reacts with carbon dioxide in air to form hydrogen cyanide gas. **Conditions to Avoid:**

Heat, moisture, incompatibles.

11. Toxicological Information

Oral rat LD50: 6440 ug/kg. Investigated as a tumorigen, mutagen, reproductive effector.

-\Cancer Lists\								
	NTP Carcinogen							
Ingredient	Known	Anticipated	IARC Category					
Sodium Cyanide (143-33-9)	No	No	None					

12. Ecological Information

Environmental Fate:

No information found.

Environmental Toxicity:

This material is expected to be very toxic to aquatic life. This material is expected to be very toxic to terrestrial life.

13. Disposal Considerations

Cyanides must be oxidized to harmless waste before disposal. An alkaline solution (pH about 10) is treated with chlorine or commercial bleach in excess to decompose cyanide. When cyanide-free, it can be neutralized. Whatever cannot be saved for recovery or recycling should be handled as hazardous waste and sent to a RCRA approved waste facility. Processing, use or contamination of this product may change the waste management options. State and local disposal regulations may differ from federal disposal regulations. Dispose of container and unused contents in accordance with federal, state and local requirements.

14. Transport Information

Domestic (Land, D.O.T.)

Proper Shipping Name: SODIUM CYANIDE, SOLID Hazard Class: 6.1 UN/NA: UN1689 Packing Group: I

Information reported for product/size: International (Water, I.M.O.)

Proper Shipping Name: SODIUM CYANIDE, SOLID Hazard Class: 6.1 UN/NA: UN1689 Packing Group: I

Information reported for product/size: International (Air, I.C.A.O.)

Proper Shipping Name: SODIUM CYANIDE, SOLID Hazard Class: 6.1 UN/NA: UN1689 Packing Group: I

Information reported for product/size:

15. Regulatory Information

-\Chemical Inventory Status - Part 1\-----

 Ingredient
 TSCA
 EC
 Japan
 Australia

 Sodium Cyanide (143-33-9)
 Yes
 Yes
 Yes
 Yes

-\Chemical Inventory Status - Part 2\-----

		Canada						
Ingredient		Korea	DSL	NDSL	Phil.			
Sodium Cyanide (143-33-9)		Yes	Yes	No	Yes			
-\Federal, State & International Regulations - Part 1\								
	-SARA 302-		SARA 313-		313	-		
Ingredient	RQ	TPQ	List	Chemic	al Catg.			
Sodium Cyanide (143-33-9)	10	100	No	Cyani	de comp			
-\Federal, State & International Regulations - Part 2\								
			- R	CRA-	-TSCA-			
Ingredient		CERCLA	26	1.33	8(d)			
Sodium Cyanide (143-33-9)		10	 P	 106	No			
Chemical Weapons Convention: Yes	TSCA	12(b):	No	CDTA:	Yes			
SARA 311/312: Acute: Yes Chronic: Yes Fire: No Pressure: No								
Reactivity: No (Pure / Solid)								

Australian Hazchem Code: 4X **Poison Schedule: S7**

WHMIS:

This MSDS has been prepared according to the hazard criteria of the Controlled Products Regulations (CPR) and the MSDS contains all of the information required by the CPR.

16. Other Information

NFPA Ratings: Health: 3 Flammability: 0 Reactivity: 1

Label Hazard Warning:

DANGER! MAY BE FATAL IF SWALLOWED, INHALED OR ABSORBED THROUGH SKIN. CONTACT WITH ACIDS LIBERATES POISONOUS GAS. CAUSES BURNS TO SKIN, EYES, AND RESPIRATORY TRACT. AFFECTS BLOOD, CARDIOVASCULAR SYSTEM, CENTRAL NERVOUS SYSTEM AND THYROID.

Label Precautions:

Do not breathe dust. Do not get in eyes, on skin, or on clothing.

Keep container closed.

Use only with adequate ventilation.

Wash thoroughly after handling.

Label First Aid:

IN ALL CASES, GET MEDICAL ATTENTION IMMEDIATELY. KEEP A CYANIDE ANTIDOTE KIT (amyl nitrite, sodium nitrite and sodium thiosulfate) in area of product use or storage. First-aiders must take precautions to avoid contact with cyanide substance. If ingested, administer antidote kit and oxygen per pre-planned instructions. If the patient is conscious, immediately give the patient activated charcoal slurry. Never give anything by mouth to an unconscious person. Do not induce vomiting as it could interfere with resuscitator use. If inhaled, remove to fresh air. Administer antidote kit and oxygen per pre-planned instructions if symptoms occur. Keep patient warm and at rest. Do not give mouth to mouth resuscitation. In case of contact, immediately flush eyes or skin with plenty of water for at least 15 minutes while removing contaminated clothing and shoes. Wash clothing before reuse. Administer antidote kit and oxygen per preplanned instructions if symptoms occur.

Product Use:

Laboratory Reagent. **Revision Information:** No Changes. Disclaimer: *********

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