

# R507 A-Gas (Singapore) Pte Ltd

Chemwatch: **5419-59** Version No: **2.1** Safety Data Sheet Chemwatch Hazard Alert Code: 1

Issue Date: **19/08/2020** Print Date: **16/06/2022** L.GHS.SGP.EN

## SECTION 1 Identification of the substance / mixture and of the company / undertaking

## Product Identifier

Product name	R507
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	LIQUEFIED GAS, N.O.S. (contains pentafluoroethane and 1,1,1-trifluoroethane)
Chemical formula	Not Applicable
Other means of identification	Not Available

### Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses Used as refrigerants.

### Details of the supplier of the safety data sheet

Registered company name	A-Gas (Singapore) Pte Ltd		
Address	10 Gul Crescent 629523 Singapore		
Telephone	+65 64673990		
Fax	64697502		
Website	www.agas.com		
Email	Not Available		

## Emergency telephone number

Association / Organisation	A-Gas (Singapore) Pte Ltd	CHEMWATCH EMERGENCY RESPONSE	
Emergency telephone numbers	+65 64673990	+6531381227	
Other emergency telephone numbers	Not Available	Not Available	

Once connected and if the message is not in your prefered language then please dial 01

## **SECTION 2 Hazards identification**

Classification of the substance or mixture				
Classification	Gases Under Pressure (Liquefied Gas)			
Label elements				
Hazard pictogram(s)	$\langle \hspace{-1.5mm} \rangle$			
Signal word	Warning			
Hazard statement(s)				
H280	Contains gas under pressure; may explode if heated.			
Supplementary statement(s) Not Applicable				
Precautionary statement(s) Genera	1			
P101	If medical advice is needed, have product container or label at hand.			
P102	Keep out of reach of children.			
P103	Read label before use.			

#### Precautionary statement(s) Prevention

#### Not Applicable

Precautionary statement(s) Response

Not Applicable

## Precautionary statement(s) Storage

P410+P403 Protect from sunlight. Store in a well-ventilated place.

#### Precautionary statement(s) Disposal

Not Applicable

Not Applicable

#### SECTION 3 Composition / information on ingredients

#### Substances

See section below for composition of Mixtures

#### Mixtures

CAS No	%[weight]	Name
354-33-6	49.5-51.5	pentafluoroethane
420-46-2	48.5-50.5	<u>1,1,1-trifluoroethane</u>

#### **SECTION 4 First aid measures**

Description of first aid measures	
Eye Contact	<ul> <li>If product comes in contact with eyes remove the patient from gas source or contaminated area.</li> <li>Take the patient to the nearest eye wash, shower or other source of clean water.</li> <li>Open the eyelid(s) wide to allow the material to evaporate.</li> <li>Gently rinse the affected eye(s) with clean, cool water for at least 15 minutes. Have the patient lie or sit down and tilt the head back. Hold the eyelid(s) open and pour water slowly over the eyeball(s) at the inner corners, letting the water run out of the outer corners.</li> <li>The patient may be in great pain and wish to keep the eyes closed. It is important that the material is rinsed from the eyes to prevent further damage.</li> <li>Ensure that the patient looks up, and side to side as the eye is rinsed in order to better reach all parts of the eye(s)</li> <li>Transport to hospital or doctor.</li> <li>Even when no pain persists and vision is good, a doctor should examine the eye as delayed damage may occur.</li> <li>If the patient cannot tolerate light, protect the eyes with a clean, loosely tied bandage.</li> <li>Ensure verbal communication and physical contact with the patient.</li> <li>DO NOT allow the patient to tightly shut the eyes</li> <li>DO NOT allow the patient to to the eye(s) without medical advice</li> <li>DO NOT introduce oil or ointment into the eye(s) without medical advice</li> </ul>
Skin Contact	<ul> <li>If skin contact occurs:</li> <li>Immediately remove all contaminated clothing, including footwear.</li> <li>Flush skin and hair with running water (and soap if available).</li> <li>Seek medical attention in event of irritation.</li> </ul>
Inhalation	<ul> <li>Following exposure to gas, remove the patient from the gas source or contaminated area.</li> <li>NOTE: Personal Protective Equipment (PPE), including positive pressure self-contained breathing apparatus may be required to assure the safety of the rescuer.</li> <li>Prostheses such as false teeth, which may block the airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>If the patient is not breathing spontaneously, administer rescue breathing.</li> <li>If the patient does not have a pulse, administer CPR.</li> <li>If medical oxygen and appropriately trained personnel are available, administer 100% oxygen.</li> <li>Summon an emergency ambulance. If an ambulance is not available, contact a physician, hospital, or Poison Control Centre for further instruction.</li> <li>Keep the patient warm, comfortable and at rest while awaiting medical care.</li> <li>MONITOR THE BREATHING AND PULSE, CONTINUOUSLY.</li> <li>Administer rescue breathing (preferably with a demand-valve resuscitator, bag-valve mask-device, or pocket mask as trained) or CPR if necessary.</li> </ul>
Ingestion	Not considered a normal route of entry.

#### Indication of any immediate medical attention and special treatment needed

for intoxication due to Freons/ Halons;

#### A: Emergency and Supportive Measures

- Maintain an open airway and assist ventilation if necessary
- Treat coma and arrhythmias if they occur. Avoid (adrenaline) epinephrine or other sympathomimetic amines that may precipitate ventricular arrhythmias. Tachyarrhythmias caused by increased myocardial sensitisation may be treated with propranolol, 1-2 mg IV or esmolol 25-100 microgm/kg/min IV.
- Monitor the ECG for 4-6 hours
- B: Specific drugs and antidotes:

There is no specific antidote

## C: Decontamination

- Inhalation; remove victim from exposure, and give supplemental oxygen if available.
- Ingestion; (a) Prehospital: Administer activated charcoal, if available. DO NOT induce vomiting because of rapid absorption and the risk of abrupt onset CNS depression. (b) Hospital: Administer activated charcoal, although the efficacy of charcoal is unknown. Perform gastric lavage only if the ingestion was very large and recent (less than 30 minutes)
- D: Enhanced elimination:

There is no documented efficacy for diuresis, haemodialysis, haemoperfusion, or repeat-dose charcoal.

POISONING and DRUG OVERDOSE, Californian Poison Control System Ed. Kent R Olson; 3rd Edition

- ▶ Do not administer sympathomimetic drugs unless absolutely necessary as material may increase myocardial irritability.
- No specific antidote.
- Because rapid absorption may occur through lungs if aspirated and cause systematic effects, the decision of whether to induce vomiting or not should be made by an attending physician.
- If lavage is performed, suggest endotracheal and/or esophageal control.
- Danger from lung aspiration must be weighed against toxicity when considering emptying the stomach.

Chemwatch: 5419-59	Page <b>3</b> of <b>11</b>	Issue Date: 19/08/2020
Version No: 2.1	R507	Print Date: 16/06/2022

Treatment based on judgment of the physician in response to reactions of the patient

- For frost-bite caused by liquefied petroleum gas:
- ▶ If part has not thawed, place in warm water bath (41-46 C) for 15-20 minutes, until the skin turns pink or red.
- Analgesia may be necessary while thawing.
- F If there has been a massive exposure, the general body temperature must be depressed, and the patient must be immediately rewarmed by whole-body immersion, in a bath at the above temperature.
- Shock may occur during rewarming.
- Administer tetanus toxoid booster after hospitalization.
- Prophylactic antibiotics may be useful.
- The patient may require anticoagulants and oxygen.

[Shell Australia 22/12/87] For gas exposures:

#### BASIC TREATMENT

## Establish a patent airway with suction where necessary.

- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- Monitor and treat, where necessary, for pulmonary oedema.
- Monitor and treat, where necessary, for shock.
- Anticipate seizures.

ADVANCED TREATMENT

Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.

- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.

Proparacaine hydrochloride should be used to assist eye irrigation.

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

### **SECTION 5 Firefighting measures**

#### Extinguishing media

SMALL FIRE: Use extinguishing agent suitable for type of surrounding fire. LARGE FIRE: Cool cylinder. DO NOT direct water at source of leak or venting safety devices as icing may occur.

#### Special hazards arising from the substrate or mixture

Fire Incompatibility	Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result			
Advice for firefighters				
Fire Fighting	GENERAL         • Alert Fire Brigade and tell them location and nature of hazard.         • Wear breathing apparatus and protective gloves.         • Fight fire from a safe distance, with adequate cover.         • Use water delivered as a fine spray to control fire and cool adjacent area.         • DO NOT approach cylinders suspected to be hot.         • Cool fire exposed cylinders with water spray from a protected location.         • If safe to do so, remove cylinders from path of fire.         • SPECIAL REQUIREMENTS:         • Excessive pressures may develop in a gas cylinder exposed in a fire; this may result in explosion.         • Cylinders with pressure relief devices may release their contents as a result of fire and the released gas may constitute a further source of hazard for the fire-fighter.         • Cylinders without pressure-relief valves have no provision for controlled release and are therefore more likely to explode if exposed to fire.         • FIRE FIGHTING REQUIREMENTS:         • The need for proximity, entry and special protective clothing should be determined for each incident, by a competent fire-fighting safety professional.			
Fire/Explosion Hazard	<ul> <li>Containers may explode when heated - Ruptured cylinders may rocket</li> <li>Fire exposed containers may vent contents through pressure relief devices.</li> <li>High concentrations of gas may cause asphyxiation without warning.</li> <li>May decompose explosively when heated or involved in fire.</li> <li>Contact with gas may cause burns, severe injury and/ or frostbite.</li> <li>Decomposition may produce toxic fumes of: carbon monoxide (CO)</li> <li>Combustion products include: carbon dioxide (CO2)</li> <li>hydrogen fluoride</li> <li>other pyrolysis products typical of burning organic material.</li> <li>Contains low boiling substance: Closed containers may rupture due to pressure buildup under fire conditions.</li> <li>Vented gas is more dense than air and may collect in pits, basements.</li> </ul>			

Personal precautions, protective equipment and emergency procedures

See section 8

#### **Environmental precautions**

See section 12

## Methods and material for containment and cleaning up

Minor Spills	<ul> <li>Avoid breathing vapour and any contact with liquid or gas. Protective equipment including respirator should be used.</li> <li>DO NOT enter confined spaces where gas may have accumulated.</li> <li>Increase ventilation.</li> <li>Clear area of personnel.</li> <li>Stop leak only if safe to so do.</li> <li>Remove leaking cylinders to safe place. Release pressure under safe controlled conditions by opening valve.</li> <li>Do not exert excessive pressure on the valve; do not attempt to operate a damaged valve</li> <li>Orientate cylinder so that the leak is gas, not liquid, to minimise rate of leakage</li> <li>Keep area clear of personnel until gas has dispersed.</li> </ul>
Major Spills	<ul> <li>Clear area of all unprotected personnel and move upwind.</li> <li>Alert Emergency Authority and advise them of the location and nature of hazard.</li> <li>Wear breathing apparatus and protective gloves.</li> <li>Prevent by any means available, spillage from entering drains and water-courses.</li> <li>Consider evacuation.</li> <li>Increase ventilation.</li> <li>No smoking or naked lights within area.</li> <li>Stop leak only if safe to so do.</li> <li>Water spray or fog may be used to disperse vapour.</li> <li>DO NOT enter confined space where gas may have collected.</li> <li>Keep area clear until gas has dispersed.</li> </ul>

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

## SECTION 7 Handling and storage

Precautions for safe handling	
Safe handling	<ul> <li>Consider use in closed pressurised systems, fitted with temperature, pressure and safety relief valves which are vented for safe dispersal. Use only properly specified equipment which is suitable for this product, its supply pressure and temperature</li> <li>The tubing network design connecting gas cylinders to the delivery system should include appropriate pressure indicators and vacuum or suction lines.</li> <li>Fully-welded types of pressure gauges, where the bourdon tube sensing element is welded to the gauge body, are recommended.</li> <li>Before connecting gas cylinders, ensure manifold is mechanically secure and does not containing another gas. Before disconnecting gas cylinder, isolate supply line segment proximal to cylinder, remove trapped gas in supply line with aid of vacuum pump</li> <li>When connecting or replacing cylinders take care to avoid airborne particulates violently ejected when system pressurises.</li> <li>Consider the use of doubly-contained piping; diaphragm or bellows sealed, soft seat valves; backflow prevention devices; flash arrestors; and flow monitoring or limiting devices. Gas cabinets, with appropriate exhaust treatment, are recommended, as is automatic monitoring of the secondary enclosures and work areas for release.</li> <li>Use a pressure reducing regulator when connecting cylinder to lower pressure (&lt;100 psig) piping or systems</li> <li>Use a check valve or trap in the discharge line to prevent hazardous back-flow into the cylinder</li> <li>Check regularly for spills or leaks. Keep valves tightly closed but do not apply extra leverage to hand wheels or cylinder keys.</li> <li>Open valve slowly. If valve is resistant to opening then contact your supervisor</li> <li>Valve protection caps must remain in place must remain in place unst remain tor place cap.</li> <li>A bubble of gas may buildup behind the outlet dust cap during transportation, after prolonged storage, due to defective cylinder valve or if a dust cap is in</li></ul>
Other information	Do NOT store halogenated aliphatics in areas containing alkali or alkaline earth metals such as powdered aluminum, zinc, or beryllium Cylinders should be stored in a purpose-built compound with good ventilation, preferably in the open. Such compounds should be sited and built in accordance with statutory requirements. The storage compound should be kept clear and access restricted to authorised personnel only. Cylinders stored in the open should be protected against rust and extremes of weather. Cylinders in storage should be properly secured to prevent toppling or rolling. Cylinder valves should be closed when not in use. Where cylinders are fitted with valve protection this should be in place and properly secured. Gas cylinders should be segregated according to the requirements of the Dangerous Goods Act. Preferably store full and empty cylinders separately. Check storage areas for hazardous concentrations of gases prior to entry. Full cylinders in storage should be checked periodically for general condition and leakage. Protect cylinders against physical damage. Move and store cylinders correctly as instructed for their manual handling. NOTE: A 'G' size cylinder is usually too heavy for an inexperienced operator to raise or lower.

Suitable container	<ul> <li>DO NOT use aluminium or galvanised containers</li> <li>Cylinder:</li> <li>Ensure the use of equipment rated for cylinder pressure.</li> <li>Ensure the use of compatible materials of construction.</li> <li>Valve protection cap to be in place until cylinder is secured, connected.</li> <li>Cylinder must be properly secured either in use or in storage.</li> <li>Cylinder valve must be closed when not in use or when empty.</li> <li>Segregate full from empty cylinders.</li> </ul> WARNING: Suckback into cylinder may result in rupture. Use back-flow preventive device in piping.
Storage incompatibility	<ul> <li>As a general rule, hydrofluorocarbons tend to be flammable unless they contain more fluorine atoms than hydrogen atoms.</li> <li>Haloalkanes: <ul> <li>are highly reactive:some of the more lightly substituted lower members are highly flammable; the more highly substituted may be used as fire suppressants, not always with the anticipated results.</li> <li>may react with the lighter divalent metals to produce more reactive compounds analogous to Grignard reagents.</li> <li>may react on contact with potassium or its alloys - although apparently stable on contact with a wide rage of halocarbons, reaction products may be shock-sensitive and may explode with great violence on light impact; severity generally increases with the degree of halocarbon substitution and potassium-sodium alloys give extremely sensitive mixtures .</li> </ul> </li> <li>BRETHERICK L: Handbook of Reactive Chemical Hazards <ul> <li>react with brass and steel.</li> <li>may react with brass and steel.</li> <li>may react with brass and steel.</li> <li>may react explosively with strong oxidisers</li> <li>may degrade rubber, and plastics such as methacrylate polymers, polyethylene and polystyrene, paint and coatings</li> <li>Compressed gases may contain a large amount of kinetic energy over and above that potentially available from the energy of reaction produced by the gas in chemical reaction with other substances</li> </ul> </li> </ul>



X — Must not be stored together

0 — May be stored together with specific preventions

+ — May be stored together

Note: Depending on other risk factors, compatibility assessment based on the table above may not be relevant to storage situations, particularly where large volumes of dangerous goods are stored and handled. Reference should be made to the Safety Data Sheets for each substance or article and risks assessed accordingly.

## SECTION 8 Exposure controls / personal protection

#### **Control parameters**

Occupational Exposure Limits (OEL)

### INGREDIENT DATA

Not Available

## Emergency Limits

Ingredient	TEEL-1	TEEL-2		TEEL-3
R507	Not Available	Not Available		Not Available
Ingredient	Original IDLH		Revised IDLH	
pentafluoroethane	Not Available		Not Available	
1,1,1-trifluoroethane	Not Available		Not Available	

### MATERIAL DATA

**Exposure controls** 

Appropriate engineering controls	<ul> <li>effective in protecting workers and will typically be independent of The basic types of engineering controls are:</li> <li>Process controls which involve changing the way a job activity or prenclosure and/or isolation of emission source which keeps a select "removes" air in the work environment. Ventilation can remove or match the particular process and chemical or contaminant in use.</li> <li>Employers may need to use multiple types of controls to prevent environment and exhaust gas treatment may be required in work areas.</li> <li>Consideration should be given to the use of diaphragm or bells devices.</li> <li>Automated alerting systems with automatic shutdown of gas-1</li> <li>Respiratory protection in the form of air-supplied or self-contales than 19%.</li> <li>Cartridge respirators do NOT give protection and may result in</li> </ul>	rocess is done to reduce the risk. ed hazard "physically" away from the worker and ventilation that strategically "adds" and dilute an air contaminant if designed properly. The design of a ventilation system must mployee overexposure. , if enclosed, need discrete/controlled exhaust ventilation. quired by certain jurisdictions. ows-sealed, soft-seat valves; backflow prevention devices and flow-monitoring or limiting flow may be appropriate and may in fact be mandatory in certain jurisdictions. sined breathing equipment must be worn if the oxygen concentration in the workplace air is

	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	
	square of distance from the extraction point (in simple cases) to distance from the contaminating source. The air velocity at extraction of gases discharged 2 meters distant from the extra	e away from the opening of a simple extraction pipe. Velocity generally decreases with the Therefore the air speed at the extraction point should be adjusted, accordingly, after reference the extraction fan, for example, should be a minimum of 1-2.5 m/s (200-500 f/min.) for action point. Other mechanical considerations, producing performance deficits within the ocities are multiplied by factors of 10 or more when extraction systems are installed or used.	
Personal protection			
Eye and face protection	<ul> <li>Chemical goggles.</li> <li>Full face shield may be required for supplementary but never for primary protection of eyes.</li> <li>Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses 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]</li> </ul>		
Skin protection	See Hand protection below		
Hands/feet protection	<ul> <li>Butyl rubber gloves         <ul> <li>Butyl rubber gloves should be used when har</li> <li>Nitrile, PVC-coated nitrile, and PVC protectiv</li> </ul> </li> <li>When handling sealed and suitably insulated cylinders we         <ul> <li>Insulated gloves:</li> <li>NOTE: Insulated gloves should be loose fitting so that may be be placed in the liquid; they provide only short-term protection</li> </ul> </li> </ul>	e equipment are not recommended ear cloth or leather gloves. removed quickly if liquid is spilled upon them. Insulated gloves are not made to permit hands to	
Body protection	See Other protection below		
Other protection	<ul> <li>Halogen-selective detectors use a specialized sensor that allows the monitor to detect compounds containing fluorine, chlorine, bromine, and iodine with-out interference from other species. These detectors are typically easy to use, feature higher sensitivity than the nonselective detectors (detection limits are typically &lt;5 ppm when used as an area monitor and &lt;1.4 gm/yr [&lt;0.05 oz/yr] when used as a leak pinpointer).</li> <li>Compound-Specific Detectors are typically capable of detecting the presence of a single compound without interference from other compounds.</li> <li>Protective overalls, closely fitted at neck and wrist.</li> <li>Eye-wash unit.</li> <li>Ensure availability of lifeline in confined spaces.</li> <li>Staff should be trained in all aspects of rescue work.</li> <li>Rescue gear: Two sets of SCBA breathing apparatus Rescue Harness, lines etc.</li> </ul>		

#### **Respiratory protection**

Type AX Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	AX-AUS / Class1	-
up to 50	1000	-	AX-AUS / Class 1
up to 50	5000	Airline *	-
up to 100	5000	-	AX-2
up to 100	10000	-	AX-3
100+			Airline**

\* - Continuous Flow \*\* - Continuous-flow or positive pressure demand

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

- Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used
- Positive pressure, full face, air-supplied breathing apparatus should be used for work in enclosed spaces if a leak is suspected or the primary containment is to be opened (e.g. for a cylinder change)
- Air-supplied breathing apparatus is required where release of gas from primary containment is either suspected or demonstrated.

### **SECTION 9** Physical and chemical properties

#### Information on basic physical and chemical properties

Appearance	Clear colourless gas with slight ethereal odour; does not mix with water.
, appearance	cical colouness gas with sught caller call out any acces not mix with watch

Physical state	Liquified Gas	Relative density (Water = 1)	1.1 @20C
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Applicable	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	-47.1	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	1131 @20C	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (Not Available%)	Not Applicable
Vapour density (Air = 1)	3.45	VOC g/L	Not Available

## SECTION 10 Stability and reactivity

Reactivity	See section 7		
Chemical stability	<ul> <li>Unstable in the presence of incompatible materials.</li> <li>Product is considered stable.</li> <li>Hazardous polymerisation will not occur.</li> <li>Extremely high temperatures.</li> </ul>		
Possibility of hazardous reactions	See section 7		
Conditions to avoid	ee section 7		
Incompatible materials	See section 7		
Hazardous decomposition products	See section 5		

## **SECTION 11 Toxicological information**

ormation on toxicological effects	Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and
	vertigo. Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual
	<ul> <li>individual.</li> <li>Limited evidence or practical experience suggests that the material may produce irritation of the respiratory system, in a significant 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 repairin 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.</li> <li>Exposure to high concentrations of fluorocarbons may produce cardiac arrhythmias or cardiac arrest due sensitisation of the heart to adrenalin or noradrenalin. Deaths associated with exposures to fluorocarbons (specifically halogenated aliphatics) have occurred in occupational settings and in inhalation of bronchodilator drugs.</li> <li>Bronchospasm consistently occurs in human subjects inhaling fluorocarbons. At a measured concentration of 1700 ppm of one of the commercially available aerosols there is a biphasic change in ventilatory capacity, the first reduction occurring within a few minutes and the second delayed up to 30 minutes. Most subjects developed bradycardia (reduced pulse rate).</li> <li>Bradycardia is encountered in dogs when administration is limited to upper respiratory tract (oropharyngela and nasal areas). Cardiac arrhythmias can be experimentally induced in animals (species dependency is pronounced with dogs and monkeys requiring lesser amounts of fluorocarbon FC-11 than rats or mice). Sensitivity is increased by injection of adrenalin or cardiac ischaemia/necrosis or pulmonary thrombosis/bronchitis. The cardiotoxic effects of the fluorocarbons originate from irritation of the respiratory tract which in turn reflexively influences the</li></ul>
Inhaled	followed by direct depression of the heart after absorption. Exposure to fluorocarbon thermal decomposition products may produce flu-like symptoms including chills, fever, weakness, muscular aches, headache, chest discomfort, sore throat and dry cough. Complete recovery usually occurs within 24 hours of exposure. Acute intoxication by halogenated aliphatic hydrocarbons appears to take place over two stages. Signs of a reversible narcosis are evident in the first stage an in the second stage signs of injury to organs may become evident, a single organ alone is (almost) never involved. Depression of the central nervous system is the most outstanding effect of most halogenated aliphatic hydrocarbons. Inebriation and excitation, passing into narcosis, is a typical reaction. In severe acute exposures there is always a danger of death from respiratory failure or cardiac arrest due to a tendency to make the heart more susceptible to catecholamines (adrenalin)
	Material is highly volatile and may quickly form a concentrated atmosphere in confined or unventilated areas. The vapour may displace and replace air in breathing zone, acting as a simple asphyxiant. This may happen with little warning of overexposure. Symptoms of asphyxia (suffocation) may include headache, dizziness, shortness of breath, muscular weakness, drowsiness and ringing in the ears. If the asphyxia is allowed to progress, there may be nausea and vomiting, further physical weakness and unconsciousness and, finally, convulsions, coma and death Significant concentrations of the non-toxic gas reduce the oxygen level in the air. As the amount of oxygen is reduced from 21 to 14 volume %, the pulse rate accelerates and the rate and volume of breathing increase. The ability to maintain attention and think clearly is diminished and muscular coordination is somewhat disturbed. As oxygen decreases from 14-10% judgement becomes faulty; severe injuries may cause no pain. Muscular exertion leads to rapid fatigue. Further reduction to 6% may produce nausea and vomiting and the ability to move may be lost. Permanent brain damage may result even after resuscitation at exposures to this lower oxygen level. Below 6% breathing is in gasps and convulsions may occur. Inhalation of a mixture containing no oxygen may result in unconsciousness from the first breath and death will follow in a few minutes. The use of a quantity of material in an unventilated or confined space may result in increased exposure and an irritating atmosphere developing. Before starting consider control of exposure by mechanical ventilation.
Ingestion	Not normally a hazard due to physical form of product. Considered an unlikely route of entry in commercial/industrial environments

Skin Contact	<ul> <li>irritation and the development of dry, sensitive skin. They do not appear to be appreciably absorbed.</li> <li>Open cuts, abraded or irritated skin should not be exposed to this material</li> <li>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.</li> <li>Vapourising liquid causes rapid cooling and contact may cause cold burns, frostbite, even through normal gloves. Frozen skin tissues are painless and appear waxy and yellow. Signs and symptoms of frost-bite may include "pins and needles", paleness followed by numbness, a hardening an stiffening of the skin, a progression of colour changes in the affected area, (first white, then mottled and blue and eventually black; on recovery, red, hot, painful and blistered). Limited evidence suggests that repeated exposure may cause skin cracking, flaking or drying following normal handling and use.</li> </ul>		
Еуе	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). Direct contact with the eye may not cause irritation because of the extreme volatility of the gas; however concentrated atmospheres may produce irritation after brief exposures		
Chronic	Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. Principal route of occupational exposure to the gas is by inhalation. It is generally accepted that the fluorocarbons are less toxic than the corresponding halogenated aliphatic based on chlorine. Repeated inhalation exposure to the fluorocarbon FC-11 does not produce pathologic lesions of the liver and other visceral organs in experimental animals. There has been conjecture in non-scientific publications that fluorocarbons may cause leukemia, cancer, sterility and birth defects; these have not been verified by current research. The high incidence of cancer, spontaneous abortion and congenital anomalies amongst hospital personnel, repeatedly exposed to fluorine-containing general anaesthetics, has caused some scientists to call for a lowering of the fluorocarbon exposure standard to 5 ppm since some are mutagens.		
R507	TOXICITY Not Available	IRRITATION Not Available	
pentafluoroethane		IRRITATION	

pentafluoroethane	Inhalation(Rat) LC50; >709000 ppm4h <sup>[2]</sup>	Not Available	
1,1,1-trifluoroethane	TOXICITY Inhalation(Rat) LC50; >540000 ppm4h <sup>[2]</sup>	IRRITATION Not Available	
Legend:	1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances		

Cardiac sensitisation threshold limit >245400 mg/m3 Anaesthetic effects threshold limit 490800 mg/m3 * DuPont SDS				
NOTE: Substance has been shown to be mutagenic in at least one assay, or belongs to a family of chemicals producing damage or change to cellular DNA.				
Acute Toxicity X Carcinogenicity X				
×	Reproductivity	×		
×	STOT - Single Exposure	×		
×	STOT - Repeated Exposure	×		
×	Aspiration Hazard	×		
	NOTE: Substance has been shown to be mutagenic in at lease and the state of the sta	NOTE: Substance has been shown to be mutagenic in at least one assay, or belongs to a family of ch Carcinogenicity Carcinogeni		

Legend: 🗙 – Data

 $\pmb{\times}$  – Data either not available or does not fill the criteria for classification  $\pmb{\vee}$  – Data available to make classification

## SECTION 12 Ecological information

Toxicity

	Endpoint	Test Duration (hr)	Species	Value	Source
R507	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
pentafluoroethane	EC50	72h	Algae or other aquatic plants	>114mg/l	2
	NOEC(ECx)	96h	Fish	10mg/l	2
	EC50	48h	Crustacea	>97.9mg/l	2
	EC50	96h	Algae or other aquatic plants	142mg/l	2
	LC50	96h	Fish	>81.8mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Source
1,1,1-trifluoroethane	EC0(ECx)	96h	Algae or other aquatic plants	>44mg/l	2
	EC50	72h	Algae or other aquatic plants	~71mg/l	2

### R507

Legend: Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

### DO NOT discharge into sewer or waterways.

## Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
pentafluoroethane	HIGH	HIGH
1,1,1-trifluoroethane	HIGH	HIGH

## Bioaccumulative potential

Ingredient	Bioaccumulation	
pentafluoroethane	LOW (LogKOW = 1.5472)	
1,1,1-trifluoroethane	LOW (LogKOW = 1.7393)	

## Mobility in soil

Ingredient	Mobility
pentafluoroethane	LOW (KOC = 154.4)
1,1,1-trifluoroethane	LOW (KOC = 48.64)

## **SECTION 13 Disposal considerations**

Waste treatment methods			
Product / Packaging disposal	<ul> <li>Evaporate residue at an approved site.</li> <li>Return empty containers to supplier. If containers are marked non-returnable establish means of disposal with manufacturer prior to purchase.</li> <li>Ensure damaged or non-returnable cylinders are gas-free before disposal.</li> </ul>		

### **SECTION 14 Transport information**

Marine Pollutant

## Labels Required



### Land transport (UN)

UN number	3163		
UN proper shipping name	LIQUEFIED GAS, N.O.S. (contains pentafluoroethane and 1,1,1-trifluoroethane)		
Transport hazard class(es)	Class     2.2       Subrisk     Not Applicable		
Packing group	Not Applicable		
Environmental hazard	Not Applicable		
Special precautions for user	Special provisions274; 392Limited quantity120 ml		

## Air transport (ICAO-IATA / DGR)

UN number	3163			
UN proper shipping name	Liquefied gas, n.o.s. * (c	Liquefied gas, n.o.s. * (contains pentafluoroethane and 1,1,1-trifluoroethane)		
Transport hazard class(es)	ICAO/IATA Class ICAO / IATA Subrisk ERG Code	2.2 Not Applicable 2L		
Packing group	Not Applicable			
Environmental hazard	Not Applicable			
Special precautions for user	Special provisions Cargo Only Packing In Cargo Only Maximum Passenger and Cargo	Qty / Pack	Not Applicable           200           150 kg           200	

Passenger and Cargo Maximum Qty / Pack	75 kg
Passenger and Cargo Limited Quantity Packing Instructions	Forbidden
Passenger and Cargo Limited Maximum Qty / Pack	Forbidden

## Sea transport (IMDG-Code / GGVSee)

	•			
UN number	3163	3163		
UN proper shipping name	LIQUEFIED GAS, N.O.	LIQUEFIED GAS, N.O.S. (contains pentafluoroethane and 1,1,1-trifluoroethane)		
Transport hazard class(es)	IMDG Class     2.2       IMDG Subrisk     Not Applicable			
Packing group	Not Applicable			
Environmental hazard	Not Applicable	Not Applicable		
Special precautions for user	EMS Number Special provisions Limited Quantities	F-C, S-V 274 392 120 mL		

## Transport in bulk according to Annex II of MARPOL and the IBC code Not Applicable

## Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
pentafluoroethane	Not Available
1,1,1-trifluoroethane	Not Available

### Transport in bulk in accordance with the ICG Code

Product name	Ship Type
pentafluoroethane	Not Available
1,1,1-trifluoroethane	Not Available

## **SECTION 15 Regulatory information**

## Safety, health and environmental regulations / legislation specific for the substance or mixture

l	pentafluoroethane is found on the following regulatory lists			
	Not Applicable			
i.				

1,1,1-trifluoroethane is found on the following regulatory lists Not Applicable

### National Inventory Status

valional inventory status		
National Inventory	Status	
Australia - AIIC / Australia Non-Industrial Use	Yes	
Canada - DSL	Yes	
Canada - NDSL	No (pentafluoroethane; 1,1,1-trifluoroethane)	
China - IECSC	Yes	
Europe - EINEC / ELINCS / NLP	Yes	
Japan - ENCS	Yes	
Korea - KECI	Yes	
New Zealand - NZIOC	Yes	
Philippines - PICCS	Yes	
USA - TSCA	Yes	
Taiwan - TCSI	Yes	
Mexico - INSQ	Yes	
Vietnam - NCI	Yes	
Russia - FBEPH	Yes	
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.	

## **SECTION 16 Other information**

Revision Date	19/08/2020
Initial Date	19/08/2020

Chemwatch: 5419-59	Page 11 of 11	Issue Date: 19/08/2020
Version No: 2.1	R507	Print Date: 16/06/2022

#### Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The 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.

### Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average PC-STEL: Permissible Concentration-Short Term Exposure Limit IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure Limit。 IDLH: Immediately Dangerous to Life or Health Concentrations ES: Exposure Standard OSF: Odour Safety Factor NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level TLV: Threshold Limit Value LOD: Limit Of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors BEI: Biological Exposure Index AIIC: Australian Inventory of Industrial Chemicals DSL: Domestic Substances List NDSL: Non-Domestic Substances List IECSC: Inventory of Existing Chemical Substance in China EINECS: European INventory of Existing Commercial chemical Substances ELINCS: European List of Notified Chemical Substances NLP: No-Longer Polymers ENCS: Existing and New Chemical Substances Inventory KECI: Korea Existing Chemicals Inventory NZIOC: New Zealand Inventory of Chemicals PICCS: Philippine Inventory of Chemicals and Chemical Substances TSCA: Toxic Substances Control Act TCSI: Taiwan Chemical Substance Inventory INSQ: Inventario Nacional de Sustancias Químicas NCI: National Chemical Inventory FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

This document is copyright. Apart from any fair dealing for the purposes of private study, research, review or criticism, as permitted under the Copyright Act, no part may be reproduced by any process without written permission from CHEMWATCH. TEL (+61 3) 9572 4700.