

R115

A-Gas (U.S. Headquarters)

Chemwatch Hazard Alert Code: 1

Chemwatch: 1020

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Safety Data Sheet according to OSHA HazCom Standard (2012) requirements

L.GHS.USA.EN

SECTION 1 Identification

Product Identifier

Product name	R115
Synonyms	C2-Cl-F5; CF3CF2Cl; CFC-115; CFC115; monochloropentafluoroethane; Refrigerant R115 Freon-115 Halocarbon 115
Proper shipping name	Refrigerant gas R 115; Chloropentafluoroethane
Chemical formula	C2ClF5
Other means of identification	Not Available
CAS number	76-15-3

Recommended use of the chemical and restrictions on use

Relevant identified uses	Refrigerant, propellant in aerosol food preparations. The Montreal Protocol on Substances that Deplete the Ozone Layer has seen a decline in its use.
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Name, address, and telephone number of the chemical manufacturer, importer, or other responsible party

Registered company name	A-Gas (U.S. Headquarters)
Address	1100 Haskins Rd. Bowling Green, OH 43402 United States
Telephone	14198678990
Fax	1-419-867-3279
Website	www.agas.com/us
Email	tammy.myers@agas.com

Emergency phone number

Association / Organisation	PERS	CHEMWATCH EMERGENCY RESPONSE (24/7)
Emergency telephone number(s)	1-800-633-8253	+1 855-237-5573
Other emergency telephone number(s)	International 1-801-629-0667	+61 3 9573 3188

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SECTION 2 Hazard(s) identification

Classification of the substance or mixture


NFPA 704 diamond



Note: The hazard category numbers found in GHS classification in section 2 of this SDSs are NOT to be used to fill in the NFPA 704 diamond. Blue = Health Red = Fire Yellow = Reactivity White = Special (Oxidizer or water reactive substances)

Classification	Gases Under Pressure (Liquefied Gas), Hazardous to the Ozone Layer Category 1
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Label elements

Hazard pictogram(s)	
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Signal word	Warning
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Hazard statement(s)

H280	Contains gas under pressure; may explode if heated.
H420	Harms public health and the environment by destroying ozone in the upper atmosphere.

Hazard(s) not otherwise classified

Not Applicable

Precautionary statement(s) General

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.
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Precautionary statement(s) Disposal

P502	Refer to manufacturer/supplier for information on recovery/recycling.
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SECTION 3 Composition / information on ingredients**Substances**

CAS No	%[weight]	Name
76-15-3	>98	<u>chloropentafluoroethane</u>

Mixtures

See section above for composition of Substances

SECTION 4 First-aid measures**Description of first aid measures**

Eye Contact	<ul style="list-style-type: none"> ▶ If product comes in contact with eyes remove the patient from gas source or contaminated area. ▶ Take the patient to the nearest eye wash, shower or other source of clean water. ▶ Open the eyelid(s) wide to allow the material to evaporate. ▶ 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. ▶ 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. ▶ 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) ▶ Transport to hospital or doctor. ▶ Even when no pain persists and vision is good, a doctor should examine the eye as delayed damage may occur. ▶ If the patient cannot tolerate light, protect the eyes with a clean, loosely tied bandage. ▶ Ensure verbal communication and physical contact with the patient. <p>DO NOT allow the patient to rub the eyes DO NOT allow the patient to tightly shut the eyes DO NOT introduce oil or ointment into the eye(s) without medical advice DO NOT use hot or tepid water.</p>
Skin Contact	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately remove all contaminated clothing, including footwear. ▶ Flush skin and hair with running water (and soap if available).

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	<ul style="list-style-type: none"> ▶ Seek medical attention in event of irritation. In case of cold burns (frost-bite): <ul style="list-style-type: none"> ▶ Move casualty into warmth before thawing the affected part; if feet are affected carry if possible ▶ Bathe the affected area immediately in luke-warm water (not more than 35 deg C) for 10 to 15 minutes, immersing if possible and without rubbing ▶ DO NOT apply hot water or radiant heat. ▶ Apply a clean, dry, light dressing of "fluffed-up" dry gauze bandage ▶ If a limb is involved, raise and support this to reduce swelling ▶ If an adult is involved and where intense pain occurs provide pain killers such as paracetamol ▶ Transport to hospital, or doctor ▶ Subsequent blackening of the exposed tissue indicates potential of necrosis, which may require amputation.
Inhalation	<ul style="list-style-type: none"> ▶ Following exposure to gas, remove the patient from the gas source or contaminated area. ▶ NOTE: Personal Protective Equipment (PPE), including positive pressure self-contained breathing apparatus may be required to assure the safety of the rescuer. ▶ Prostheses such as false teeth, which may block the airway, should be removed, where possible, prior to initiating first aid procedures. ▶ If the patient is not breathing spontaneously, administer rescue breathing. ▶ If the patient does not have a pulse, administer CPR. ▶ If medical oxygen and appropriately trained personnel are available, administer 100% oxygen. ▶ Summon an emergency ambulance. If an ambulance is not available, contact a physician, hospital, or Poison Control Centre for further instruction. ▶ Keep the patient warm, comfortable and at rest while awaiting medical care. ▶ MONITOR THE BREATHING AND PULSE, CONTINUOUSLY. ▶ Administer rescue breathing (preferably with a demand-valve resuscitator, bag-valve mask-device, or pocket mask as trained) or CPR if necessary.
Ingestion	<ul style="list-style-type: none"> ▶ Not considered a normal route of entry. ▶ For advice, contact a Poisons Information Centre or a doctor. ▶ Avoid giving milk or oils. ▶ Avoid giving alcohol.

Most important symptoms and effects, both acute and delayed

See Section 11

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.
- ▶ 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.
- ▶ 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]

DO NOT administer sympathomimetic drugs as they may cause ventricular arrhythmias.

For gas exposures:

BASIC TREATMENT

- ▶ Establish a patent airway with suction where necessary.

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- ▶ 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 Fire-fighting 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

Special protective equipment and precautions for fire-fighters

Fire Fighting	<p>----- GENERAL -----</p> <ul style="list-style-type: none"> ▶ 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.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▶ Non combustible. ▶ Not considered to be a significant fire risk. ▶ Heating may cause expansion or decomposition leading to violent rupture of containers. ▶ May emit corrosive, poisonous fumes. <p>Decomposes on heating and produces acrid and toxic fumes of:</p> <ul style="list-style-type: none"> ▶ Containers may explode when heated - Ruptured cylinders may rocket ▶ Fire exposed containers may vent contents through pressure relief devices. ▶ High concentrations of gas may cause asphyxiation without warning. ▶ May decompose explosively when heated or involved in fire. ▶ Contact with gas may cause burns, severe injury and/ or frostbite. <p>Decomposition may produce toxic fumes of: carbon monoxide (CO) Combustion products include: carbon dioxide (CO₂) hydrogen chloride phosgene hydrogen fluoride other pyrolysis products typical of burning organic material.</p> <p>Contains low boiling substance: Closed containers may rupture due to pressure buildup under fire conditions.</p>

SECTION 6 Accidental release measures

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

Environmental hazard - contain spillage.

- ▶ Avoid breathing vapour and any contact with liquid or gas. Protective equipment including respirator should be used.
- ▶ **DO NOT** enter confined spaces where gas may have accumulated.

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	<ul style="list-style-type: none"> ▶ Increase ventilation.
Major Spills	<p>Environmental hazard - contain spillage.</p> <ul style="list-style-type: none"> ▶ Clear area of all unprotected personnel and move upwind. ▶ Alert Emergency Authority and advise them of the location and nature of hazard. ▶ Wear breathing apparatus and protective gloves. ▶ Prevent by any means available, spillage from entering drains and water-courses. ▶ Remove leaking cylinders to a safe place. ▶ Fit vent pipes. Release pressure under safe, controlled conditions ▶ Burn issuing gas at vent pipes. ▶ DO NOT exert excessive pressure on valve; DO NOT attempt to operate damaged valve.

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

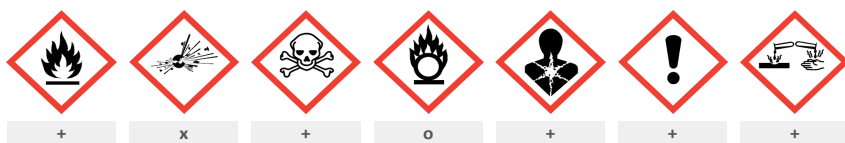
SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> · 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 · The tubing network design connecting gas cylinders to the delivery system should include appropriate pressure indicators and vacuum or suction lines. · Fully-welded types of pressure gauges, where the bourdon tube sensing element is welded to the gauge body, are recommended. · Before connecting gas cylinders, ensure manifold is mechanically secure and does not contain another gas. <ul style="list-style-type: none"> ▶ DO NOT transfer gas from one cylinder to another.
Other information	<ul style="list-style-type: none"> ▶ 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.

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> ▶ DO NOT use aluminium or galvanised containers ▶ Cylinder: <ul style="list-style-type: none"> ▶ Ensure the use of equipment rated for cylinder pressure. ▶ Ensure the use of compatible materials of construction. ▶ Valve protection cap to be in place until cylinder is secured, connected. ▶ Cylinder must be properly secured either in use or in storage.
Storage incompatibility	<p>Chloropentafluoroethane:</p> <ul style="list-style-type: none"> ▶ reacts, probably violently with barium, sodium and potassium ▶ reacts violently with molten aluminium, magnesium ▶ undergoes thermal decomposition when exposed to red hot surfaces, forming chlorine, hydrogen fluoride or chloride, phosgene and carbonyl fluoride ▶ contact with freshly abraded aluminium surfaces may result in strong exothermic reaction ▶ is incompatible with alkalis, chemically active and alkaline earth metals (e.g. aluminium powder, sodium, potassium, zinc), magnesium and magnesium alloys, zinc, aluminium alloys (> 2% magnesium). ▶ attacks some plastics, rubber and coatings; avoid contact with plastics such as methacrylate polymers, polyethylene and polystyrene. <p>CFCs may react with strong oxidising or reducing agents.</p> <p>Haloalkanes:</p> <ul style="list-style-type: none"> ▶ 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. ▶ may react with the lighter divalent metals to produce more reactive compounds analogous to Grignard reagents. ▶ may produce explosive compounds following prolonged contact with metallic or other azides ▶ may react on contact with potassium or its alloys - although apparently stable on contact with a wide range 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. <p>BRETherick L.: Handbook of Reactive Chemical Hazards</p> <ul style="list-style-type: none"> ▶ react with metal halides and active metals, eg. sodium (Na), potassium (K), lithium (Li), calcium (Ca), zinc (Zn), powdered aluminium (Al) and aluminium alloys, magnesium (Mg) and magnesium alloys. ▶ 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



X — Must not be stored together

O — 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.

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SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
US NIOSH Recommended Exposure Limits (RELs)	chloropentafluoroethane	Chloropentafluoroethane	1000 ppm / 6320 mg/m3	Not Available	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
chloropentafluoroethane	3,000 ppm	5,700 ppm	34,000 ppm


Ingredient	Original IDLH	Revised IDLH
chloropentafluoroethane	Not Available	Not Available

MATERIAL DATA

for chloropentafluoroethane

OSHA concluded that the recommended TLV-TWA would protect workers from significant risk of cardiac effects.

Exposure controls

Appropriate engineering controls	<p>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:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>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.</p>
Individual protection measures, such as personal protective equipment	
Eye and face protection	<ul style="list-style-type: none"> ▶ Chemical goggles. ▶ Full face shield may be required for supplementary but never for primary protection of eyes. ▶ 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.
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▶ When handling sealed and suitably insulated cylinders wear cloth or leather gloves. ▶ Insulated gloves: ▶ NOTE: Insulated gloves should be loose fitting so that may be removed quickly if liquid is spilled upon them. Insulated gloves are not made to permit hands to be placed in the liquid; they provide only short-term protection from accidental contact with the liquid.
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▶ Protective overalls, closely fitted at neck and wrist. ▶ Eye-wash unit. ▶ Ensure availability of lifeline in confined spaces. ▶ Staff should be trained in all aspects of rescue work.

Respiratory protection

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

- ▶ 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

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 / Class 1	-
up to 50	1000	-	AX-AUS / Class 1
up to 50	5000	Airline *	-
up to 100	5000	-	AX-2

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up to 100	10000	-	AX-3
100+		-	Airline**

** - Continuous-flow or positive pressure demand.

A(All classes) = Organic vapours, B AUS or B1 = Acid gases, 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 deg C)

- ▶ 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	Colourless, odourless gas; does not mix with water.		
Physical state	Liquified Gas	Relative density (Water = 1)	>1
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 (°C)	Not Available
Melting point / freezing point (°C)	-77	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	-39.1	Molecular weight (g/mol)	154.47
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Fast	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)	100
Vapour pressure (kPa)	226.4 @ 25 C	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (1%)	Not Applicable
Vapour density (Air = 1)	>1	VOC g/L	Not Available
Heat of Combustion (kJ/g)	Not Available	Ignition Distance (cm)	Not Available
Flame Height (cm)	Not Available	Flame Duration (s)	Not Available
Enclosed Space Ignition Time Equivalent (s/m3)	Not Available	Enclosed Space Ignition Deflagration Density (g/m3)	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur. ▶ Extremely high temperatures.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Information on toxicological effects

Inhaled	<p>The material is not thought to produce respiratory irritation (as classified by EC Directives using animal models). Nevertheless inhalation, of the material, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress.</p> <p>Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.</p> <p>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.</p>
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	<p>Chloropentafluoroethane has very low acute inhalation toxicity. rats exposed to 800,000 ppm plus 20% oxygen for 4 hours showed no clinical effects or histopathology. Rats and guinea pigs exposed at 600,000 ppm in oxygen for 2 hours and guinea pigs exposed at 200,000 ppm in air for intervals up to 2 hours showed no adverse clinical effects. Rats, mice, rabbits and dogs receiving 90 exposures, 6 hours daily, at 100,000 ppm showed no adverse effects.</p> <p>Acute intoxication by halogenated aliphatic hydrocarbons appears to take place over two stages. Signs of a reversible narcosis are evident in the first stage and 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)</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>				
Ingestion	<p>Overexposure is unlikely in this form.</p> <p>Not normally a hazard due to physical form of product.</p> <p>Considered an unlikely route of entry in commercial/industrial environments</p> <p>Oral toxicity studies with animals show minimal absorption of chloropentafluoroethane from the gastrointestinal tract.</p> <p>Dogs showed peak levels of <0.2 mg/ml venous blood after being intubated intragastrically with a maximum dose of about 1 gm/kg body weight of the substance contained in edible food topping. Intragastric intubation of rats given 140-172 mg/kg in cottonseed oil for 5 days/week for 2 weeks produced no abnormal clinical signs</p>				
Skin Contact	<p>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.</p> <p>Repeated exposure may cause skin cracking, flaking or drying following normal handling and use.</p> <p>Limited 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.</p> <p>In common with other halogenated aliphatics, fluorocarbons may cause dermal problems due to a tendency to remove natural oils from the skin causing irritation and the development of dry, sensitive skin. They do not appear to be appreciably absorbed.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Material on the skin evaporates rapidly and may cause tingling, chilling and even temporary numbness</p> <p>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.</p> <p>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 and 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).</p>				
Eye	<p>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).</p> <p>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 and 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).</p>				
Chronic	<p>Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.</p> <p>Principal route of occupational exposure to the gas is by inhalation.</p> <p>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.</p>				
R115	<table border="1"> <thead> <tr> <th data-bbox="368 1948 938 2016">TOXICITY</th> <th data-bbox="938 1948 1505 2016">IRRITATION</th> </tr> </thead> <tbody> <tr> <td data-bbox="368 2016 938 2072">Inhalation (Rat) LC50: 772421.829 ppm4h^[2]</td> <td data-bbox="938 2016 1505 2072">Not Available</td> </tr> </tbody> </table>	TOXICITY	IRRITATION	Inhalation (Rat) LC50: 772421.829 ppm4h ^[2]	Not Available
TOXICITY	IRRITATION				
Inhalation (Rat) LC50: 772421.829 ppm4h ^[2]	Not Available				
Legend:	<p>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</p>				

CHLOROPENTAFLUOROETHANE	<p>Chlorofluorocarbons may enter the human organism by inhalation, ingestion, or dermal contact. Inhalation is the most common and important route of entry, and exhalation is the most significant route of elimination from the body. Controlled studies with volunteer subjects and experimental animals have provided substantial data from exposures to a number of the chlorofluorocarbons. CFCs and HCFCs are known to sensitise the heart to adrenalin-induced arrhythmias.</p> <p>CFCs:</p> <ul style="list-style-type: none"> · can be absorbed across the alveolar membrane, gastro- intestinal tract, or the skin; · are absorbed rapidly into the blood, following inhalation; · are absorbed into the blood at a decreasing rate as blood concentration increases; · once in the blood, are absorbed by various tissues; · will reach a stable blood level if exposure is sufficiently long, indicating an equilibrium between the air containing the chlorofluorocarbons and the blood; · are still absorbed by body tissue, after the initial blood level stabilization, and continue to enter the body. <p>Studies with animals indicate that chlorofluorocarbons are rapidly absorbed after inhalation and are distributed by blood into practically all tissues of the body. The highest concentrations are usually found in fatty or lipid-containing tissues.</p>
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Acute Toxicity	✗	Carcinogenicity	✗
Skin Irritation/Corrosion	✗	Reproductivity	✗
Serious Eye Damage/Irritation	✗	STOT - Single Exposure	✗
Respiratory or Skin sensitisation	✗	STOT - Repeated Exposure	✗
Mutagenicity	✗	Aspiration Hazard	✗

Legend: ✗ – Data either not available or does not fill the criteria for classification
 ✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

R115	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available

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*

log Kow : 2.1 Koc : 708 Henry's atm m3 /mol: 3 BCF : 61 controlled ozone depleting gases: phase out by 1996 (C) controlled ozone depleting potential: 0.6 Bioaccumulation : not sig processes Abiotic: hydrol notsig,slw RxnOH* photol

On the basis of the available evidence concerning properties and predicted or observed environmental fate and behavior, the material may present a danger to the structure and/ or functioning of the stratospheric ozone layer.

Following release of CFCs into the atmosphere, they eventually enter the troposphere where they persist undegraded. Subsequently they diffuse into the stratosphere and degrade slowly (half-lives of about 20 years). In the stratosphere, CFCs react slowly with oxygen free radicals and release chlorine atoms which catalytically destroy ozone producing irreversible damage. Use of CFCs has been restricted by the Montreal Protocol on Substances that Deplete the Ozone Layer (1988) and also by US EPA Regulation 3093/94.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
chloropentafluoroethane	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
chloropentafluoroethane	LOW (LogKOW = 2.4683)

Mobility in soil

Ingredient	Mobility
chloropentafluoroethane	LOW (Log KOC = 224.7)

SECTION 13 Disposal considerations

Waste treatment methods


Product / Packaging disposal	▶ Evaporate residue at an approved site.
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Continued...

- ▶ Return empty containers to supplier. If containers are marked non-returnable establish means of disposal with manufacturer prior to purchase.
- ▶ Ensure damaged or non-returnable cylinders are gas-free before disposal.

SECTION 14 Transport information

Labels Required

	
Marine Pollutant	NO

Shipping container, transport vehicle placarding, and labeling may vary from the below information. This depends on the quantity shipped, the applicability of excepted quantity requirements, limited quantity requirements, and/or special provisions according to US DOT, IATA and IMDG regulations. In case of reshipment, it is the responsibility of the shipper to determine the appropriate labels and markings in accordance with applicable transport regulations.

Land transport (DOT)

14.1. UN number or ID number	1020	
14.2. UN proper shipping name	Refrigerant gas R 115; Chloropentafluoroethane	
14.3. Transport hazard class(es)	Class	2.2
	Subsidiary Hazard	Not Applicable
14.4. Packing group	Not Applicable	
14.5. Environmental hazard	Not Applicable	
14.6. Special precautions for user	Hazard Label	2.2
	Special provisions	T50

Air transport (ICAO-IATA / DGR)

14.1. UN number	1020	
14.2. UN proper shipping name	Refrigerant gas R 115; Chloropentafluoroethane	
14.3. Transport hazard class(es)	ICAO/IATA Class	2.2
	ICAO / IATA Subsidiary Hazard	Not Applicable
	ERG Code	2L
14.4. Packing group	Not Applicable	
14.5. Environmental hazard	Not Applicable	
14.6. Special precautions for user	Special provisions	Not Applicable
	Cargo Only Packing Instructions	200
	Cargo Only Maximum Qty / Pack	150 kg
	Passenger and Cargo Packing Instructions	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)

14.1. UN number	1020	
14.2. UN proper shipping name	CHLOROPENTAFLUOROETHANE; REFRIGERANT GAS R 115	
14.3. Transport hazard class(es)	IMDG Class	2.2
	IMDG Subsidiary Hazard	Not Applicable
14.4. Packing group	Not Applicable	
14.5. Environmental hazard	Not Applicable	

14.6. Special precautions for user	EMS Number	F-C, S-V
	Special provisions	Not Applicable
	Limited Quantities	120 mL

14.7.1. Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

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

Product name	Group
chloropentafluoroethane	Not Available

14.7.3. Transport in bulk in accordance with the IGC Code

Product name	Ship Type
chloropentafluoroethane	Not Available

SECTION 15 Regulatory information**Safety, health and environmental regulations / legislation specific for the substance or mixture**

chloropentafluoroethane is found on the following regulatory lists

UNEP (United Nations Environment Programme) Montreal Protocol Ozone Depleters - Annex A

US - Massachusetts - Right To Know Listed Chemicals

US - New Jersey Right to Know Hazardous Substances

US - Pennsylvania - Hazardous Substance List

US Clean Air Act (CAA) Stratospheric Ozone Protection - Class I substances

US DOE Temporary Emergency Exposure Limits (TEELs)

US EPCRA Section 313 Chemical List

US New York City Community Right-to-Know: List of Hazardous Substances

US NIOSH Recommended Exposure Limits (RELs)

US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory

US TSCA New Chemical Exposure Limits (NCEL)

Additional Regulatory Information

Not Applicable

Federal Regulations**Superfund Amendments and Reauthorization Act of 1986 (SARA)****Section 311/312 hazard categories**

Flammable (Gases, Aerosols, Liquids, or Solids)	No
Gas under pressure	Yes
Explosive	No
Self-heating	No
Pyrophoric (Liquid or Solid)	No
Pyrophoric Gas	No
Corrosive to metal	No
Oxidizer (Liquid, Solid or Gas)	No
Organic Peroxide	No
Self-reactive	No
In contact with water emits flammable gas	No
Combustible Dust	No
Carcinogenicity	No
Acute toxicity (any route of exposure)	No
Reproductive toxicity	No
Skin Corrosion or Irritation	No

Continued...

Respiratory or Skin Sensitization	No
Serious eye damage or eye irritation	No
Specific target organ toxicity (single or repeated exposure)	No
Aspiration Hazard	No
Germ cell mutagenicity	No
Simple Asphyxiant	No
Hazards Not Otherwise Classified	No

US. EPA CERCLA Hazardous Substances and Reportable Quantities (40 CFR 302.4)

None Reported

US. EPCRA Section 313 Toxic Release Inventory (TRI) (40 CFR 372)

This product contains the following EPCRA section 313 chemicals subject to the reporting requirements of section 313 of the Emergency Planning and Community Right-To-Know-Act of 1986 (40 CFR 372):

CAS No	%[weight]	Name
76-15-3	>98	chloropentafluoroethane

This information must be included in all SDSs that are copied and distributed for this material.

Additional Federal Regulatory Information

Not Applicable

State Regulations**US. California Proposition 65**

None Reported

Additional State Regulatory Information

Not Applicable

National Inventory Status

National Inventory	Status
Australia - AIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (chloropentafluoroethane)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	All chemical substances in this product have been designated as TSCA Inventory 'Active'
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	20/06/2022
Initial Date	16/06/2005

SDS Version Summary

Version	Date of Update	Sections Updated
3.1	29/01/2010	Hazards identification - Classification
5.1	20/06/2022	Expiration. Review and Update

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
- DNEL: Derived No-Effect Level
- PNEC: Predicted no-effect concentration
- MARPOL: International Convention for the Prevention of Pollution from Ships
- IMSBC: International Maritime Solid Bulk Cargoes Code
- IGC: International Gas Carrier Code
- IBC: International Bulk Chemical Code

- 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

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