

## A-Gas R401B

### A-Gas (U.S. Headquarters)

Chemwatch Hazard Alert Code: 3

Chemwatch: 7633-11

Issue Date: 10/12/2021

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

L.GHS.U.S.A.EN

## SECTION 1 Identification

### Product Identifier

<b>Product name</b>	A-Gas R401B
<b>Synonyms</b>	Not Available
<b>Proper shipping name</b>	Liquefied gas, n.o.s. (contains chlorodifluoromethane, 1-chloro-1,2,2,2-tetrafluoroethane and 1,1-difluoroethane)
<b>Chemical formula</b>	Not Applicable
<b>Other means of identification</b>	Not Available

### Recommended use of the chemical and restrictions on use

<b>Relevant identified uses</b>	Refrigerant gas. 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.
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### Name, address, and telephone number of the chemical manufacturer, importer, or other responsible party

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

### Emergency phone number

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

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

Una vez conectado y si el mensaje no está en su idioma preferido, por favor marque 02

## 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)

<b>Classification</b>	Gases Under Pressure (Liquefied Gas), Serious Eye Damage/Eye Irritation Category 2B, Hazardous to the Aquatic Environment Long-Term Hazard Category 1, 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.
H320	Causes eye irritation.
H410	Very toxic to aquatic life with long lasting effects.
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**

P273	Avoid release to the environment.
P264	Wash all exposed external body areas thoroughly after handling.

**Precautionary statement(s) Response**

P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P337+P313	If eye irritation persists: Get medical advice/attention.
P391	Collect spillage.

**Precautionary statement(s) Storage**

P410+P403	Protect from sunlight. Store in a well-ventilated place.
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**Precautionary statement(s) Disposal**

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
P502	Refer to manufacturer/supplier for information on recovery/recycling.

**SECTION 3 Composition / information on ingredients****Substances**

See section below for composition of Mixtures

**Mixtures**

CAS No	%[weight]	Name
75-45-6	61	<u>chlorodifluoromethane</u>
2837-89-0	28	<u>1-chloro-1,2,2,2-tetrafluoroethane</u>
75-37-6	11	<u>1,1-difluoroethane</u>

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

Eye Contact	<ul style="list-style-type: none"> <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> </ul>
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	<ul style="list-style-type: none"> <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> </ul> <p><b>DO NOT</b> allow the patient to rub the eyes  <b>DO NOT</b> allow the patient to tightly shut the eyes  <b>DO NOT</b> introduce oil or ointment into the eye(s) without medical advice  <b>DO NOT</b> use hot or tepid water.</p>
<p style="text-align: center;"><b>Skin Contact</b></p>	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> <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> <p>In case of cold burns (frost-bite):</p> <ul style="list-style-type: none"> <li>▶ Move casualty into warmth before thawing the affected part; if feet are affected carry if possible</li> <li>▶ 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</li> <li>▶ <b>DO NOT</b> apply hot water or radiant heat.</li> <li>▶ Apply a clean, dry, light dressing of "fluffed-up" dry gauze bandage</li> <li>▶ If a limb is involved, raise and support this to reduce swelling</li> <li>▶ If an adult is involved and where intense pain occurs provide pain killers such as paracetamol</li> <li>▶ Transport to hospital, or doctor</li> <li>▶ Subsequent blackening of the exposed tissue indicates potential of necrosis, which may require amputation.</li> </ul>
<p style="text-align: center;"><b>Inhalation</b></p>	<ul style="list-style-type: none"> <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>▶ <b>MONITOR THE BREATHING AND PULSE, CONTINUOUSLY.</b></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>
<p style="text-align: center;"><b>Ingestion</b></p>	<ul style="list-style-type: none"> <li>▶ Avoid giving milk or oils.</li> <li>▶ Avoid giving alcohol.</li> <li>▶ Not considered a normal route of entry.</li> <li>▶ For advice, contact a Poisons Information Centre or a doctor.</li> </ul>

**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

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

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 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

<b>Fire Fighting</b>	<p>GENERAL</p> <ul style="list-style-type: none"> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear breathing apparatus and protective gloves.</li> <li>▶ Fight fire from a safe distance, with adequate cover.</li> <li>▶ Use water delivered as a fine spray to control fire and cool adjacent area.</li> </ul>
<b>Fire/Explosion Hazard</b>	<ul style="list-style-type: none"> <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> </ul> <p>Decomposition may produce toxic fumes of:</p> <p>carbon monoxide (CO) carbon dioxide (CO2) hydrogen chloride phosgene hydrogen fluoride other pyrolysis products typical of burning organic material.</p> <p><b>Contains low boiling substance:</b> 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

<b>Minor Spills</b>	<ul style="list-style-type: none"> <li>▶ Avoid breathing vapour and any contact with liquid or gas. Protective equipment including respirator should be used.</li> <li>▶ <b>DO NOT</b> enter confined spaces where gas may have accumulated.</li> <li>▶ Increase ventilation.</li> </ul>
<b>Major Spills</b>	<ul style="list-style-type: none"> <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> </ul>

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- ▶ 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

<b>Safe handling</b>	<ul style="list-style-type: none"> <li>▶ Vented gas is more dense than air and may collect in pits, basements.</li> </ul>
<b>Other information</b>	<p>Storage temperature: &lt;52 deg.c&gt;</p> <ul style="list-style-type: none"> <li>▶ Cylinders should be stored in a purpose-built compound with good ventilation, preferably in the open.</li> <li>▶ Such compounds should be sited and built in accordance with statutory requirements.</li> <li>▶ The storage compound should be kept clear and access restricted to authorised personnel only.</li> <li>▶ Cylinders stored in the open should be protected against rust and extremes of weather.</li> </ul>

### Conditions for safe storage, including any incompatibilities

<b>Suitable container</b>	<ul style="list-style-type: none"> <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> </ul>
<b>Storage incompatibility</b>	<p>Avoid reaction with</p> <ul style="list-style-type: none"> <li>▶ Avoid magnesium, aluminium and their alloys, brass and steel.</li> </ul> <p>Haloalkanes:</p> <ul style="list-style-type: none"> <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 produce explosive compounds following prolonged contact with metallic or other azides</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> <p>BREThERICK L.: Handbook of Reactive Chemical Hazards</p> <ul style="list-style-type: none"> <li>▶ 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.</li> <li>▶ Avoid reaction with oxidising agents</li> </ul>



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.

## 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)	chlorodifluoromethane	Chlorodifluoromethane	1000 ppm / 3500 mg/m3	4375 mg/m3 / 1250 ppm	Not Available	Not Available

#### Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
chlorodifluoromethane	1,250 ppm	2,400 ppm	14,000 ppm
1-chloro-1,2,2,2-tetrafluoroethane	Not Available	Not Available	Not Available
1,1-difluoroethane	Not Available	Not Available	Not Available

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Ingredient	Original IDLH	Revised IDLH
chlorodifluoromethane	Not Available	Not Available
1-chloro-1,2,2,2-tetrafluoroethane	Not Available	Not Available
1,1-difluoroethane	Not Available	Not Available

## Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
1,1-difluoroethane	E	≤ 0.1 ppm
<b>Notes:</b>	<i>Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.</i>	


## MATERIAL DATA

May act as a simple asphyxiants; these are gases which, when present in high concentrations, reduce the oxygen content in air below that required to support breathing, consciousness and life; loss of consciousness, with death by suffocation may rapidly occur in an oxygen deficient atmosphere.

**CARE:** Most simple asphyxiants are odourless or possess low odour and there is no warning on entry into an oxygen deficient atmosphere. If there is any doubt, oxygen content can be checked simply and quickly. It may not be appropriate to only recommend an exposure standard for simple asphyxiants rather it is essential that sufficient oxygen be maintained.

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable.

## Exposure controls

<b>Appropriate engineering controls</b>	<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.</p> <p>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>
<b>Individual protection measures, such as personal protective equipment</b>	
<b>Eye and face protection</b>	<ul style="list-style-type: none"> <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.</li> </ul>
<b>Skin protection</b>	See Hand protection below
<b>Hands/feet protection</b>	<ul style="list-style-type: none"> <li>▶ Neoprene gloves</li> <li>▶ When handling sealed and suitably insulated cylinders wear cloth or leather gloves.</li> <li>▶ Insulated gloves:</li> <li>▶ 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.</li> </ul>
<b>Body protection</b>	See Other protection below
<b>Other protection</b>	<ul style="list-style-type: none"> <li>▶ 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)</li> <li>▶ Air-supplied breathing apparatus is required where release of gas from primary containment is either suspected or demonstrated.</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> </ul>

## Respiratory protection

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

## SECTION 9 Physical and chemical properties

## Information on basic physical and chemical properties

<b>Appearance</b>	Clear colourless liquefied gas with a slightly ethereal odour; does not mix with water.		
<b>Physical state</b>	Liquefied Gas	<b>Relative density (Water = 1)</b>	1.194 @ 25 deg.C
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol</b>	Not Available

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		/ water	
Odour threshold	Not Available	Auto-ignition temperature (°C)	685
pH (as supplied)	Not Applicable	Decomposition temperature (°C)	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	-34.6	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	>1 (CCl4=1)	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Applicable	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Applicable	Volatile Component (%vol)	100
Vapour pressure (kPa)	819	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (1%)	Not Applicable
Vapour density (Air = 1)	3.2 @ 25 deg.C	VOC g/L	Not Available

## SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> <li>▶ Presence of elevated temperatures.</li> <li>▶ Unstable in the presence of incompatible materials.</li> <li>▶ Product is considered stable.</li> <li>▶ Hazardous polymerisation will not occur.</li> </ul>
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>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> <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>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.</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> <p>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 repairing 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.</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>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>
Ingestion	<p>Not normally a hazard due to physical form of product.</p> <p>Considered an unlikely route of entry in commercial/industrial environments</p>
Skin Contact	<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>

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	<p>Material on the skin evaporates rapidly and may cause tingling, chilling and even temporary numbness</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 a 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> <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>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>
Eye	<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 a 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> <p>Limited evidence exists, or practical experience suggests, that the material may cause eye irritation in a substantial number of individuals and/or is expected to produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.</p>
Chronic	<p>Principal route of occupational exposure to the gas is by inhalation.</p> <p>Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.</p> <p>On the basis, primarily, of animal experiments, concern has been expressed by at least one classification body that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment.</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>

A-Gas R401B	TOXICITY	IRRITATION
	Not Available	Not Available
chlorodifluoromethane	TOXICITY	IRRITATION
	Inhalation (Rat) LC50: 220000 ppm4h <sup>[2]</sup>	Not Available
1-chloro-1,2,2,2-tetrafluoroethane	TOXICITY	IRRITATION
	Not Available	Not Available
1,1-difluoroethane	TOXICITY	IRRITATION
	Inhalation (Rat) LC50: >437500 ppm4h <sup>[1]</sup>	Eye: no adverse effect observed (not irritating) <sup>[1]</sup>
	Oral (Rat) LD50: 484 mg/kg <sup>[2]</sup>	Skin: no adverse effect observed (not irritating) <sup>[1]</sup>

**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

<b>CHLORODIFLUOROMETHANE</b>	<p>The substance is classified by IARC as Group 3:</p> <p><b>NOT</b> classifiable as to its carcinogenicity to humans.</p> <p>Evidence of carcinogenicity may be inadequate or limited in animal testing.</p>
<b>1,1-DIFLUOROETHANE</b>	<p>For 1,1-difluoroethane:</p> <p>1,1 -Difluoroethane is practically non-toxic following acute or chronic inhalation exposures. It is not a developmental or reproductive toxicant in rat studies and is negative for cancer in a two year rat inhalation study. It is not mutagenic in a <i>in vitro</i> bacterial reverse mutation assay and shows some weak clastogenicity in an <i>in vitro</i> human lymphocyte chromosome aberration test, but further evaluation of its ability to cause chromosome damage in and <i>in vivo</i> micronucleus test was negative. There is evidence that 1,1-difluoroethane can cause cardiac effects in some species, most notably heart arrhythmia in the dog.</p>
<b>CHLORODIFLUOROMETHANE &amp; 1-CHLORO-1,2,2,2-TETRAFLUOROETHANE</b>	<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.</p> <p>CFCs and HCFCs are known to sensitise the heart to adrenalin-induced arrhythmias.</p> <p>CFCs:</p> <ul style="list-style-type: none"> <li>· can be absorbed across the alveolar membrane, gastro- intestinal tract, or the skin;</li> <li>· are absorbed rapidly into the blood, following inhalation;</li> </ul>



- 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.

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.

For dichlorotrifluoroethane (HCFC-123) and dichloropentafluoropropane (HCFC-225)

Prolonged inhalation of high concentrations of HCFC-123 vapour may cause temporary nervous system depression with anesthetic effects such as dizziness, headache, confusion, incoordination, and loss of consciousness. With gross overexposure (greater than 20% concentration), a temporary alteration of the heart's electrical activity with irregular pulse, palpitations, or inadequate circulation may occur. Similar effects are observed in overexposure to CFC-11. Inhalation may cause liver effects with extended high-level exposures.

Disinfection by products (DBPs) are formed when disinfectants such as chlorine, chloramine, and ozone react with organic and inorganic matter in water. The observations that some DBPs such as trihalomethanes (THMs), di-/trichloroacetic acids, and 3-chloro-4-(dichloromethyl)-5-hydroxy-2(5H)-furanone (MX) are carcinogenic in animal studies have raised public concern over the possible adverse health effects of DBPs. To date, several hundred DBPs have been identified.

Numerous haloalkanes and haloalkenes have been tested for carcinogenic and mutagenic activities. In general, the genotoxic potential is dependent on the nature, number, and position of halogen(s) and the molecular size of the compound.

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

A-Gas R401B	Endpoint	Test Duration (hr)	Species	Value	Source
A-Gas R401B	Not Available	Not Available	Not Available	Not Available	Not Available
chlorodifluoromethane	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50(ECx)	96h	Algae or other aquatic plants	250mg/l	2
	EC50	96h	Algae or other aquatic plants	250mg/l	2
1-chloro-1,2,2,2-tetrafluoroethane	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48h	Crustacea	433mg/l	2
1,1-difluoroethane	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	504h	Crustacea	0.214mg/l	2
	EC50	96h	Algae or other aquatic plants	47.755mg/l	2
	EC50	48h	Crustacea	146.695mg/l	2
	LC50	96h	Fish	291.31mg/l	2
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
chlorodifluoromethane	LOW	LOW
1-chloro-1,2,2,2-tetrafluoroethane	HIGH	HIGH
1,1-difluoroethane	LOW	LOW

### Bioaccumulative potential

Continued...

Ingredient	Bioaccumulation
chlorodifluoromethane	LOW (LogKOW = 1.08)
1-chloro-1,2,2,2-tetrafluoroethane	LOW (LogKOW = 1.8605)
1,1-difluoroethane	LOW (LogKOW = 0.75)



**Mobility in soil**

Ingredient	Mobility
chlorodifluoromethane	LOW (Log KOC = 23.74)
1-chloro-1,2,2,2-tetrafluoroethane	LOW (Log KOC = 154.4)
1,1-difluoroethane	LOW (Log KOC = 35.04)

**SECTION 13 Disposal considerations****Waste treatment methods**

Product / Packaging disposal	<ul style="list-style-type: none"> <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>
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**SECTION 14 Transport information****Labels Required**

	
Marine Pollutant	

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	3163	
14.2. UN proper shipping name	Liquefied gas, n.o.s. (contains chlorodifluoromethane, 1-chloro-1,2,2,2-tetrafluoroethane and 1,1-difluoroethane)	
14.3. Transport hazard class(es)	Class	2.2
	Subsidiary Hazard	Not Applicable
14.4. Packing group	Not Applicable	
14.5. Environmental hazard	Environmentally hazardous	
14.6. Special precautions for user	Hazard Label	2.2
	Special provisions	T50

**Air transport (ICAO-IATA / DGR)**

14.1. UN number	3163	
14.2. UN proper shipping name	Liquefied gas, n.o.s. * (contains chlorodifluoromethane, 1-chloro-1,2,2,2-tetrafluoroethane and 1,1-difluoroethane)	
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	Environmentally hazardous	
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	3163	
14.2. UN proper shipping name	LIQUEFIED GAS, N.O.S. (contains chlorodifluoromethane, 1-chloro-1,2,2,2-tetrafluoroethane and 1,1-difluoroethane)	
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	Marine Pollutant	
14.6. Special precautions for user	EMS Number	F-C, S-V
	Special provisions	274 392
	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
chlorodifluoromethane	Not Available
1-chloro-1,2,2,2-tetrafluoroethane	Not Available
1,1-difluoroethane	Not Available

**14.7.3. Transport in bulk in accordance with the IGC Code**

Product name	Ship Type
chlorodifluoromethane	Not Available
1-chloro-1,2,2,2-tetrafluoroethane	Not Available
1,1-difluoroethane	Not Available

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

chlorodifluoromethane is found on the following regulatory lists

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Not Classified as Carcinogenic

US - Massachusetts - Right To Know Listed Chemicals

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

US CWA (Clean Water Act) - Toxic Pollutants

US DOE Temporary Emergency Exposure Limits (TEELs)

US EPA Integrated Risk Information System (IRIS)

US EPCRA Section 313 Chemical List

US NIOSH Recommended Exposure Limits (RELs)

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

US TSCA New Chemical Exposure Limits (NCEL)

Continued...

**1-chloro-1,2,2,2-tetrafluoroethane is found on the following regulatory lists**

US AIHA Workplace Environmental Exposure Levels (WEELs)  
 US Clean Air Act (CAA) Stratospheric Ozone Protection - Class II substances  
 US DOE Temporary Emergency Exposure Limits (TEELs)  
 US EPCRA Section 313 Chemical List  
 US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory  
 US Toxicology Excellence for Risk Assessment (TERA) Workplace Environmental Exposure Levels (WEEL)  
 US TSCA New Chemical Exposure Limits (NCEL)  
 US TSCA Section 12(b) - List of Chemical Substances Subject to Export Notification Requirements

**1,1-difluoroethane is found on the following regulatory lists**

US - Massachusetts - Right To Know Listed Chemicals  
 US AIHA Workplace Environmental Exposure Levels (WEELs)  
 US Department of Homeland Security (DHS) - Chemical Facility Anti-Terrorism Standards (CFATS) - Chemicals of Interest  
 US DOE Temporary Emergency Exposure Limits (TEELs)  
 US EPA Integrated Risk Information System (IRIS)  
 US Toxic Substances Control Act (TSCA) - Chemical Substance Inventory  
 US Toxicology Excellence for Risk Assessment (TERA) Workplace Environmental Exposure Levels (WEEL)

**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
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
75-45-6	61	chlorodifluoromethane

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

Continued...

CAS No	%[weight]	Name
2837-89-0	28	1-chloro-1,2,2,2-tetrafluoroethane

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 - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (chlorodifluoromethane; 1-chloro-1,2,2,2-tetrafluoroethane; 1,1-difluoroethane)
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	No (1-chloro-1,2,2,2-tetrafluoroethane)
Russia - FBEPH	Yes
<b>Legend:</b>	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

<b>Revision Date</b>	10/12/2021
<b>Initial Date</b>	08/02/2007

#### SDS Version Summary

Version	Date of Update	Sections Updated
8.1	07/03/2020	Classification change due to full database hazard calculation/update.
9.1	10/12/2021	Classification change due to full database hazard calculation/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

Continued...

- ▶ 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
  
- ▶ AIIIC: 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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