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CONNECTICUT VALLEY INDUSTRIES INC -- MERCURY -- 6685-00-242-2183

Product ID:MERCURY MSDS Date:01/01/1987 FSC:6685 NIIN:00-242-2183 MSDS Number: BZNHL === Responsible Party === Company Name: CONNECTICUT VALLEY INDUSTRIES INC Address:16 PLAINS RD City:ESSEX State:CT ZIP:06426-1501 Country:US Info Phone Num:203-767-9051 Emergency Phone Num:860-388-0822 Preparer's Nam e:F. KEVIN REILLY CAGE:55560 === Contractor Identification === Company Name: CONNECTICUT VALLEY INDUSTRIES INC Address:8 CENTER ROAD Box:City:OLD STAYBROOK State:CT ZIP:06475 Country:US Phone:860-388-0822/FAX: 860-388-1651 CAGE:55560 Ingred Name: MERCURY (SARA 313) (CERCLA) CAS:7439-97-6 RTECS #:0V4550000

Fraction by Wt: 100% Other REC Limits:NONE RECOMMENDED

OSHA PEL:C, 0.1 MG/M3; Z-2 ACGIH TLV:S,0.025 MG/M3; A4;96

EPA Rpt Qty

LD50 LC50 Mixture:28 MG/M3 IDLH

Routes of Entry: Inhalation:YES Skin:YES Ingestion:YES Reports of Carcinogenicity:NTP:NO IARC:NO OSHA:NO Health Hazards Acute and Chronic:ACUTE: INHALATION MAY CAUSE IRRITATION, SENSITIZATION, IS A NEUROTOXIN & NEPHROTOXIN. SKIN/EYE CONTACT MAY CAUSE SENSITIZATION & IS A NEUROTOXIN/NEPHROTOXIN IF ABSORBED. INGESTED MERCURY IS A NEUROTOX IN & NEPHROTOXIN. CHRONIC: PROLONGED ORREPEATED EXPOSURE MAY CAUSE DEMATITIS, SENSITIZATION, MERCURIALISM,KIDNEY DAMAGE Explanation of Carcinogenicity:NO INGREDIENT OF A CONCENTRATION OF 0.1%

OR GREATER IS LISTED AS A CARCINOGEN OR SUSPECTED CARCINOGEN. Effects of Overexposure:INHALED-CHEST PAIN, TIGHTNESS, SUDDEN ONSET OF THIRST, SWEET-METALLIC OR FOUL TASTE, COUGHING, DRYNESS OF MUCOUS MEMEBRANES, SEVERE HEADACHE, NAUSEA, VOMITING, PROFUSE SWEATING, EXAGGERATED MENTAL ACT IVITY. SKIN IRR

ITATION.

EYES-IRRITATION.INGESTED-BRUNING OF MOUTH/THROAT, NAUSEA, VOMITING, OTHERS SIMILAR TO INHALATION

Medical Cond Aggravated by Exposure:CHRONIC RESPIRATORY DISEASE, NERVOUS SYSTEM DISORDERS AND KIDNEY DISEASE.

First Aid:IN ALL CASES GET MEDICAL ATTENTION. EYES-FLUSH WITH WATER FOR 15 MINUTES, LIFT LIDS. SKIN-REMOVE CONTAMINATED CLOTHES. WASH WITH MILD SOAP & WATER. INHALED-REMOVE TO FRESH AIR. ADMINIS TER OXYGEN

OR AR TIFICIAL RESPIRATION AS NEEDED. INGESTED-CONTACT POISON CONTROL CENTER AND OBTAIN IMMEDIATE MEDICAL ATTENTION. MAINTAIN BLOOD PRESSURE AND AIRWAY. MEDICAL PERSONNEL-PERFORM GASTRIC LAVAGE OR EMESIS.

Extinguishing Media:WATER FOG, CARBON DIOXIDE, DRY CHEMICAL, STANDARD FOAM.

Fire Fighting Procedures: MOVE CONTAINERS FROM FIRE IF POSSIBLE. WEAR SELF-CONTAINED BREATHING APPARATUS AND FULL

FIRE FIGHTER'S PROTECTIVE GEAR. USE WATER IN FLOODING AMOUNTS. Unusual Fire/Explosion Hazard:NEGLIGIBLE FIRE HAZARD WHEN EXPOSED TO HEAT OR FLAME. AVOID BREATHING CORROSIVE AND POISONOUS VAPORS, KEEP UPWIND.

Spill Release Procedures: DO NOT TOUCH SPILLED MATERIAL. ISOLATE & DENY ENTRY. WEAR PROPER PERSONAL PROTECTION. STOP LEAK IF NO RISK. TAKE UP WITH SAND OR OTHER ABSORBENT MATERIAL AND PLACE IN CONTAINERS

FOR LATER IDSPOSAL.

Neutralizing Agent:NONE SPECIFIED BY MANUFACTURER.

Handling and Storage Precautions:STORE IN A COOL, DRY PLACE AWAY FROM INCOMPATIBLE MATERIALS.

Other Precautions:REPORTABLE QUANTITY: 1 POUND. SARA III SECTION 304 SAYS IF MORE THAN RQ IS SPILLED; SPILL MUST BE REPORTED TO LEPC AND NATIONAL RESPONSE CENTER AT 800-424-8802.

======= Exposure Controls/Personal Protection ==========

Respiratory Protection: IF ENGINEERING CONTROLS FAIL OR NON-ROUTINE USE OR AN EMERGENCY OCCURS; WEAR AN MSHA/NIOSH APPROVED RESPIRATOR WITH MERCURY VAPOR CARTRIDGE OR AN AIR-SUPPLIED RESPIRATOR OR SCBA, AS REQUIRED. USE IAW 29 CFR 1910.134.

Ventilation: PROVIDE LOCAL EXHAUST OR PROCESS ENCLOSURE VEWNTILATION TO MEET PUBLISHED EXPOSURE LIMITS.

Protective Gloves: APPROPRIATE GLOVES TO PREVENT CONTACT.

Eye Protection: SAFETY GOGGLES + FACESHIELD.

Other Protective Equipment: EYE WASH ST

ATION & SAFETY SHOWER.

Work Hygienic Practices:WASH HANDS AFTER HANDLING AND BEFORE EATING, DRINKING, OR SMOKING. LAUNDER CONTAMINATED CLOTHES BEFORE REUSE. Supplemental Safety and Health

ANYTIDOTE: GIVE DIMERCAPROL, 3 MG/KG, EVERY 4 HOURS FOR 1ST 2 DAYS, THEN 2 MG/KG EVERY 12 HRS FOR A TOTAL OF 10 DAYS. HEMODIALYSIS WILL SPEED REMOVAL OF THE MERCURY-DIMERCAPROL COMPLEX. PENICILLAMINE IS ALSO EFFECTIVE. GIVE UP TO 100 MG/KG/DAY DIVIDED INTO 4 DOSES FOR NO LONGER THAN 1 WEEK. CHELATE UNTIL HG-URINE