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MORTON INTL INC SPECIALTY CHEMICALS GROUP -- THIOKIL MC-236 ACCELERATOR - 8030-00-753-5005

Product ID:THIOKIL MC-236 ACCELERATOR MSDS Date:07/09/1992 FSC:8030 NIIN:00-753-5005 MSDS Number: BRQPW === Responsible Party === Company Name: MORTON INTL INC SPECIALTY CHEMICALS GROUP Address:333 W WACKER DR City:CHICAGO State:IL ZIP:60606-1218 Country:US Info Phone Num: 714-373-2837 EXT 11/ 312-807-3422 Emergency Phone Num:800-424-9300 CHEMTREC Preparer's Name: DAVID B WIENCKOWSKI CAGE:32063 === Contractor Identification === Company Name: MORTON INTL INC SPECIALTY CHEMICALS GROUP Address:333 W WACKER DR City:CHICAGO State:IL ZIP:60606-1218 Country:US Phone:312-807-2000 CAGE:32063

Ingred Name:MANGANESE DIOXIDE CAS:1313-13-9 RTECS #:OP0350000 Fraction by Wt: 60-70% Other REC Limits:*1 MG/M3;STEL 3MG/M3 OSHA PEL:AS MN FUME: 3 MG/M3 ACGIH TLV:5 MG/M3 RESP FRACT *

Ingred Name:TERPHENYL, HYDROGENATED (LD50: ORAL-RAT >10,000 MG/KG) CAS:61788-32-7 Fraction by Wt: 10-30% Other REC Limits:NONE SPECIFIED OSHA PEL:CEILING 0.5 PPM ACGIH TLV:0.5 PPM, 4.7 MG/M3

Ingred Name:TERPHENYL (LD50: ORAL-RAT 13,200 MG/KG) CAS:26140-60-3 RTECS #:WZ6450000 Fraction by Wt: 1-5% Other REC Limits:NONE SPECIFIED OSHA PEL:C 1.0 PPM ACGIH TLV:C 0.53 PPM; 9394

Ingred Name:ETHOXYLATED NONYLPHENOL PHOSPHATE (LD50: O RAL-RAT 3630 MG/KG) CAS:51811-79-1 Fraction by Wt: 1-5% Other REC Limits:NONE SPECIFIED

Ingred Name:DIPHENYLGUANIDINE,1,3- (LD50: ORAL-RAT 507 MG/KG) CAS:102-06-7 RTECS #:MF0875000 Fraction by Wt: 1-5% Other REC Limits:NONE SPECIFIED

Ingred Name:SODIUM HYDROXIDE (SARA III) CAS:1310-73-2 RTECS #:WB4900000 Fraction by Wt: 1-5% Other REC Limits:NONE SPECIFIED OSHA PEL:2 MG/M3 ACGIH TLV:C 2 MG/M3; 9293 EPA Rpt Qty:1000 LBS DOT Rpt Qty:1000 LBS

=========== Hazards Identification

Routes of Entry: Inhalation:YES Skin:YES Ingestion:YES Reports of Carcinogenicity:NTP:NO IARC:NO OSHA:NO Health Hazards Acute and Chronic:EYE: MILD TO MODERATE IRRITATION. SKIN: IRRITATION CAN OCCUR FOLLOWING PROLONGED/REPEATED CONTACT. CONTACT CAN CAUSE HYPERSENSITIVITY (ALLERGIC) REACTIONS IN SUSCEPTIBLE INDIVIDUALS. INHALATION: DIZZI NESS, HEADACHE, INCOORDINATION. INGESTION: GASTROINTESTINAL IRRITATION. NAUSEA, VOMITING, GASTROINTESTINAL UPSET.

Effects of Overexposure:DEPENDING ON THE ROUTE, FREQUENCY, AND DURATION OF EXPOSURE TOXICITY MAY EFFECT THE FOLLOWING ORGANS AND/OR SYSTEMS. LIVER, KIDNEY, EYE, SKIN, IMMUNE SYSTEM (ALLERGIC REACTIONS).

Medical Cond Aggravated by Exposure:SOME OF THE COMPONENTS IN THIS PRODUCT MAY AGGRAVATE EXISTING MEDICAL CONDITIONS. LIVER, KIDNEY, SKIN, IMMUNE SYSTEM AND/OR SPECIFIC CHEMICAL ALLERGIES.

First Aid:EYE: F

LUSH W/WATER 15 MIN. IF IRRITATION, SEE DR. SKIN:

REMOVE CONTAM CLOTHES & SHOES. WASH CONTAM SKIN W/SOAP & WATER. IF IRRIT, SEE DR. INHAL: REMOVE TO FRESH AIR. IF SYMPTOMS, GET IMMED MED AID. IF NOT BREATHING, GIVE ARTIF RESP. INGEST: GET MED AID. UNLESS ADVISED OTHERWISE, INDUCE VOMITING (IPECAC/FINGER DOWN THROAT). GIVE NOTHING BY MOUTH IF PERSON IS DROWSY, UNCONSCIOUS, HAS NO GAG REFLEX.

Flash Poin t Method:SCC Flash Point:>200F,>93C Extinguishing Media:SMALL FIRES: DRY CHEMICAL, CO2, HALON, WATER SPRAY,

FOAM. LARGE FIRES: WATER SPRAY, FOG, ALCOHOL FOAM. Fire Fighting Procedures:FIRE FIGHTERS & OTHERS WHO MAY BE EXPOSED TO COMBUSTION PRODUCTS SHOULD BE EQUIPPED W/NIOSH POSITIVE PRESSURE SCBA & FULL PROTECTIVE CLOTHING.

Unusual Fire/Explosion Hazard:NONE KNOWN

Spill Release Procedures:SHOVEL/VACUUM & PLACE IN

CLOSED CONTAINERS FOR FURTHER HANDLING & DISPSOAL. DO NOT FLUSH TO SEWER, STREAM, OTHER WATER BODIES. IF ABOVE TLV, EVACUATE EMPLOYEES & VENT AREA. USE AIR SUPPLIED RESPIRATOR OR SCBA IN AREAS WITH INADEQUATE VENTILATION.

Handling and Storage Precautions:STORE IN COOL, DRY, WELL VENTILATED AREA. NO SPECIAL PRECAUTIONS NEEDED. FOLLOW GOOD MFR & HANDLING PRACTICES. CONTAINER CAN BE HAZARDOUS WHEN EMPTY. Othe

r Precautions:DO NOT REUSE CONTAINER FOR FOOD, CLOTHING OR PRODUCTS FOR HUMAN OR ANIMAL COMSUMPTION OR WHERE SKIN CONTACT MAY OCCUR.

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

Respiratory Protection: ABOVE TLV/PEL WEAR NIOSH/MSHA EQUIPMENT. DETERMINE APPROPRIATE TYPE EQUIPMENT FOR SPECIFIC APPLICATION BY CONSULTING THE RESPIRATOR MFR. HIGH CONCENTRATIONS MAY NEED USE OF SCBA OR AIR SUPPLIED RESPIR ATOR. OBSERVE 29 CFR 1910.134. Ventilation: GENERAL (DILUT

ION) VENT TO KEEP BELOW TLV/PEL. EXHAUST

VENTILATION RECOMMENDED WHEN VAPOR/MIST/DUST CAN BE RELEASED. Protective Gloves: IMPERVIOUS GLOVES.SEE GLOVE MFR FOR TYPE

Eye Protection:WEAR CHEMICAL SPLASH GOGGLES

Other Protective Equipment: AN EYE WASH FACILITY SHOULD BE READILY AVAILABLE. WEAR PROTECTIVE CLOTHING.

Work Hygienic Practices:WASH AFTER HANDLING, BEFORE EATING, DRINKING, SMOKING, USING RESTROOM. CLEAN & DRY CONTAM CLOTHES & SHOES BEFORE REUSE.

Supplemental Safety and Health

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Y1:N1. NOTE TO PHYSICIAN: TREATMENT SHOULD BE DIRECTED AT PREVENTING ABSORPTION, AMINISTERING TO THE SYMPTOMS AS THEY OCCUR AND PROVIDING SUPPORTIVE THERAPY.

HCC:N1 Vapor Pres:0.1 @ 25 C Spec Gravity:2.1 (WATER=1) Viscosity:100-500POISES Evaporation Rate & amp; Reference: