OBSERVE ALL FEDERAL, STATE AND LOCAL REGULATIONS WHEN STORING OR DISPOSING OF THIS SUBSTANCE.

**STORAGE**

STORE AWAY FROM INCOMPATIBLE SUBSTANCES.

CONDITIONS TO AVOID

MAY BURN BUT DOES NOT IGNITE READILY. AVOID CONTACT WITH STRONG OXIDIZERS, EXCESSIVE HEAT, SPARKS OR OPEN FLAME.

SPILL AND LEAK PROCEDURES

OCCUPATIONAL SPILLS

STOP LEAK IF YOU CAN DO IT WITHOUT RISK. FOR SMALL SPILLS, TAKE UP WITH SAND OR OTHER ABSORBENT MATERIAL AND PLACE INTO CLEAN, DRY CONTAINERS FOR LATER DISPOSAL. KEEP UNNECESSARY PEOPLE AWAY. ISOLATE HAZARD AREA AND DENY ENTRY.

PROTECTIVE EQUIPMENT

VENTILATION:

PROVIDE LOCAL EXHAUST VENTILATION. VENTILATION EQUIPMENT MUST BE EXPLOSION PROOF.

RESPIRATOR:

THE FOLLOWING RESPIRATORS ARE RECOMMENDED BASED ON INFORMATION FOUND IN THE PHYSICAL DATA, TOXICITY AND HEALTH EFFECTS SECTIONS. THEY ARE RANKED IN ORDER FROM MINIMUM TO MAXIMUM RESPIRATORY PROTECTION. THE SPECIFIC RESPIRATOR SELECTED MUST BE BASED ON CONTAMINATION LEVELS FOUND IN THE WORKPLACE. MUST BE BASED ON THE SPECIFIC OPERATION. MUST NOT EXCEED THE WORKING LIMITS OF THE RESPIRATOR AND MUST BE JOINTLY APPROVED BY THE NATIONAL INSTITUTE FOR OCCUPATIONAL SAFETY AND HEALTH AND THE MINE SAFETY AND HEALTH ADMINISTRATION (NIOSH-MSHA).

ANY DUST AND MIST RESPIRATOR WITH A FULL FACEPIECE.

ANY AIR-PURIFYING FULL FACEPIECE RESPIRATOR WITH A HIGH-EFFICIENCY PARTICULATE FILTER.

ANY POWERED AIR-PURIFYING RESPIRATOR WITH A TIGHT-FITTING FACEPIECE AND HIGH-EFFICIENCY PARTICULATE FILTER.

ANY TYPE 'C' SUPPLIED-AIR RESPIRATOR WITH A FULL FACEPIECE OPERATED IN PRESSURE-DEMAND OR OTHER POSITIVE PRESSURE MODE OR WITH A FULL FACEPIECE, HELMET OR HOOD OPERATED IN CONTINUOUS FLOW MODE.

ANY SELF-CONTAINED BREATHING APPARATUS WITH A FULL FACEPIECE OPERATED IN PRESSURE-DEMAND OR OTHER POSITIVE PRESSURE MODE.

FOR FIREFIGHTING AND OTHER IMMEDIATELY DANGEROUS TO LIFE OR HEALTH CONDITIONS:

ANY SELF-CONTAINED BREATHING APPARATUS THAT HAS A FULL FACEPIECE AND IS OPERATED IN A PRESSURE-DEMAND MODE OR OTHER POSITIVE PRESSURE MODE.

ANY SUPPLIED-AIR RESPIRATOR THAT HAS A FULL FACEPIECE AND IS OPERATED IN A PRESSURE-DEMAND OR OTHER POSITIVE PRESSURE MODE IN COMBINATION WITH AN AUXILIARY SELF-CONTAINED BREATHING APPARATUS OPERATED IN PRESSURE-DEMAND OR OTHER POSITIVE PRESSURE MODE.

CLOTHING:

EMPLOYEE MUST WEAR APPROPRIATE PROTECTIVE (IMPEVIOUS) CLOTHING AND EQUIPMENT TO PREVENT REPEATED OR PROLONGED SKIN CONTACT WITH THIS SUBSTANCE.

GLOVES:

EMPLOYEE MUST WEAR APPROPRIATE PROTECTIVE GLOVES TO PREVENT CONTACT WITH THIS SUBSTANCE.

EYE PROTECTION:

EMPLOYEE MUST WEAR SPLASH-PROOF OR DUST-RESISTANT SAFETY GOGGLES TO PREVENT EYE CONTACT WITH THIS SUBSTANCE.

EMERGENCY EYE WASH: WHERE THERE IS ANY POSSIBILITY THAT AN EMPLOYEE'S EYES MAY BE EXPOSED TO THIS SUBSTANCE, THE EMPLOYER SHOULD PROVIDE AN EYE WASH FOUNTAIN WITHIN THE IMMEDIATE WORK AREA FOR EMERGENCY USE.

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ADDITIONAL INFORMATION:

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