MATERIAL SAFETY DATA SHEET

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ACETIC ACID, GLACIAL
Revision B

(518) 377-8855 Date December 1980 SECTION I. MATERIAL IDENTIFICATION MATERIAL NAME: ACETIC ACID, GLACIAL OTHER DESIGNATIONS: Ethanoic Acid, Anhydrous Acetic Acid, Methane Carboxylic Acid, CH3COOH, GE Material D5C26, CAS #000 064 197 MANUFACTURER: Available from many suppliers. HAZARD DATA 4 SECTION II. INGREDIENTS AND HAZARDS 8-hr TWA 25 mg/m³ or 99.5% Acetic Acid (CH₃COOH) 10 ppm* minimum Human, oral *Current OSHA standard and ACGIH (1980) TLV. TDLo 1470 µg/kg Gastrointestinal Tract Effects SECTION III. PHYSICAL DATA Specific gravity, 20/4 C ---- 1.05 Boiling pt, 1 atm, deg F (C) ---- 244 (118) Freezing point, deg F (C) ---- 62 (16.b) Vapor pressure at 25 C, mm Hg --- 14.8 Molecular weight ----60.06 Vapor density (Air=1) ---------- Soluble Solubility in water --Appearance & Odor: Clear, colorless, mobile liquid with a characteristic, sharp and pungent, vinegar-like odor which is perceptible (unfatigued) above 1 ppm. LOWER UPPER SECTION IV. FIRE AND EXPLOSION DATA Flash Point and Method | Autoignition Temp. | Flammability Limits In Air 16 19.9 @ 200 % by volume 800 F (427 C) 112 F (44.5 C) (TOC) Extinguishing Media: Use water spray, dry chemical, alcohol foam, or CO2. Water spray can be used to flush spills away from exposures and to dilute spills to nonflammable mixtures. Use water to keep fire-exposed containers cool. Glacial acetic acid is a combustible liquid. Water diluted acid can react with metals to produce hydrogen gas. Firefighters to wear self-contained breathing apparatus to protect against suffocating and corrosive vapors when this material is involved in a fire situation. SECTION V. REACTIVITY DATA This material is a stable chemical when stored and handled properly. It may react violently with such chemicals as ammonium nitrate, phosphorous trichloride, potassium hydroxide and other alkaline materials, and strong oxidizing agents. Reacts readily with most common metals (except aluminum), basic salts, amines, etc., to form water-soluble salts. Reacts with alcohol to form esters. Nitric acid or chromic acid can explode with acetic acid if not kept cold. Mixing chlorosulfonic acid, 2-aminoethanol, oleum, or ethylene diamine with acetic acid in a closed container can cause the temperature and pressure to increase. Contracts slightly on freezing.

10 ppm or 25 mg/ m^3 lation of vapor concentrations over 50 ppm intolerable, resulting in irritation of le eyes, nose, throat, and lungs. Repeated exposure to high concentrations may project congestion of the pharynx. Neither odor nor degree of irritation are adequate to indicate vapor concentrations. Skin contact can produce deep burns, with skin destruction. High vapor concentrations may blacken the skin, produce skin sensitization, contact vitits, and erosion of exposed teeth. Eye contact will cause immediate burns and inctivities, and erosion of exposed teeth. Eye contact will cause immediate burns and institution selection is improbable as the odor would be extremely institution; but severe intestinal irritation would result with burns to the mouth and the oper respiratory tract. HEALTH HAZARD INFORMATION TLV oper respiratory tract. Irrigate with water immediately for at least 15 minutes, including under ye Contact: kin Contact: Wash immediately with copious water. nhalation: Remove victim to fresh air; rinse wouth and nasal passages. Administer artificial respiration or oxygen if needed. ngestion: Rinse mouth. Give 3 glasses milk or water. Do not intubate stomach or prompt medical help for further treatment, observation and support. SPILL, LEAK, AND DISPOSAL PROCEDURES ECTION VII. Personnel cleaning up large spills should wear self-contained breathing apparatus and equipment to prevent contact with the liquid. If a leak or spill has not ignited, use water spray to dispense the with the liquid. vapors and to protect men attempting to stop a leak. Liquid surfaces of small spills or residue should be covered with sodium bicarbonate and flushed with a large excess of water to the sewer. Contain and pick up large spills, if possible, for waste disposal. SPOSAL: Dispose of waste material by incineration; or dispose of neutralized waste in a landfill. Follow Federal, State, and Local regulations. SPECIAL PROTECTION INFORMATION Exhaust hoods should have SECTION VIII. rovide adequate exhaust ventilation to meet TLV requirements. covide adequate exhaust ventilation to meet its requirements. Danage house income air velocity of 100 1fm minimum. Wear rubber gloves, aprons, etc to prevent skin conair velocity of 100 1fm minimum. Wear rubber gloves, aprons, etc to prevent any eve contact. tact. Splash proof goggles or face shields should be worn to prevent any eye contact. Gas tight goggles may also be required to prevent vapor irritation of the eyes. yewash stations and showers must be readily available where this material is handled. espirators should be available for nonroutine or emergency use. Where fumes are below 500 ppm, a chemical cartridge organic vapor respirator with full facepiece or a selfcontained breathing apparatus with full facepiece is warranted; fumes up to 1000 ppm require a Type C air-supplied respirator with full facepiece operated in pressure-Preclude from exposure individuals with disease of eyes, skin and respiratory tract. SPECIAL PRECAUTIONS AND COMMENTS Use with adequate ventilation. Exhaust ducts for ventilation should be acid resistant.

Detached storage preferred. Store in sealed containers away from oxidizing agents and combustible materials. Glass, polyethylene, Type 316 stainless steel containers are suitable. Prevent skin and eye contact as this acid is highly corrosive to body tissues. Olfactory detection at 1 ppm is well below the TLV; however, documentation shows workers can tolerate up to 200 ppm, probably due to olfactory fatigue. Suspected areas of high acetic acid concentrations or variable concentrations should be tested before DOT Classification - CORROSIVE MATERIAL, LABEL: CORROSIVE.
DATA SOURCE(S) CODE: 2-12,15,23-26,31,34,37-39

APPROVALS MIS APPROVALS: CRD

Industrial Hygiene

MEDICAL REVIEW:

and Safety

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