



<b>SECTION VI. HEALTH HAZARD INFORMATION</b>	TLV None established (See Sect II)
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Excessive inhalation of dust can cause irritation to mucous membranes of the respiratory tract. Not significantly absorbed through intact skin. Readily absorbed through damaged, abraded and burned skin, or open wounds and areas of active dermatitis when exposed to dry materials or aqueous solutions. Ingestion or absorption may cause nausea, vomiting, anuria, erythematous lesions on skin and mucous membranes, abdominal cramps, circulatory failure, and coma. Chronic exposures may cause dry skin, eruptions, and gastric disturbances. Poisoning can be acute or chronic. Adult acute fatal dose reported at 5 to >30g

**FIRST AID:** (moderate to slightly toxic)

Eye Contact: Flush thoroughly with running water for 15 min. including under eyelids.  
Skin Contact: Remove grossly contaminated clothing under safety shower. Flush affected area well with water.  
Inhalation: Remove to fresh air. Restore and/or support breathing as required.  
Ingestion: If conscious, rinse mouth with water. Give several glasses of water to drink to dilute. Induce vomiting.  
 Seek medical assistance for further treatment, observation and support after first aid.

**SECTION VII. SPILL, LEAK, AND DISPOSAL PROCEDURES**

Provide adequate ventilation. Clean-up personnel need protection to avoid inhalation of dust. Keep airborne particulate at a minimum when sweeping up. Collect solid spills and place in appropriate containers for reclaim or disposal. Liquid spills can be absorbed with inert solid. Residue and traces can be flushed to sewer with high dilution.  
DISPOSAL: Reclaim dry material for salvage or reuse. Unsalvageable waste may be buried in approved landfill. (Note that this material can have herbicidal properties.)  
 Follow Federal, State, and Local regulations.

**SECTION VIII. SPECIAL PROTECTION INFORMATION**

Provide sufficient ventilation in the workplace to keep airborne particulate at a low level. Dust respirators should be available for dusty conditions.  
 Use protection (rubber gloves, aprons, etc) appropriate for work situation to minimize skin contact. Avoid eye contact by use of chemical safety goggles where dusty conditions occur or solution splashing is possible.  
 Provide periodic medical examinations to those regularly exposed to boric acid with emphasis on liver and kidney function.  
 Eyewash stations and safety showers should be accessible to areas of large quantity use or handling especially if splashing is possible.

**SECTION IX. SPECIAL PRECAUTIONS AND COMMENTS**

Store in closed containers in a cool, dry, area. Storage bins should have a 60° sloping cone bottom with provision to prevent ingress of water. Carbon steel or aluminum containers are suitable for this dry storage. (Stainless steel needed for moist conditions.)  
 Use good housekeeping practices to prevent accumulation of dust and follow sound cleaning techniques that will keep airborne particulate at a low level.  
 Avoid breathing dust. Do not ingest. Avoid contact, especially when skin is cut or abraded or active dermatitis is present. Wash hands and face before eating, drinking or smoking after handling this material.

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