### Material Safety Data Sheet

May be used to comply with DSHA's Hazard Communication Standard, 29 CFR 1910.1200. Standard must be consulted for specific requirements.

#### U.S. Department of Labor

Occupational Safety and Health Administration (Non-Mandatory Form)

Form Approved
OMB No. 1218-0072



Note: Blank spaces are not permitted. If any item is not applicable, or no IDENTITY (As Used on Label and List) information is available, the space must be marked to indicate that. Cramolin R-5 Spray Section I Emergency Telephone Number 619-743-7143 Manufacturer's Name Dupont FREON & Dyme1: 1-800-441-3637 Caig Laboratories, Inc. Telephone Number for Information Address (Number, Street, City, State, and ZIP Code) 1175-0 Industrial Ave. 619-743-7143 Date Prepared CA 92025 Escondido. 7/11/89 Signature of Preparer (optional) Section II — Hazardous Ingredients/Identity Information Other Limits % (optional) **ACGIH TLV** Recommended Hazardous Components (Specific Chemical Identity; Common Name(s)) **OSHA PEL** 1.000PPM None 75.0% 1.000PPM Trichlorotrifluoroethane FREON TF 20.0% Not Est. None Not Est. Dyme1 152 Difluoroethane 5.0% Not Est. Not Est. Not Est. R100L CRamolin Red Fluid Section III — Physical/Chemical Characteristics Specific Gravity (H2O = 1) Boiling Point OF FREON TF @77°F Approx. 1.57g/cc 117.6°F Meiting Point Vapor Pressure (mm Hg.)
OF FREON TF @ 77°F N/A 334 **Evaporation Rate** Vapor Density (AIR = 1) 0.1 6.5 (Butyl Acetale = 1) OF FREON TF Solubility in Water FREON TF & OIL MIXTURE less than 0.2% by weight Appearance and Odor Light pink color of mixture. Red color of oil residue after solvent has evaporated. Slight ethereal odor. Section IV — Fire and Explosion Hazard Data UEL I FI Flammable Limits Flash Point (Method Used) Mixture non-flamable Not Established Cramolin oil residue 170°C (A. Pensky). Extinguishing Media If Cramolin oil residue ignites-use foam CO, or Halon and breathing equipment. Special Fire Fighting Procedures Use self contained breathing apparatus if open flame or glowing metal is present due to possible hazardous decomposition into hydrochloric and hydrofluoric acids and possible carbonyl halides Unusual Fire and Explosion Hazards

| Section V —                                | Reactivity Data          | ) .      |  |
|--|--------------------------|----------|--|
| Stability                                  | Unstable                 | T        | Conditions to Avoid  |
|  | Stable                   | X        | AVOID OPEN FLAMES AND HIGH TEMPERATURES  |
| Incompatibility (                          | Materials to Avoid)      | 1        |  |
| Uses Passe                                 | manation of Ethanodi     | wie Ti   | tals-powdered A1, Zn. Be, etc. is compound can be decomposed by high temperatures (open flames and   |
| elowing met<br>Hazardous<br>Polymerization | tal ) forming            | e Hyc    | rochloric and Hydrofluoric acids and possible carbonyl helides.  Conditions to Avoid   |
|  |                          |          | · ·  |
|  | Will Not Occur           | XX       | conditions to avoid-SEE ABOVE.   |
| Section VI -                               | - Health Hazard          | Data     |  |
| Route(s) of Entry                          | : Inh                    | alation? | FOR INFORMATION IN THIS SECTION Ingestion?   |
|  |                          |          | PLEASE REFER TO ATTACHED SHEET   |
|  |                          |          | MARKED   |
|  |                          |          | "HEALTH HAZARDS AND FIRST AID"   |
| Carcinogenicity:                           | пи                       |          | IARC Monographs? OSHA Regulated?   |
|  |                          | 1        | O NO NO  |
| Signs and Symn                             | toms of Exposure         |          |  |
| Signs and Symp                             | TOTAL OF EXPOSURE        |          | SEE ATTACHED   |
|  |                          |          |  |
| Medical Condition Generally Aggra-         | ons<br>vated by Exposure |          | SEE ATTACHED   |
|  |                          |          |  |
| Emergency and                              | First Aid Procedure:     | 3        | SEE ATTACHED   |
|  |                          |          | OIII TITTOTIA  |
| Coellan VII                                | Dransitions              | for Si   | fe Handling and Use  |
| Oleve to De Tel                            | en in Cons Malaria       | le Del   | nead or Shillad  |
| <u>Ventilate</u>                           | <u>area till od</u>      | or i     | gone. Use self contained breathing apparatus for necessary   |
| prolonged                                  | exposure. Af             | ter      | REONS have been removed by ventilation, clean up oily residue  |
| with any s                                 | standard soap            | or       | letergent solution.  |
| Waste Disposal                             | Method<br>h Federal. S   | State    | and local laws and regulations.  |
|  |                          |          | 01 & FOO2 may apply.   |
| = :: :: :: ::                              | n talan bullandin        |          | Residents  |
| Do not exp                                 | ose any aero             | sol      | can to sunlight or high temperature ( above120°F) to prevent osol cautions apply-use in ventilated area.   |
|  |                          |          |  |
| Other Precaution As with an                | ny chemical p            | repa     | ration, use only as directed and wash hands after use.   |
|  |                          |          | the state of the s |
| Section VIII                               | — Control Me             | asure    | the state of the s |
| Respiratory Pro                            | stection (Specify Type   | 9)       | in an unventilated area or in high concentrations.   |
|  | Local Exhaust            |          | Species  |
| Ventilation<br>KEEP<br>WINDOWS             | When used                |          | atedly in quantity Collection Collection   |
| OPEN                                       | To prevent               | t bui    | ldup in low areas  |
| Protective Glov                            |                          |          | Eye Protection Suggested when using any aerosol  |
|  |                          |          | ary with adequate ventilation  |
| Work/Hyglenic                              | Practices                | cess     | contact with skin or eyes. Use adequate ventilation.   |
| Avoid brea                                 | athing vapors            | s and    | contact with skill of eyes. ose adequate territorial   |

## HEALTH HAZARD INFORMATION

# Principal Health Hazards:

Inhalation - Vapor is heavier than air and can cause suffocation by reducing oxygen available for breathing. Breathing high concentration of vapor may cause light-headedness, giddiness, shortness of breath, and may lead to narcosis, cardiac irregularities, unconsciousness or death. LC50 Rat 300,000 ppm/2 hr.

In screening tests with experimental animals, exposure to Dymel® or Freon TF at approximately 50,000 ppm (v/v) and above, followed by a large intravenous epinephrine challenge, has induced serious cardiac irregularities.

In case of contact, immediately flush eyes with plenty of water for at least 15 minutes. Call a physician.

Skin: Flush with water. Get medical attention if irritation is present.

Oral: No specific intervention is indicated as the compound is not likely to be hazardous by ingestion. However, consult a physician if necessary. Do not induce vomiting as the hazard of aspirating the material into the lungs is a greater hazard than allowing it to progress through the intestinal tract.

# Medical Conditions Possibly Aggravated by Exposure:

Cardiovascular Disease: See Principal Hazards: Inhalation Section.

## First Aid:

If not breathing, give Inhalation: Remove to fresh air, call a physician. artificial respiration, preferably mouth-to-mouth. If breathing is difficult, give oxygen. Do not give epinephrine or similar drugs.

Because of a possible increased risk of eliciting cardiac dysrythmias, catecholamine drugs, such as epinephrine, should be Note to Physicians:

considered only as a last resort in life threatening

emergencies.