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化学品安全技术说明书

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MSDS标题

KONICA ECOJET HQA-P3H (GENERATION NO.1) MSDS报告

产品标题

硫铵;硫氨

CAS号

7783-20-2

化学品及企业标识

PRODUCT NAME

KONICA ECOJET HQA-P3H (GENERATION NO.1)

NFPA

Flammability	1
Toxicity	2
Body Contact	2
Reactivity	1
Chronic	2

SCALE: Min/Nil=0 Low=1 Moderate=2 High=3 Extreme=4

PRODUCT USE

Used according to manufacturer's directions.

CANADIAN WHMIS SYMBOLS

EMERGENCY OVERVIEW

RISK

Contact with acids liberates toxic gas. Irritating to eyes, respiratory system and skin. Harmful to aquatic organisms.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be damaging to the health of the individual. Large doses of ammonia or injected ammonium salts may produce diarrhea and may be sufficiently absorbed to produce increased production of urine and systemic poisoning. Symptoms include weakening of facial muscle, tremor, anxiety, reduced muscle and limb control.

EYE

This material can cause eye irritation and damage in some persons.

SKIN

This material can cause inflammation of the skin oncontact in some persons. The material is not thought to produce adverse health effects or skin irritation following contact (as classified using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

INHALED

If inhaled, this material can irritate the throat andlungs of some persons. The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified using animal models). Nevertheless, adverse effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.

CHRONIC HEALTH EFFECTS

There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment. evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. There is some evidence that inhaling this product is more likely to cause a sensitization reaction in some persons compared to the general population. There is limited evidence that, skin contact with this product is more likely to cause a sensitization reaction in some persons compared to the general Long term exposure to high dust concentrations may cause changes in lung function i.e. pneumoconiosis; caused by particles less than 0.5 micron penetrating and remaining in the lung. Prime symptom is breathlessness; lung shadows show on X-ray. Sulfites and bisulfites can cause narrowing of the airways, stomach upset, flushing, low blood pressure. tingling sensation, itchy wheal, swelling and shock, and asthmatics are especially prone. They induce allergic-like reactions which can occur on first contact with the material. Repeated exposure of animals to airborne sulfur dioxide (SO2) can produce a thickening of the mucous layer in the trachea and an increase in goblet cells and mucous glands similar to pathological changes found in chronic human bronchitis. Chronic exposure to sulfur dioxide (SO2) particulate complexes, present in polluted air, have been associated with the aggravation of chronic cardiovascular diseases such as asthma, chronic pulmonary disease, and coronary artery disease (this may occur at levels of 6-10 ug/m3 for 24 hours), An association exists between persistent cough and sputum production, particularly in women and nonsmokers. A 10-year follow study on workers exposed to a mean sulfur dioxide concentration of up to 33 ppm did not reveal an increased prevalence of chronic respiratory disease or decreased pulmonary function. studies of smelter workers, exposed to concentrations below 2 ppm, suggest that chronic respiratory disease may develop and that workers exposed at concentrations exceeding 1 ppm show accelerated loss of pulmonary function. Although SO2 is not a carcinogen, the apparent increases in mortalities amongst arsenic- exposed smelter workers was greater when exposures included both high arsenic concentrations and moderate to high SO2 exposures, suggesting that SO2 might act as a promoter. Intermittent exposure of rats to benz[a]pyrene along with inhalation of SO2 at 4-10 ppm, 1-6 hours per day, 5 days per week, produced substantial increases in respiratory tract squamous cell carcinomas compared to that associated with exposure to B[a]P or SO2 alone.