MSDS 说明书



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化学品安全技术说明书

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MSDS标题

KESTER 817 STAINLESS STEEL SOLDERING FLUX MSDS报告

产品标题

无水氯化锌

CAS号

7646-85-7

化学品及企业标识

PRODUCT NAME

KESTER 817 STAINLESS STEEL SOLDERING FLUX

NFPA

| Flammability | 0 |
|--|---|
| Toxicity | 2 |
| Body Contact | 3 |
| Reactivity | 1 |
| Chronic | 2 |
| SCALE: Min/Nil=0 Low=1 Moderate=2 High=3 Extreme=4 | |

PRODUCT USE

Flux for soldering stainless steel.

SYNONYMS

"Stainless steel soldering flux"

CANADIAN WHMIS SYMBOLS

EMERGENCY OVERVIEW

RISK

Causes burns. Risk of serious damage to eyes. Harmful by inhalation and if swallowed. Very toxic to aquatic organisms, may cause long- term adverse effects in the aquatic environment.

POTENTIAL HEALTH EFFECTS

ACUTE HEALTH EFFECTS

SWALLOWED

Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion. Ingestion of acidic corrosives may produce burns around and in the mouth. the throat and esophagus. Immediate pain and difficulties in swallowing and speaking may also be evident. Swelling of the epiglottis may make it difficult to breathe which may result in suffocation. More severe exposure may result in vomiting blood and thick mucus, shock, abnormally low blood pressure, fluctuating pulse, shallow respiration and clammy skin, inflammation of stomach wall, and rupture of esophageal tissue. Untreated shock may eventually result in kidney failure. Severe cases may result in perforation of the stomach and abdominal cavity with consequent infection, rigidity and fever. There may be severe narrowing of the esophageal or pyloric sphincters; this may occur immediately or after a delay of weeks to years. There may be coma and convulsions, followed by death due to infection of the abdominal cavity, kidneys or lungs.

EYE

The material can produce chemical burns to the eye following direct contact. Vapors or mists may be extremely irritating. If applied to the eyes, this material causes severe eye damage. Direct eye contact with acid corrosives may produce pain, tears, sensitivity to light and burns. Mild burns of the epithelia generally recover rapidly and completely. Severe burns produce long-lasting and possibly irreversible damage. The appearance of the burn may not be apparent for several weeks after the initial contact. The cornea may ultimately become deeply opaque resulting in blindness. The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

SKIN

The material can produce chemical burns following direct contactwith the skin. There is some evidence to suggest that this material, on a single contact with skin, can cause irreversible damage of organs. Skin contact with acidic corrosives may result in pain and burns; these may be deep with distinct edges and may heal slowly with the formation of scar tissue. 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. Inhalation of vapors or aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful. There is some evidence to suggest that this material can cause, if inhaled once, irreversible damage of organs. Corrosive acids can cause irritation of the respiratory tract, with coughing, choking and mucous membrane damage. There may be dizziness, headache, nausea and weakness. Swelling of the lungs can occur, either immediately or after a delay; symptoms of this include chest tightness, shortness of breath, frothy phlegm and cyanosis. Lack of oxygen can cause death hours after onset.

CHRONIC HEALTH EFFECTS

Repeated or prolonged exposure to acids may result in the erosion of teeth, swelling and or ulceration of mouth lining. Irritation of airways to lung, with cough, and inflammation of lung tissue often occurs. Chronic exposure may inflame the skin or conjunctiva. Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating

substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production. There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment.