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化学品安全技术说明书

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MSDS标题

JOHNSON MATTHEY KATALCO 83-3, 83-3M, 83-3L, 83-3T, 83-6 MSDS报告

产品标题

丝状氧化铜;线状氧化铜;纳米氧化铜

CAS号

1317-38-0

化学品及企业标识

PRODUCT NAME

JOHNSON MATTHEY KATALCO 83-3, 83-3M, 83-3L, 83-3T, 83-6

NFPA

Flammability	0
Toxicity	2
Body Contact	2
Reactivity	0
Chronic	2

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

PRODUCT USE

Low temperature shift conversion catalyst.

SYNONYMS

Synetix, Low, temperature, shift, conversion, catalyst, aluminium, zinc, "copper (II)", oxide

CANADIAN WHMIS SYMBOLS

EMERGENCY OVERVIEW

RISK

Harmful: danger of serious damage to health by prolonged exposure through inhalation.

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 damaging to the health of the individual. A metallic taste, nausea, vomiting and burning feeling in the upper stomach region occur after ingestion of copper and its derivatives. The vomitus is usually green/blue and discolors contaminated skin. Acute poisonings from ingestion are rare due to their prompt removal by vomiting. Should vomiting not occur, or is delayed systemic poisoning may occur producing kidney and liver damage, wide-spread capillary damage, and be fatal; death may occur after relapse from an apparent recovery. Anemia may occur in acute poisoning.

FYF

Limited evidence or practical experience suggests, that the material may cause eye irritation in a substantial number of individuals. Prolonged eye contact may cause inflammation characterized by a temporary redness of the conjunctiva (similar to windburn). Copper salts, in contact with the eye, may produce conjunctivitis or even ulceration and turbidity of the cornea.

SKIN

There is some evidence to suggest that the material may cause mild but significant inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterized by redness, swelling and blistering. Skin contact is not thought to have harmful health effects, however the material may still produce health damage following entry through wounds, lesions or abrasions.

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. Exposure to copper, by skin, has come from its use in pigments, ointments, ornaments, jewellery, dental amalgams and IUDs and as an antifungal agent and an algicide. Although copper algicides are used in the treatment of water in swimming pools and reservoirs, there are no reports of toxicity from these applications. Reports of allergic contact dermatitis following contact with copper and its salts have appeared in the literature, however the exposure concentrations leading to any effect have been poorly characterised. In one study, patch testing of 1190 eczema patients found that only 13 (1.1%) cross- reacted with 2% copper sulfate in petrolatum. The investigators warned, however, that the possibility of contamination with nickel (an established contact allergen) might have been the cause of the reaction. Copper salts often produce an itching eczema in contact with skin. This is, likely, of a non-allergic nature.

INHALED

Inhalation may produce health damage*. Inhalation of vapors or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual. evidence to suggest that the material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung Copper poisoning following exposure to copper dusts and fume may result in headache, cold sweat and weak pulse. Capillary, kidney, liver and brain damage are the longer term manifestations of such poisoning. Inhalation of freshly formed metal oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in "metal fume fever". Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure. Inhalation of freshly formed zinc oxide particles sized below 1.5 microns and generally between 0.02 to 0.05 microns may result in "metal fume fever", with symptoms resembling influenza. Symptoms may be delayed for up to 12 hours and begin with the sudden onset of thirst, and a sweet, metallic or foul taste in the mouth. Other symptoms include upper respiratory tract irritation accompanied by coughing and a dryness of the mucous membranes, lassitude and a generalised feeling of malaise. Mild to severe headache, nausea, occasional vomiting, fever or chills, exaggerated mental activity, profuse sweating, diarrhoea, excessive urination and prostration may also occur. Tolerance to the fumes develops rapidly, but is quickly lost. All symptoms usually subside within 24-36 hours following removal from exposure. Leucocytosis, a transient increase in white blood cell counts, is reported as a common finding in metal fume fever but is not known to be common amongst welders. Severe over-exposure to zinc oxide, following

inhalation of fumes or finely divided dusts may result in bronchitis or pneumonia; a bluish skin tint may be present.

CHRONIC HEALTH EFFECTS

Harmful: danger of serious damage to health by prolonged exposure through inhalation. This material can cause serious damage if one is exposed to it for long periods. It can be assumed that it contains a substance which can produce severe defects. This has been demonstrated via both short- and longterm experimentation. Copper has fairly low toxicity. Some rare hereditary conditions (Wilson disease or hepatolenticular degeneration) can lead to accumulation of copper on exposure, causing irreversible damage to a variety of organs (liver, kidney, CNS, bone, vision) and lead to death. There may be anemia and cirrhosis of the liver. Exposure to large doses of Aluminum has been connected with the degenerative brain disease Alzheimer's Disease. Repeated exposures, in an occupational setting, to high levels of finedivided dusts may produce a condition known as pneumoconiosis which is the lodgement of any inhaled dusts in the lung irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50,000 inch), are present. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion, increased chest expansion, weakness and weight loss. As the disease progresses the cough produces a stringy mucous, vital capacity decreases further and shortness of breath becomes more severe. Pneumoconiosis is the accumulation of dusts in the lungs and the tissue reaction in its presence. It is further classified as being of noncollagenous or collagenous types. Noncollagenous pneumoconiosis, the benign form, is identified by minimal stromal reaction, consists mainly of reticulin fibres, an intact alveolar architecture and is potentially reversible.