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化学品安全技术说明书

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MSDS标题

NALIDIXIC ACID MSDS报告

产品标题

萘啶酸;1-乙基-7-甲基-4-酮-1,8-萘啶-3-羧酸

CAS号

389-08-2

化学品及企业标识

PRODUCT NAME

NALIDIXIC ACID

NFPA

Flammability	1
Toxicity	2
Body Contact	3
Reactivity	0
Chronic	2

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

PRODUCT USE

Bactericide used in the treatment of urinary- tract infections due to Gram- negative micro- organisms (other than Pseudomonas spp.). Antibacterial activity does not appear to be influenced by urinary pH. Has also been used in the treatment of bacterial dysentary.

SYNONYMS

C12-H12-N2-O3, "1, 8-naphthyridine-3-carboxylic acid, 1-ethyl-1, 4-dihydro-7-methyl-4-oxo", "1, 8-naphthyridine-3-carboxylic acid, 1-ethyl-1, 4-dihydro-7-methyl-4-oxo", "3-carboxy-1-ethyl-7-methyl-1, 8-naphthyridin-4-one", "3-carboxy-1-ethyl-7-methyl-1, 8-naphthyridin-4-one", "3-carboxy-1-ethyl-7-methyl-1, 8-naphthidin-4-one", "1, 4-dihydro-1-ethyl-7-methyl-4-oxo-1, 8-naphthyridine-3-carboxylic acid", "1, 4-dihydro-1-ethyl-7-methyl-4-oxo-1, 8-naphthyridine-3-carboxylic acid", "1-ethyl-7-methyl-1, 8-naphthyridin-4-one-3-carboxylic acid", "1-ethyl-7-methyl-1, 8-naphthyridin-4-one-3-carboxylic acid", "nalidixan, nalidixin, "nalidixinic acid", Chinoin, Cybis, Eucisten, Innoxalan, Kusnarin, Nalidicron, Nalitucsan, nalix, Nalurin, Narigix, Neggram, Negram, Nevigramon, Nicelate, Nogram, NSC-82174, Poleon, Specifen, Uralgin, Uriben, Uriclar, Urisal, Urodixin, Uroman, Uroneg, Uropan, "Win 18320", Wintomylan, bactericide, "Gram-negative urinary tract antibacterial/antibiotic"

CANADIAN WHMIS SYMBOLS

EMERGENCY OVERVIEW

RISK

Harmful if swallowed.

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.

EYE

Although the material is not thought to be an irritant, direct contact with the eye may produce transient discomfort characterized by tearing or conjunctival redness (as with windburn). The dust may produce eye discomfort causing smarting, pain and redness. Phototoxic agents such as sulfonamides can cause inflammation of the conjunctiva and cornea, and clouding.

SKIN

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.

Sensitization may result in allergic dermatitis responses includingrash, itching, hives or swelling of extremities. Exposure to this product can cause sensitization of skin under sunlight. The product can reach the skin via the bloodstream either if swallowed or ingested. Swelling and redness are common; blistering may also occur. The skin may become warm and itchy. There may also be discoloration. Phototoxicity is a non-allergic condition and severity depends on the concentration of the offending chemical and the amount of radiation of particular wavelengths, usually in the UV spectrum. Inflammation develops on uncovered areas such as the hands and face; covered areas are usually spared. This is usually more like sunburn than an eczema. Coal tar products often cause phototoxic reactions. Phototoxic compounds may show their nature either by generating free radicals or reacting directly with target molecules under UV light.

INHALED

The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled.

CHRONIC HEALTH EFFECTS

Principal routes of exposure are by accidental skin and eye contact andinhalation of generated dusts. Exposure to small quantities may induce hypersensitivity reactions characterized by acute bronchospasm, hives (urticaria), deep dermal wheals (angioneurotic edema), running nose (rhinitis) and blurred vision. Anaphylactic shock and skin rash (non-thrombocytopenic purpura) may occur. An individual may be predisposed to such anti-body mediated reaction if other chemical agents have caused prior sensitization (cross-sensitivity).