

化 学 品 安 全 技 术 说 明 书

填表时间 2019-12-27

打印时间 2026-03-31

**MSDS标题**

OCTAETHYL-21H,23H-PORPHINE COPPER(II) MSDS报告

**产品标题**

237812131718-八乙基-21H23H-卟啉钴;6-氯-2-甲基(硫苯并二氢吡喃-4-酮)-1, 1-二氧化物

**CAS号**

17632-19-8

**化学品及企业标识**

**PRODUCT NAME**

OCTAETHYL-21H,23H-PORPHINE COPPER(II)

**NFPA**

Flammability	1
Toxicity	2
Body Contact	2
Reactivity	0
Chronic	2

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

**PRODUCT USE**

Reagent.

## **SYNONYMS**

C36-H44-Cu-N4, "2, 3, 7, 8, 12, 13, 17, 18-octaethyl-21H, 23H-porphine copper (II)", "2, 3, 7, 8, 12, 13, 17, 18-octaethyl-21H, 23H-porphine copper (II)", "2, 3, 7, 8, 12, 13, 17, 18-octaethyl-21H, 23H-porphine copper (II)", "2, 3, 7, 8, 12, 13, 17, 18-octaethyl-21H, 23H-porphine copper (II)"

## **CANADIAN WHMIS SYMBOLS**

## **EMERGENCY OVERVIEW**

## **RISK**

## **POTENTIAL HEALTH EFFECTS**

## **ACUTE HEALTH EFFECTS**

## **SWALLOWED**

Although ingestion is not thought to produce harmful effects, the material may still be damaging to the health of the individual following ingestion, especially where pre-existing organ (e.g. liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality (death) rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern. Considered an unlikely route of entry in commercial/industrial environments. 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.

## **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). Copper salts, in contact with the eye, may produce conjunctivitis or even ulceration and turbidity of the cornea.

## **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.

## **INHALED**

Inhalation may produce health damage\*. The material is not thought to produce respiratory irritation (as classified using animal models). Nevertheless inhalation of the material, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress. 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. 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.

## **CHRONIC HEALTH EFFECTS**

Principal routes of exposure are usually by skin contact/absorption and inhalation of generated dust. 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.