SAFETY DATA SHEET

Effective Date: 29 January 2025	Revision: New.2	ARC	Language: EN

1. IDENTIFICATION OF THE SUBSTANCE OR MIXTURE AND OF THE SUPPLIER	
1.1. GHS product identifier.	SG8
Other means of identification.	Sterilizing Gas 8 (8.5% Ethylene Oxide / 91.5% Carbon Dioxide)
1.2. Recommended use and restrictions on use.	Recommended: In contract sterilization facilities, including facilities treating medical equipment and supplies, library/museum artifacts, cosmetics, and spices. Advised Against: All other uses.
1.3. Supplier's details.	Name: ARC Specialty Products c/o Balchem Corporation Address: 5 Paragon Drive Suite 201 Montvale, NJ 07645 USA Phone number: +1 845-326-5611 Fax number: +1 845-326-5706 (ARC Cust Serv) Internet: www.arcspecialtyproducts.com Email: sds@balchem.com
1.4. Emergency phone number.	EMERGENCY TELEPHONE (24 hrs. / 7 days per week) In US: CHEMTREC (800) 424-9300 Outside US & Canada: CHEMTREC (703) 527-3887 **CCN#1625**

2. HAZARDS IDENTIFICATION	
2.1. GHS classification of the substance or mixture and any national or regional information.	Acute Toxicity (Inhalation) Category 4, Germ cell mutagenicity Category 1B, Carcinogenicity Category 1B, Gas under Pressure (Compressed gas), Skin Corrosion/Irritation Category 2, Eye Irritation Category 2A

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2.2. GHS label elements, including precautionary statements.	Product Label Name: Sterilizing Gas 8 Signal Word: DANGER  **Hazard statement:** H280: Contains gas under pressure; may explode if heated H315: Causes skin irritation H319: Causes serious eye irritation H332: Harmful if inhaled H340: May cause genetic defects H350: May cause cancer **Precautionary statement:** P201: Obtain special instructions before use. P261: Avoid breathing gas/vapours. P271: Use only outdoors or in a well-ventilated area. P281: Use personal protective equipment as required P362: Take off contaminated clothing and wash before reuse. P312: Call a POISON CENTER or doctor/physician if you feel unwell. P305+P351+P338: IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. P308+P313: IF exposed or concerned: Get medical advice/attention. P405: Store locked up. P410+P403: Protect from sunlight. Store in a well-ventilated place. P501: Dispose of contents/container in accordance with local/regional/national/ international regulation.
2.3. Other hazards, which do not result in classification or are not covered by the GHS.	Asphyxiant in high concentrations

3. COMPOSITION/INFORMATION ON INGREDIENTS	
3.1. **Substance:**	
Chemical identity.	Ethylene oxide and carbon dioxide mixtures with 8.5 percent ethylene oxide
Common name, synonyms, etc.	Ethylene Oxide: Oxirane, EO, EtO, Dihydroxirene, 1-2 Epoxyethane, Dimethylene Oxide, Oxane, Oxirane, Alpha/Beta-Oxidoethane, Oxacyclopropane
CAS number, EC number, etc.	See section 3.2
Impurities and stabilizing additives which are themselves classified and which contribute to	Contains no other components or impurities, which will influence the classification of the product.

the classification of the substance.			
3.2. **Mixture:**			
The chemical identity and concentration or concentration ranges of all ingredients which are hazardous within the meaning of the GHS and are present above their cutoff levels.	**Chemical Identity:**	**Concentration:**	**CAS No.:**
	Ethylene Oxide	8.5 %	75-21-8
	Carbon Dioxide	91.5 %	124-38-9

4. FIRST AID MEASURES	
4.1. Description of first aid measures.	EYE CONTACT: If product comes in contact with eyes remove the patient from gas source or contaminated area. Take the patient to the nearest eye wash, shower or other source of clean water. Open the eyelid(s) wide to allow the material to evaporate. Gently rinse the affected eye(s) with clean, cool water for at least 15 minutes. Have the patient lie or sit down and tilt the head back. Hold the eyelid(s) open and pour water slowly over the eyeball(s) at the inner corners, letting the water run out of the outer corners. The patient may be in great pain and wish to keep the eyes closed. It is important that the material is rinsed from the eyes to prevent further damage. Ensure that the patient looks up, and side to side as the eye is rinsed in order to better reach all parts of the eye(s) Transport to hospital or doctor. Even when no pain persists and vision is good, a doctor should examine the eye as delayed damage may occur. If the patient cannot tolerate light, protect the eyes with a clean, loosely tied bandage. Ensure verbal communication and physical contact with the patient. DO NOT allow the patient to rub the eyes DO NOT allow the patient to tightly shut the eyes DO NOT introduce oil or ointment into the eye(s) without medical advice DO NOT use hot or tepid water. SKIN CONTACT: If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation. INHALATION: Following exposure to gas, remove the patient from the gas source or contaminated area. NOTE: Personal Protective Equipment (PPE), including positive pressure self-contained breathing apparatus may be required to assure the safety of the rescuer. Prostheses such as false teeth, which may block the airway, should be removed, where possible, prior to initiating first aid procedures. If the patient is not breathing spontaneously, administer rescue breathing. If the patient does not have a pulse, administer CPR. If medical oxygen and appropriately trained personnel are available, administer 100% oxygen. Summon an emergency ambulance. If an ambulance is not available, contact a physician, hospital, or Poison Control Centre for further instruction. Keep the patient warm, comfortable and at rest while awaiting medical care. MONITOR THE BREATHING AND PULSE, CONTINUOUSLY. Administer rescue breathing (preferably with a demand-

	valve resuscitator, bag-valve mask-device, or pocket mask as trained) or CPR if necessary. INGESTION: Not considered a normal route of entry.
4.2. Most important symptoms/effects.	SIGNS AND SYMPTOMS OF OVEREXPOSURE: Effects include skin, eye and respiratory tract irritation or burns. Central nervous system effects initially cause headache, dizziness and nausea and in extreme cases, unconsciousness and death. Peripheral nerve damage may result in muscular weakness, giddiness, irrational behavior and loss of sensation in the extremities. Dulling of the sense of smell may occur.
4.3. Indication of immediate medical attention and special treatment needed, if necessary.	Indication of any immediate medical attention and special treatment needed For acute or short term repeated exposures to ethylene glycol: Early treatment of ingestion is important. Ensure emesis is satisfactory. Test and correct for metabolic acidosis and hypocalcaemia. Apply sustained diuresis when possible with hypertonic mannitol. Evaluate renal status and begin haemodialysis if indicated. [I.L.O] Rapid absorption is an indication that emesis or lavage is effective only in the first few hours. Cathartics and charcoal are generally not effective. Correct acidosis, fluid/electrolyte balance and respiratory depression in the usual manner. Systemic acidosis (below 7.2) can be treated with intravenous sodium bicarbonate solution. Ethanol therapy prolongs the half-life of ethylene glycol and reduces the formation of toxic metabolites. Pyridoxine and thiamine are cofactors for ethylene glycol metabolism and should be given (50 to 100 mg respectively) intramuscularly, four times per day for 2 days. Magnesium is also a cofactor and should be replenished. The status of 4-methylpyrazole, in the treatment regime, is still uncertain. For clearance of the material and its metabolites, haemodialysis is much superior to peritoneal dialysis. [Ellenhorn and Barceloux: Medical Toxicology] It has been suggested that there is a need for establishing a new biological exposure limit before a workshift that is clearly below 100 mmol ethoxy-acetic acids per mole creatinine in morning urine of people occupationally exposed to ethylene glycol ethers. This arises from the finding that an increase in urinary stones may be associated with such exposures. Laitinen J., et al: Occupational & Environmental Medicine 1996; 53, 595-600. For frost-bite caused by liquefied petroleum gas: If part has not thawed, place in warm water bath (41-46 C) for 15-20 minutes, until the skin turns pink or red. Analgesia may be necessary while thawing. If there has been a massive exposure, the general body temperature must be depressed, and the patient must be immediately rewarmed by whole-body immersion, in a bath at the above temperature. Shock may occur during rewarming. Administer tetanus toxoid booster after hospitalization. Prophylactic antibiotics may

	be useful. The patient may require anticoagulants and oxygen. BASIC TREATMENT: Establish a patent airway with suction where necessary. Watch for signs of respiratory insufficiency and assist ventilation as necessary. Administer oxygen by non-rebreather mask at 10 to 15 l/min. Monitor and treat, where necessary, for pulmonary oedema. Monitor and treat, where necessary, for shock. Anticipate seizures. ADVANCED TREATMENT: Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred. Positive-pressure ventilation using a bag-valve mask might be of use. Monitor and treat, where necessary, for arrhythmias. Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications. Drug therapy should be considered for pulmonary oedema. Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications. Treat seizures with diazepam. Proparacaine hydrochloride should be used to assist eye irrigation.

5. FIREFIGHTING MEASURES	
5.1. Suitable (and unsuitable) extinguishing media.	EXTINGUISHING MEDIA: SMALL FIRE: Use extinguishing agent suitable for type of surrounding fire. LARGE FIRE: Cool cylinder. DO NOT direct water at source of leak or venting safety devices as icing may occur.
5.2. Specific hazards arising from the chemical.	FIRE INCOMPATIBILITY: None known.
5.3. Special protective equipment and precautions for firefighters.	FIRE FIGHTING: Wear breathing apparatus and protective gloves. Fight fire from a safe distance, with adequate cover. Use water delivered as a fine spray to control fire and cool adjacent area. FIRE/EXPLOSION HAZARD: Containers may explode when heated - Ruptured cylinders may rocket Fire exposed containers may vent contents through pressure relief devices. High concentrations of gas may cause asphyxiation without warning. May decompose explosively when heated or involved in fire. Contact with gas may cause burns, severe injury and/ or frostbite. Decomposition may produce toxic fumes of:

6. ACCIDENTAL RELEASE MEASURES	
6.1. Personal precautions, protective equipment and emergency procedures.	PRECAUTIONS: Treat any ethylene oxide leak as an emergency. All cleanup personnel must wear full protective equipment. Evacuate all personnel from the area except those directly engaged in stopping the leak or in cleaning up.
6.2. Environmental precautions.	ENVIRONMENTAL: Dike runoff water, if possible, to

	prevent contaminated water from entering sewers, ditches, streams and ponds. It is mandatory to call the National Response Center (800-424-8802) if 10 pounds (4.54 kg) ethylene oxide or more is spilled or released to the environment (118 pounds / 53.52 kg of SG8 contains 10 pounds of ethylene oxide).
6.3. Methods and materials for containment and cleaning up.	SPILL CLEANUP: Eliminate all ignition sources if this can be done safely. Ethylene oxide/air mixtures ignite readily and may detonate. Use water fog or spray to disperse vapors. Flood spill with water spray to dilute and render non-flammable.

7. HANDLING AND STORAGE	
7.1. Precautions for safe handling.	HANDLING AND STORAGE PRECAUTIONS: Wear all recommended protective clothing and devices when handling this material. Have established handling and emergency response procedures in place prior to use. Ground and bond shipping container, transfer line, and receiving container. Use non-sparking tools and equipment, including explosion proof ventilation. Empty containers retain product residues and can be dangerous. Do not pressurize, cut, weld, braze, solder, drill, grind or expose empty containers to heat, sparks or open flames. Protect containers from physical damage and regularly inspect them for cracks, leaks or faulty valves.
7.2. Conditions for safe storage, including any incompatibilities.	STORAGE SEGREGATION: Store ethylene oxide in a cool, dry, well-ventilated area away from incompatible chemicals and sources of ignition. Store cylinders and drums upright; secure containers tightly; do not drag or slide; and move in a carefully supervised manner with a suitable hand truck. **DO NOT STORE IN DIRECT SUNLIGHT**. SHIPPING AND STORAGE CONTAINERS: (See 49 CFR 173.304) SG8 is shipped and stored in DOT specification 3AA cylinders. Before returning container to supplier, ensure cylinder contents have been emptied down to atmospheric pressure or below (without allowing any air to enter the cylinder), close valves and replace cylinder cap. Check container valves and plugs for leaks prior to shipment. In addition, please refer to the most current edition of NFPA Publication 55, ‘ Compressed Gases and Cryogenic Fluids Code.’ INCOMPATIBILITIES: Ethylene oxide is very reactive. Runaway exothermic polymerization reactions can result from contamination with amines, ammonia, water, acids, bases, metal chlorides, metal oxides, metallic potassium, mercaptans, alcohols, oxidizers and many other organic and inorganic materials.

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8. EXPOSURE CONTROLS/PERSONAL PROTECTION

8.1. Control parameters.

Exposure Limits

SOURCE	TWA (8-hr)	STEL (15-min)	OTHER
OSHA	EO = 1 ppm CO2 = 5000 ppm	EO = 5 ppm (9 mg/m^3)	EO = 0.5 ppm action level (8-hr TWA)
ACGIH	EO = 1 ppm (1.8 mg/m^3) CO2 = 5000 ppm	No applicable information found	EO = 800 ppm IDLH

8.2. Appropriate engineering controls.

ENGINEERING CONTROLS: Ethylene oxide, a major fire hazard, can burn in the absence of oxygen. All electrical devices used in areas processing or handling ethylene oxide must be engineered and designed to the applicable local electrical/fire codes. Safeguards can include designing electrical devices as explosion-proof and/or intrinsically safe. When considering engineering controls, users of ethylene oxide should consult the current edition of NFPA 55 (Compressed Gases and Cryogenic Fluids Code, Section 14: Storage, Handling and Use of Ethylene Oxide for Sterilization and Fumigation). Sterilization facilities should consult NIOSH Publication NO. 2007-164 (Alert: Preventing Worker Injuries and Deaths from Explosions in Industrial Ethylene Oxide Sterilization Facilities).

VENTILATION: Install and operate general and local exhaust ventilation systems powerful enough to maintain airborne levels of ethylene oxide below the OSHA PEL in the worker's breathing area. Ventilation systems must be of maximum explosion-proof design. Emission controls must be in compliance with Federal, State and local regulations.

SAFETY SHOWERS: Have eyewash stations, emergency deluge showers, and washing facilities available in all work areas.

OTHER PROTECTION: Design all engineering systems to be explosion-proof in any area where this gas may be present. Container and system must be electrically grounded/bonded before unloading. Practice good personal hygiene; always wash thoroughly after using this material. Do not eat, drink or smoke in work area.

8.3. Individual protection measures, such as personal protective equipment.

RESPIRATORY PROTECTION: Refer to OSHA respirator regulations cited at 29 CFR 1910.134 and 29 CFR 1910.1047. Wear a NIOSH-approved full facepiece respirator for routine use situations where atmosphere is at or above OSHA's Action Level. Do not exceed the maximum use conditions of the respirator. For emergency or non-routine uses where concentrations are unknown, wear an SCBA with a full facepiece operated in the pressure-demand or positive pressure mode.

	EYE PROTECTION: Always wear chemical safety glasses. If splashing may occur, wear a full face shield as a supplementary protective measure over safety glasses. **NEVER WEAR CONTACT LENSES** when working with ethylene oxide. SKIN PROTECTION: Wear impervious gloves (see www.ethyleneoxide.com for permeation data); boots; aprons; head cover; and clean impervious body-covering clothing to prevent any possibility of skin contact. Launder contaminated clothing and discard contaminated leather shoes, belts, etc.

9. PHYSICAL AND CHEMICAL PROPERTIES	
9.1. Information on basic physical and chemical properties.	
Appearance (physical state, color, etc.).	Colorless liquid or gas
Corrosivity	Not corrosive
Odor.	Sweet ether-like
Odor threshold.	261 ppm – detectable and 500 to 700 ppm – recognizable for EO. CO_2 is odorless
pH.	7, neutral (100 g/L in water)
Melting point/freezing point.	-169 ºF (-112 ºC) for EO
Initial boiling point and boiling range.	50.7 ºF (10.4 ºC) for EO -109.3 ºF (-78.5 ºC) for CO_2
Flash point.	Tag Closed Cup: < 0 ºF (< -18 ºC) for EO
Evaporation rate.	100% volatile by volume
Flammability (solid, gas).	Flammable
Upper/lower flammability or explosive limits.	Upper flammable limit: 100% vol/vol for EO Lower flammable limit: 2.6% vol/vol for EO CO_2 is not flammable
Vapor pressure.	1095 mmHg @ 20 ºC for EO 838 psig @ 21.1 ºC for CO_2 324.2 psig @ 20 ºF for SG8 847.1 psig @ 90 ºF for SG8
Vapor density.	1.5 (Air = 1) for EO 1.833 @ 21.1 ºC for CO_2
Relative density.	0.875 at 20 ºC for EO 1.522 at 20 ºC for CO_2
Solubility (ies).	100% in water for EO
Partition coefficient: n-octanol/water.	-0.3 for EO
Autoignition temperature.	833 ºF (445 ºC); Burns in the absence of air for EO
Decomposition temperature.	~932 °F (~773 °K) for EO
Viscosity.	0.255 centipoise at 80 ºF for EO
Oxidizing properties.	Not an oxidizer

10. STABILITY AND REACTIVITY	
10.1. Reactivity.	Not reactive under normal conditions. Under abnormal conditions (for example external heating, contamination), thermal decomposition and runaway polymerization can occur and may lead to explosion.

10.2. Chemical stability.	STABILITY: Material is stable for extended periods in closed, airtight, pressurized containers at room temperature, under normal storage and handling conditions. Vapors may explode when exposed to common ignition sources. In the presence of catalysts, polymerization and decomposition of liquid may occur and is accelerated at temperatures above 800 ºF (426 ºC).
10.3. Possibility of hazardous reactions.	HAZARDOUS POLYMERIZATION: Dangerous exothermic polymerization reaction can occur when ethylene oxide is contaminated or when heated.
10.4. Conditions to avoid (e.g., static discharge, shock or vibration).	CONDITIONS TO AVOID: Avoid storage at warm temperatures. Do not store at 100 °F (38 ºC) or greater in order to prevent polymerization. Avoid storage at temperatures above 125 °F (52 ºC) under any circumstances. Avoid contact of ethylene oxide with incompatible chemicals to avoid highly exothermic polymerization reaction. Prevent exposure to all sources of ignition such as heat, flame, lighted tobacco products or electrical or mechanical sparks.
10.5. Incompatible materials.	See section 7.2
10.6. Hazardous decomposition products.	HAZARDOUS DECOMPOSITION PRODUCTS: Ethylene oxide undergoes thermal decomposition to form carbon dioxide and carbon monoxide gases.

11. TOXICOLOGICAL INFORMATION	
11.1. Information on the likely routes of exposure (inhalation, ingestion, skin and eye contact);	PRIMARY ROUTES OF EXPOSURE: Inhalation; eye contact; skin contact/absorption.
11.2. Symptoms related to the physical, chemical and toxicological characteristics;	**ACUTE HEALTH EFFECTS:** INHALATION: Inhaling concentrated vapor may cause serious health effects, possibly death. Inhalation may progressively cause mucous membrane and respiratory irritation, headache, vomiting, cyanosis, drowsiness, weakness, loss of coordination, CNS depression, lachrimation, nasal discharge and salivation, gasping, and labored breathing. Delayed effects may include nausea, diarrhea, and edema of the lungs, paralysis, convulsions and possibly death. NOTE: Ethylene oxide has a high odor threshold (> 250 ppm) and the sense of smell does not provide adequate protection against its toxic effects. EYE CONTACT: Liquid ethylene oxide is severely irritating and corrosive to the eyes and contact can cause swelling of the conjunctiva and irreversible corneal injury. Contact with liquid ethylene oxide can cause frostbite. Vapors may cause eye irritation, tearing, redness and swelling of the conjunctiva.

	SKIN CONTACT: Prolonged contact with liquid ethylene oxide can cause a local erythema, edema, and formation of blisters. Response is more severe on damp skin. There may be a latency period of several hours prior to the onset of symptoms. Ethylene oxide may be absorbed by the skin, and sustained contact may produce adverse effects such as headache, dizziness, nausea and vomiting. Ethylene oxide is a skin sensitizer and some individuals may suffer an allergic skin reaction. Skin contact may also cause allergic contact dermatitis in some exposed individuals. Liquid ethylene oxide evaporates rapidly and may chill the skin causing frostbite. INGESTION: This relatively unlikely route of exposure is expected to cause severe irritation and burns of the mouth and throat, abdominal pain, nausea, vomiting, collapse and coma. Aspiration may occur during swallowing or vomiting, resulting in lung damage.
11.3. Delayed and immediate effects and also chronic effects from short- and long-term exposure;	**CHRONIC HEALTH EFFECTS for 100% EO:** SKIN CONTACT: Long term effects are unknown but are expected to be similar to acute effects of skin exposure. EYE CONTACT: Some cases of cataract formation have been reported. INHALATION: Respiratory irritation, which can result in permanent lung injury, chromosomal aberrations and peripheral neurotoxic effects with a numbing of the sense of smell. Cognitive and CNS impairment may result from long term exposures. INGESTION: May cause anemia, gastrointestinal irritation, effects on liver, kidneys, and adrenal glands. CARCINOGENICITY: **OSHA** classifies ethylene oxide as a cancer/reproductive hazard and considers that, at excessive levels, ethylene oxide may present reproductive, mutagenic, genotoxic, neurologic and skin sensitization hazards. **ACGIH** classifies ethylene oxide as "A2" - suspected human carcinogen. **NTP** classifies ethylene oxide as a known human carcinogen. **IARC** classifies ethylene oxide in Group I (carcinogenic to humans). **NIOSH** classifies ethylene oxide as a potential human carcinogen.
11.4. Numerical measures of toxicity (such as acute toxicity estimates).	TOXICOLOGICAL - ACUTE INHALATION FOR 100% EO: LC_{50} (1 hr. exposure) 5748 ppm (male rat) 4439 ppm (female rat)

	5029 ppm (rat - combined sexes) Various mammalian species exposed to lethal concentrations of ethylene oxide had symptoms of mucous membrane irritation, central nervous system depression, lacrimation, nasal discharge, salivation, nausea, vomiting, diarrhea, respiratory irritation, loss of coordination and convulsions. TOXICOLOGICAL - CHRONIC INHALATION FOR 100% EO: Symptoms of chronic exposure are similar to those observed in acute studies, including lung, kidney and liver damage and testicular tubule degeneration in some species. Studies demonstrated neuromuscular effects as the most sensitive indicator of ethylene oxide overexposure. TOXICOLOGICAL - ACUTE DERMAL FOR 100% EO: No dermal LD_{50} information is available on this product. It is expected to be corrosive to rabbit skin. TOXICOLOGICAL - CHRONIC DERMAL: No chronic dermal toxicity data are available on this product. TOXICOLOGICAL - EYE FOR 100% EO: No eye irritation animal data are available on this product; however, it is expected to be extremely irritating to rabbit eyes. TOXICOLOGICAL - ACUTE INGESTION FOR 100% EO: The acute oral LD_{50} for this product is: 330 mg/kg, rat. TOXICOLOGICAL - CHRONIC INGESTION: The effects of chronic ingestion of this product are unknown. CARCINOGENICITY: A recent assessment of available epidemiology studies related to ethylene oxide concluded that the evidence indicates that ethylene oxide does not cause heart disease, an excess of cancers overall, or brain, stomach or pancreatic cancers which were seen in some animal and isolated human studies. The findings with respect to leukemia and non-Hodgkin's lymphoma are less definitive. While the majority of the evidence does not indicate that ethylene oxide causes these cancers, there are some suggestive trends. A longer follow-up of ethylene oxide was completed in 2004 to better clarify these relationships. NIOSH reported no overall elevated risk for any type of cancer or other diseases as compared to the general population, however, among those workers with very high ethylene oxide exposure (combination of exposure level and years worked); there was evidence of an elevated risk for blood cancers among men and breast cancer among women. Two inhalation studies with rats demonstrated carcinogenic responses consisting of increased

	incidences of mononuclear cell leukemia, peritoneal mesotheliomas, and primary brain tumors. In 2-year inhalation studies with mice there was evidence of carcinogenic activity as indicated by dose-related incidences of benign or malignant neoplasms of the uterus, mammary gland, and hematopoietic system (lymphoma). MUTAGENICITY: While ethylene oxide has demonstrated, in epidemiological studies with exposed workers, an increased incidence of chromosomal aberrations and sister chromatid exchanges, the relevance of such effects to human health hazard evaluation is currently uncertain. In rodent studies, dose related exposure to ethylene oxide induces increases in numbers of adducts in DNA and hemoglobin. Laboratory studies with mice have shown that acute exposure to ethylene oxide at 300 ppm and above caused testicular injury as evidenced by concentration-related increased embryonic deaths following mating of exposed males to non-exposed females (Dominant-Lethal Test). NEUROTOXICITY: Effects are similar to those of acute (short term) exposure, namely, headaches, nausea, diarrhea, lethargy and irrational behavior. Muscle weakness, loss of sensation in the extremities and a reduction in the sense of smell and/or taste may also result. Studies on workers indicate that CNS and cognitive impairment may result from chronic exposures to ethylene oxide. REPRODUCTIVE EFFECTS: Some limited epidemiological data suggests that women exposed to ethylene oxide have a greater incidence of miscarriage. A one-generation reproduction study in rats showed decreased numbers of pups at 100 ppm but not at 33 ppm. In a two-generation reproduction study involving exposure of rats to ethylene oxide vapor for 6 hrs/day, 5 days/week, there was parental toxicity at 33 ppm and 100 ppm. Post implantation losses with reduction in litter size and offspring body weight were found at 33 ppm and 100 ppm. The no-observable effect concentration for adult toxicity, offspring effect and reproductive effect was 10 ppm. TERATOLOGY: Inhalation development toxicity studies with rats exposed to ethylene oxide vapor at concentrations of 50 ppm, 125 ppm and 225 ppm showed that maternal toxicity occurred at 125 and 225 ppm. Fetotoxicity, evidenced by reduced fetal body weight, occurred at all concentrations. At 225 ppm and to a lesser extent at 125 ppm an increased incidence of skeletal variants was found. There was no evidence of embryotoxicity or malformations.

	TARGET ORGANS: Overexposure to this product may affect the skin, eyes, respiratory system, liver, kidneys, brain, blood, reproductive system and central nervous system.

12. ECOLOGICAL INFORMATION	
12.1. Ecotoxicity (aquatic and terrestrial, where available).	AQUATIC TOXICITY FOR 100% EO: Acute LC_{50} data: 57-84 mg/L/96 hr, fathead minnow (Pimephales promelas) 90 mg/L/96 hr, goldfish (Carassius auratus) 137-300 mg/L/96 hr, water flea (Daphnia magna) Material is slightly toxic to marine invertebrates. 48 hr. LC_{50} in brine shrimp: 490 mg/L
12.2. Persistence and degradability.	CHEMICAL FATE INFORMATION FOR 100% EO: BOD_5: 0.35 p/p. BOD_{10}: 1.1 p/p. BOD_{20}: 1.3 p/p.
12.3. Bioaccumulative potential.	Log octanol/water partition coefficient (log Kow) is low. Partitioning from water to oil is low. Bioconcentration is not expected to occur due to high water solubility and a low log Kow. Ethylene oxide hydrolyzes to ethylene glycol. Biodegradation of ethylene oxide occurs at a moderate rate after acclimation (3-20% degradation after 5 days; 70% after 20 days). Biodegradation is expected in a wastewater treatment plant. Ethylene oxide has an estimated half life in the atmosphere of 105 days. EO does not readily absorb into sediments or soils and does not persist in soils; if absorbed, soil organisms will over time convert EO to glycols eliminating any persistence in the soil.
12.4. Mobility in soil.	EO does not readily absorb into sediments or soils.
12.5. Results of PBT and vPvB	No applicable information found.
12.6. Other adverse effects.	No applicable information found.

13. DISPOSAL CONSIDERATIONS	
13.1. Description of waste residues and information on their safe handling and methods of disposal, including the disposal of any contaminated packaging.	WASTE MANAGEMENT/DISPOSAL: When disposed, ethylene oxide is a RCRA hazardous waste with waste code U115 (Commercial chemical product - listed for toxicity and ignitability). Waste ethylene oxide may be incinerated in an approved hazardous waste incinerator or can be biologically treated in an approved facility. **DO NOT INCINERATE ANY ETHYLENE OXIDE CONTAINERS**. Ethylene oxide is banned from land disposal. Dispose of waste materials in accordance with all applicable Federal, State and local laws and regulations.

14. TRANSPORT INFORMATION	**DOT**	**IMDG**	**IATA**

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14.1. UN number.	UN 1952	Not regulated
14.2. UN proper shipping name.	Ethylene oxide and carbon dioxide mixtures with not more than 9 percent ethylene oxide	
14.3. Transport hazard class (es).	2.2 (non-toxic, non-flammable gas)  	
	LIMITED QUANTITY: The capacity of the container cannot exceed 1L / LIMITED QUANTITY: 120 mL	
	SPECIAL PREVISIONS: Not applicable / SPECIAL PREVISIONS: Not applicable	
	REPORTABLE QUANTITY: 10 lb. (4.54 kg) EO [118 lb. / 53.52 kg of SG8 mixture] Shipments of residual amounts of ethylene oxide are considered hazardous material. All facilities shipping or receiving ethylene oxide are subject to registration as a shipper of hazardous material (49 CFR 107, Subpart G).	
14.4. Packing group, if applicable.	Not applicable	
14.5. Marine pollutant (Yes/No).	No	
14.6. Special precautions, which a user needs to be aware of or needs to comply with in connection with transport or conveyance either within or outside their premises.	See Section 7.2 All facilities shipping SG8 in containers greater than 3,000 liters (792 gallons) must also maintain a written security plan (49 CFR 172.00 – 804, 49 CFR 172.704).	
14.7. Transportation in bulk according to Annex II of MARPOL 73/78 and the IBC Code.	Not Applicable	

15. REGULATORY INFORMATION		
15.1. Safety, health and environmental regulations specific for the product in question.		
US Federal:	CERCLA:	Section 103: Reportable Quantity – 10 lb EO (40 CFR 302.4)
	CWA:	Release into a waterway may require reporting to the National Response Center @ 800-424-8802 (40 CFR 116.4).
	FIFRA	If this chemical is a pesticide product registered by the United States Environmental Protection Agency, it is subject to certain labeling requirements under federal pesticide law. These requirements differ from the classification criteria and hazard information required for safety data sheets (SDS), and for workplace labels of non-pesticide chemicals. The hazard information required on the pesticide label is reproduced below. The pesticide label also includes other important information, including directions for use. EPA Registration No. 36736-5 **DANGER!** CAUSES EYE AND SKIN BURNS. HARMFUL IF INHALED. MAY

		CAUSE NERVOUS SYSTEM DAMAGE. **DANGER!** CANCER HAZARD AND REPRODUCTIVE HAZARD. **DANGER! -** HIGHLY FLAMMABLE LIQUID AND GAS UNDER PRESSURE.
	RCRA:	If discarded in purchased form, this product is a listed and characteristic hazardous waste. However, under RCRA, it is the responsibility of the product user to determine at the time of disposal whether a material containing the product or derived from the product should be classified as a hazardous waste (40 CFR 261.20-24).
	RMP:	EO listed under the EPA Chemical Accidental Prevention Provisions (Risk Management Plan: 40 CFR 68.130) as a Toxic with a 10000 lb Threshold Quantity
	SARA TITLE III:	Section 302 Extremely Hazardous Substances – EO listed; 1000 lb Threshold Planning Quantity (40 CFR 355 Appendix A) Section 304 – EO listed 10 lb Reportable Quantity (40 CFR 302.4) Section 311/312 Hazard Categories – Acute, Chronic, Fire, Reactive, Sudden Release (40 CFR 370.66) Section 313 Toxic Chemicals – EO listed (40 CFR 372.65)
	TSCA:	On TSCA inventory.
	Other EPA	EPA list of Hazardous Air Contaminants: EO listed EPA Organic Hazardous Air Pollutant (HAP) list (40 CFR 61.01): EO listed EPA list of Pesticide Chemicals (40 CFR 180.151): EO listed EPA NESHAPS (40 CFR 63.360): EO listed VOC Rule: 20% VOC
	FDA/USDA:	Not applicable.
	OSHA:	This product is hazardous under the criteria of the Federal OSHA Hazard Communication Standard 29 CFR 1910.1200. Ethylene Oxide Standard 29 CFR 1910.1047
	Other OSHA:	EO listed under the Process Safety Management standard (29 CFR 1910.119) with 5000 lb Threshold Quantity.
US State:	California Proposition 65: EO listed; cancer hazard; reproductive hazard California Director's List: EO listed Florida Hazardous Substance List: EO listed Massachusetts Extraordinarily Hazardous Substance List: EO listed Minnesota Hazardous Substance List: EO listed New Jersey Hazardous Substance List: EO listed sn 0882 (Special Hazardous Substance; Environmental Hazardous Substance) Pennsylvania Right-to-know List: EO listed	
Canadian:	DSL:	EO listed as Oxirane (published 5 April 1994)
	WHMIS:	Ingredient Disclosure List: EO listed 0.1%, item 725 (1310) Classification: Not determined. This SDS is not intended for use in Canada and my not comply with the Canadian Controlled Product Regulations.
EU:	CLP: EINECS: REACH: Safety Data Sheets:	This SDS is not intended for use in the European Union.

16. OTHER INFORMATION INCLUDING INFORMATION ON PREPARATION AND REVISION		
Last Revision Date:	See top of each page under 'Effective Date'	
Reason for Issue:	New	

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	A	
Risk Phrases Used:	See Section 2.	
Hazard Ratings:	See Section 5.2	

THE FOLLOWING ABBREVIATIONS MAY BE USED IN THIS DOCUMENT:	
ACGIH	American Council of Governmental Industrial Hygienists
AICS	Australian Inventory of Chemical Substances
BOD 5, 10, 20	Biochemical Oxygen Demand, 5, 10 or 20 day
CAS	Chemical Abstract Service
CERCLA	Comprehensive Environmental Response, Compensation and Liability Act
CFR	Code of Federal Regulations
CLP	Classification, Labeling and Packaging
CNS	Central nervous system
CWA	Clean Water Act
D.O.T. or DOT	Department of Transportation
DSL	Domestic Substance List (Canada)
EC_{50}	Effective concentration which induces a response halfway between the baseline and maximum.
EC	European Community
ECL	Existing Chemicals List (Korea)
EINECS	European Inventory of Existing Commercial Substances
EPA	Environmental Protection Agency
EU	European Union
FDA	Food and Drug Administration
FIFRA	Federal Insecticide, Fungicide and Rodenticide Act
GHS	Globally Harmonized System
HAP	Hazardous Air Pollutant
HMIS	Hazardous Materials Information System
IARC	International Agency for Research on Cancer
IBC	International Bulk Chemical Code
IDL	Ingredient disclosure list
IDLH	Immediately Dangerous to Life and Health
IMO	International Maritime Organization
K_{St}	Deflagration Index
LC_{50}	Median lethal concentration for 50% mortality of subject species by the inhalation route
LD_{50}	Median lethal dose for 50% mortality of subject species by the oral or dermal route
LD_{LO}	Median lethal dose low; the lowest dose of a substance introduced by any route other than inhalation reported to have caused death in humans or animals.
LEL / LFL	Lower Explosive Limit / Lower Flammable Limit
MARPOL	International Convention for the Prevention of Pollution from Ships
MSHA	Mine Safety Health Administration
NESHAPS	National Emission Standards for Hazardous Air Pollutants
NFPA	National Fire Protection Association
NIOSH	National Institute of Occupational Safety and Health
NTP	National Toxicology Program
OSHA	Occupational Safety and Health Administration
PBT	Persistent Bioaccumulative Toxic
PEL	Permissible Exposure Limit (default 8 hour day, 40 hour week TWA)
p/p	Parts per part
Ppm	Parts per million
p.s.i.g. or psig	Pounds per square inch (gauge pressure)
PSM	Process Safety Management

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PVC	Polyvinyl chloride
RCRA	Resource Conservation and Recovery Act
REACH	Registration, Evaluation, Authorization and Restriction of Chemical Substances
REL	Recommended Exposure Limit (default 10 hour day, 40 hour week TWA)
RMP	Risk Management Plan
SARA	Superfund Amendment and Reauthorization Act of 1990
SCBA	Self-contained breathing apparatus
STEL	Short Term Exposure Limit (default 15 minute TWA)
TD_{LO}	Lowest dose to which humans or animals have been exposed and reported to produce a toxic effect other than cancer
TDG	Transportation of Dangerous Goods
TLV	Threshold limit value
TSCA	Toxic Substance Control Act
TWA	Time Weighted Average
UFL	Upper Flammable Limit
USDA	United States Department of Agriculture
VOC	Volatile organic chemical
vPvB	Very Persistent, Very Bioaccumulative
WHMIS	Workplace Hazardous Material Information System Regulations