

A-Gas R152a

A-Gas (Singapore) PTE LTD

Chemwatch: **15-8476** Version No: **3.1.1.1** Safety Data Sheet Chemwatch Hazard Alert Code: 4

Issue Date: 09/09/2013 Print Date: 15/01/2015 Initial Date: Not Available S.GHS.SGP.EN

SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

Product Identifier

Product name	A-Gas R152a
Chemical Name	Not Applicable
Synonyms	R152a
Proper shipping name	1,1-DIFLUOROETHANE (REFRIGERANT GAS R 152a)
Chemical formula	Not Applicable
Other means of identification	Not Available
CAS number	Not Applicable

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	The use of a quantity of material in an unventilated or confined space may result in increased exposure and an irritating atmosphere developing. Before starting consider control of exposure by mechanical ventilation.
	Refrigerant. Propellant.

Details of the manufacturer/importer

Registered company name	A-Gas (Singapore) PTE LTD
riegioterea company name	
Address	360 Orchard Road, #10-05, Int'l Building 238869 Singapore
Telephone	65 6836 0065
Fax	65 6836 6521
Website	www.agas.com
Email	Not Available

Emergency telephone number

•••	
Association / Organisation	Not Available
Emergency telephone numbers	65 6836 0065
Other emergency telephone numbers	65 6836 0065

CHEMWATCH EMERGENCY RESPONSE

Primary Number	Alternative Number 1	Alternative Number 2
+800 2436 2255	+612 9186 1132	Not Available

Once connected and if the message is not in your prefered language then please dial 01

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

CHEMWATCH HAZARD RATINGS

	Min	Max	
Flammability	4		
Toxicity	2		0 = Minimum
Body Contact	2		1 = Low 2 = Moderate
Reactivity	1		3 = High
Chronic	2		4 = Extreme

GHS Classification Flammable Gas Category 1, Gas under Pressure (Liquefied gas), Acute Toxicity (Oral) Category 4

Label elements



Hazard statement(s) Extra H220 Extra H220 Cont H280 Cont H302 Harr Precautionary statement(s) Free P210 Keep P264 Was P270 Do m Precautionary statement(s) Free P270 P377 Leak P371 Eim Film P301+P312 FIS FIS	emely flammable gas iains gas under pressure; may e nful if swallowed rention o away from heat, hot surfaces, i h all exposed external body area ot eat, drink or smoke when usin	sparks, open flames and other ignition so as thoroughly after handling.	rces. No smoking.	Print Date: 15/01/201
Hazard statement(s) Extra Hazard statement(s) Extra H220 Extra H280 Cont H302 Harr Precautionary statement(s) Frev P200 Keep P2010 Keep P2010 Do n Precautionary statement(s) P270 Parecautionary statement(s) P377 Leak P381 Elim F301+P312	emely flammable gas iains gas under pressure; may e nful if swallowed rention o away from heat, hot surfaces, h all exposed external body area ot eat, drink or smoke when usi	sparks, open flames and other ignition so as thoroughly after handling.	rces. No smoking.	
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Precautionary statement(s) Resp P377 Leak P381 Elim P301+P312 IF SV		ing this product.		
P377 Leak P381 Elim P301+P312 IF SV	onse			
P381 Elim P301+P312 IF S1	/01100			
P301+P312 IF S	ing gas fire: Do not extinguish, i	unless leak can be stopped safely.		
	inate all ignition sources if safe	to do so.		
D220 Dina	NALLOWED: Call a POISON C	CENTER/doctor/physician/first aider/if you	feel unwell.	
P330 Rills	e mouth.			
Precautionary statement(s) Stor	age			
P410+P403 Prote	ect from sunlight. Store in a well	Il-ventilated place.		
Precautionary statement(s) Disp	osal			
P501 Disp	ose of contents/container to au	uthorised chemical landfill or if organic to h	gh temperature incineration	
SECTION 3 COMPOSITION / IN	JEORMATION ON INC.	DEDIENTO		

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
75-37-6	100	1.1-difluoroethane

SECTION 4 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 mith 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 to 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. In case of cold burns (frost-bite): Move casualty into warmth before thawing the affected part; if feet are affected carry if possible Bathe the affected area immediately in luke-warm water (not more than 35 deg C) for 10 to 15 minutes, immersing if possible and without rubbing DO NOT apply hot water or radiant heat. Apply a clean, dry, light dressing of "fluffed-up" dry gauze bandage If a limb is involved, raise and support this to reduce swelling If an adult is involved and where intense pain occurs provide pain killers such as paracetomol Transport to hospital, or doctor Subsequent blackening of the exposed tissue indicates potential of necrosis, which may require amputation.
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.

Not considered a normal route of entry.

If poisoning occurs, contact a doctor or Poisons Information Centre.

- Avoid giving milk or oils
- Avoid giving alcohol.

Indication of any immediate medical attention and special treatment needed

As in all cases of suspected poisoning, follow the ABCDEs of emergency medicine (airway, breathing, circulation, disability, exposure), then the ABCDEs of toxicology (antidotes, basics, change absorption, change distribution, change elimination).

For poisons (where specific treatment regime is absent):

Indestion

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.
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.

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.
- BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For gas exposures:

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.
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- BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

for intoxication due to Freons/ Halons;

- A: Emergency and Supportive Measures
- Maintain an open airway and assist ventilation if necessary
- Treat coma and arrhythmias if they occur. Avoid (adrenaline) epinephrine or other sympathomimetic amines that may precipitate ventricular arrhythmias. Tachyarrhythmias caused by increased myocardial sensitisation may be treated with propranolol, 1-2 mg IV or esmolol 25-100 microgm/kg/min IV.
- Monitor the ECG for 4-6 hours
- B: Specific drugs and antidotes:

There is no specific antidote

C: Decontamination

- Inhalation; remove victim from exposure, and give supplemental oxygen if available.
- Ingestion; (a) Prehospital: Administer activated charcoal, if available. DO NOT induce vomiting because of rapid absorption and the risk of abrupt onset CNS depression. (b) Hospital: Administer activated charcoal, although the efficacy of charcoal is unknown. Perform gastric lavage only if the ingestion was very large and recent (less than 30 minutes)

D: Enhanced elimination:

- There is no documented efficacy for diuresis, haemodialysis, haemoperfusion, or repeat-dose charcoal.
- POISONING and DRUG OVERDOSE, Californian Poison Control System Ed. Kent R Olson; 3rd Edition
- Do not administer sympathomimetic drugs unless absolutely necessary as material may increase myocardial irritability.
- No specific antidote.
- Because rapid absorption may occur through lungs if aspirated and cause systematic effects, the decision of whether to induce vomiting or not should be made by an attending physician.
- If lavage is performed, suggest endotracheal and/or esophageal control.
- Danger from lung aspiration must be weighed against toxicity when considering emptying the stomach.
- Treatment based on judgment of the physician in response to reactions of the patient

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

DO NOT EXTINGUISH BURNING GAS UNLESS LEAK CAN BE STOPPED SAFELY: OTHERWISE: LEAVE GAS TO BURN.
FOR SMALL FIRE:
Dry chemical, CO2 or water spray to extinguish gas (only if absolutely necessary and safe to do so).
DO NOT use water jets.
FOR LARGE FIRE:

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Fire Incompatibility	Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
vice for firefighters	
Fire Fighting	 FOR FIRES INVOLVING MANY GAS CYLINDERS: To stop the flow of gas, specifically trained personnel may inert the atmosphere to reduce oxygen levels thus allowing the capping of leaking container(s Reduce the rate of flow and inject an inert gas, if possible, before completely stopping the flow to prevent flashback. DO NOT extinguish the fire until the supply is shut off otherwise an explosive re-ignition may occur. If the fire is extinguished and the flow of gas continues, used increased ventilation to prevent build-up, of explosive atmosphere.
Fire/Explosion Hazard	 HIGHLY FLAMMABLE: will be easily ignited by heat, sparks or flames. Will form explosive mixtures with air Fire exposed containers may vent contents through pressure relief valves thereby increasing fire intensity and/ or vapour concentration. Vapours may travel to source of ignition and flash back. Containers may explode when heated - Ruptured cylinders may rocket Fire may produce irritating, poisonous or corrosive gases.
	RELEASE MEASURES

Minor Spills	 DO NOT enter confined spaces where gas may have accumulated. Shut off all sources of possible ignition and increase ventilation.
Major Spills	 Clear area of all unprotected personnel and move upwind. Alert Emergency Authority and advise them of the location and nature of hazard. May be violently or explosively reactive. Wear full body clothing with breathing apparatus.
	Personal Protective Equipment advice is contained in Section 8 of the MSDS.

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling	 Consider use in closed pressurised systems, fitted with temperature, pressure and safety relief valves which are vented for safe dispersal. The tubing network design connecting gas cylinders to the delivery system should include appropriate pressure indicators and vacuum or suction lines. Fully-welded types of pressure gauges, where the bourdon tube sensing element is welded to the gauge body, are recommended. Before connecting gas cylinders, ensure manifold is mechanically secure and does not containing another gas.
Other information	 Cylinders should be stored in a purpose-built compound with good ventilation, preferably in the open. Such compounds should be sited and built in accordance with statutory requirements. The storage compound should be kept clear and access restricted to authorised personnel only. Cylinders stored in the open should be protected against rust and extremes of weather. [Storage temperature: <52 deg.c.>

Conditions for safe storage, including any incompatibilities

Suitable container	 DO NOT use aluminium or galvanised containers Cylinder: Ensure the use of equipment rated for cylinder pressure. Ensure the use of compatible materials of construction. Valve protection cap to be in place until cylinder is secured, connected. Cylinder must be properly secured either in use or in storage.
Storage incompatibility	 Avoid reaction with oxidising agents Avoid magnesium, aluminium and their alloys, brass and steel.

PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

Control parameters

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA

Not Available

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
1,1-difluoroethane	Difluoroethane; (1,1-Difluoroethane; HFC 152a)	Not Available	Not Available	Not Available
Ingredient	Original IDLH	Revised IDLH		
1,1-difluoroethane	Not Available	Not Available		

Exposure controls

Appropriate engineering controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.

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	The basic types of engineering controls are: Process controls which involve changing the way a job activity or process is done to reduce the risk. Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment.
Personal protection	
Eye and face protection	 Chemical goggles. Full face shield may be required for supplementary but never for primary protection of eyes. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task.
Skin protection	See Hand protection below
Hands/feet protection	 When handling sealed and suitably insulated cylinders wear cloth or leather gloves. Insulated gloves: NOTE: Insulated gloves should be loose fitting so that may be removed quickly if liquid is spilled upon them. Insulated gloves are not made to permit hands to be placed in the liquid; they provide only short-term protection from accidental contact with the liquid.
Body protection	See Other protection below
Other protection	 The clothing worn by process operators insulated from earth may develop static charges far higher (up to 100 times) than the minimum ignition energies for various flammable gas-air mixtures. This holds true for a wide range of clothing materials including cotton. Avoid dangerous levels of charge by ensuring a low resistivity of the surface material worn outermost. BRETHERICK: Handbook of Reactive Chemical Hazards.
Thermal hazards	Not Available

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the computergenerated selection:

A-Gas R152a Not Available

Material

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion

NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

CPI

Respiratory protection

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	AX-AUS	-	AX-PAPR-AUS / Class 1
up to 50 x ES	-	AX-AUS / Class 1	-
up to 100 x ES	-	AX-2	AX-PAPR-2 ^

^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance Colourless highly flammable liquefied gas with an ether-like odour; insoluble in water. 0.9 (liquid) @ 25 deg.C Physical state Liquified Gas Relative density (Water = 1) Partition coefficient Not Available Not Available Odour n-octanol / water Auto-ignition temperature Odour threshold Not Available 455 (°C) Decomposition pH (as supplied) Neutral Not Applicable temperature Melting point / freezing -117 (freezing point) Viscosity (cSt) Not Available point (°C) Initial boiling point and Molecular weight (g/mol) -24.7 66 boiling range (°C) Flash point (°C) Not Available <-50 Taste Evaporation rate Not Available Explosive properties Not Available HIGHLY FLAMMABLE. Flammability Oxidising properties Not Available Surface Tension (dyn/cm or Upper Explosive Limit (%) 16.9 Not Available mN/m) Lower Explosive Limit (%) 3.9 Volatile Component (%vol) 100 Vapour pressure (kPa) 596 @ 25 deg.C Not Available Gas group Solubility in water (g/L) Immiscible pH as a solution(1%) Not Available Vapour density (Air = 1) 2.4 VOC g/L Not Available

SECTION 10 STABILITY AND REACTIVITY

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Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo. Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual. There is some evidence to suggest that the material can cause respiratory irritation in some persons.
Ingestion	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. Overexposure is unlikely in this form. Not normally a hazard due to physical form of product. Considered an unlikely route of entry in commercial/industrial environments
Skin Contact	There is some evidence to suggest that this material can cause inflammation of the skin on contact in some persons. Fluorocarbons remove natural oils from the skin, causing irritation, dryness and sensitivity. Open cuts, abraded or irritated skin should not be exposed to this material 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.
Eye	Although the material is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may produce transient discomfort characterised by tearing or conjunctival redness (as with windburn). Not considered to be a risk because of the extreme volatility of the gas.
Chronic	Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Principal route of occupational exposure to the gas is by inhalation. Fluorocarbons can cause an increased risk of cancer, spontaneous abortion and birth defects.

A-Gas R152a	TOXICITY Not Available	IRRITATION Not Available
1,1-difluoroethane	TOXICITY Inhalation (Mouse) LC50: 977000 mg/m3/2h	IRRITATION
	Oral (rat) LD50: 484 mg/kg	
	Not Available	Not Available

Not available. Refer to individual constituents.

1,1-DIFLUOROETHANE	1,1-difluoroethane is practically non-toxic following acute or chronic inhalation exposure. In animal testing, extremely high concentrations (5% and over) may cause reduced contraction of heart muscle and at even higher levels, heartbeat irregularities. It seems to have a weak effect in damaging genetic material in cells. Studies have not shown it to cause developmental or reproductive toxicity, and it has not been shown to cause mutations.		
Acute Toxicity	¥	Carcinogenicity	0
Skin Irritation/Corrosion	0	Reproductivity	0
Serious Eye Damage/Irritation	0	STOT - Single Exposure	0
Respiratory or Skin sensitisation	0	STOT - Repeated Exposure	0
Mutagenicity	0	Aspiration Hazard	0
	•	Legend: 🗸	- Data required to make classification available

X – Data available but does not fill the criteria for classification

🚫 – Data Not Available to make classification

CMR STATUS

Not Applicable

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

In addition to carbon dioxide (CO2), methane (CH4) and nitrous oxide (N2O), the greenhouse gases mentioned in the Kyoto Protocol include synthetic substances that share the common feature of being highly persistent in the atmosphere and inhibit radiation from escaping out of the atmosphere. These synthetic substances include hydrocarbons that are partially fluorinated (HCFs) or totally fluorinated (PFCs) as well as sulfur hexafluoride (SF6). The greenhouse potential of these substances, expressed as multiples of that of CO2, are within the range of 140 to 11,700 for HECs from 6500 to 9 200 for PECs and 23 900 for SE6. Once amitted into the atmosphere these substances have an impact on the environment for decades centuries or even for thousands of

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years.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air		
1,1-difluoroethane	LOW	LOW		
Bioaccumulative potential				
Bioaccumulative potential				
Bioaccumulative potential	Bioaccumulation			

Mobility in soil

Ingredient	Mobility	
1 1-difluoroethane	1 OW (KOC = 35.04)	

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

 Product / Packaging disposal

 Evaporate or incinerate residue at an approved site.
 Return empty containers to supplier.
 Ensure damaged or non-returnable cylinders are gas-free before disposal.

SECTION 14 TRANSPORT INFORMATION

Labels Required



Land transport (UN)

Land transport (ON)	
UN number	1030
Packing group	Not Applicable
UN proper shipping name	1,1-DIFLUOROETHANE (REFRIGERANT GAS R 152a)
Environmental hazard	No relevant data
Transport hazard class(es)	Class 2.1 Subrisk Not Applicable
Special precautions for user	Special provisions Not Applicable Limited quantity 0

Air transport (ICAO-IATA / DGR)

	• •		
	UN number	1030	
	Packing group	Not Applicable	
	UN proper shipping name	1,1-Difluoroethane; Refrigerant gas R 152a	
	Environmental hazard	No relevant data	
	Transport hazard class(es)	ICAO/IATA Class 2.1 ICAO / IATA Subrisk Not Applicable ERG Code 10L	
		Special provisions	A1
		Cargo Only Packing Instructions	200
		Cargo Only Maximum Qty / Pack	150 kg
Special p	Special precautions for user	Passenger and Cargo Packing Instructions	Forbidden
		Passenger and Cargo Maximum Qty / Pack	Forbidden
		Passenger and Cargo Limited Quantity Packing Instructions	Forbidden
		Passenger and Cargo Limited Maximum Qty / Pack	Forbidden

Sea transport (IMDG-Code / GGVSee)

UN number	1030
Packing group	Not Applicable
UN proper shipping name	1,1-DIFLUOROETHANE (REFRIGERANT GAS R 152a)
Environmental hazard	No relevant data

Transport hazard clas	s) IMDG Class 2 IMDG Subrisk N	2.1 Not Applicable
Special precautions for user	EMS Number Special provisions	F-D , S-U Not Applicable
	Limited Quantities	

SECTION 15 REGULATORY INFORMATION

Safety, health and environmental regulations / legislation specific for the substance or mixture

1,1-difluoroethane(75-37-6) is found on the following regulatory lists "Not Applicable"

SECTION 16 OTHER INFORMATION

Other information

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chernwatch Classification committee using available literature references.

A list of reference resources used to assist the committee may be found at:

www.chemwatch.net/references

The (M)SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

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