

# Produktinformation



Forschungsprodukte & Biochemikalien



Zellkultur & Verbrauchsmaterial



Diagnostik & molekulare Diagnostik



Laborgeräte & Service

Weitere Information auf den folgenden Seiten! See the following pages for more information!



# Lieferung & Zahlungsart

siehe unsere Liefer- und Versandbedingungen

# Zuschläge

- Mindermengenzuschlag
- Trockeneiszuschlag
- Gefahrgutzuschlag
- Expressversand

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# Muscimol

# sc-200460

**Material Safety Data Sheet** 



The Power to Oscotion

Hazard Alert Code Key: EXTREME HIGH MODERATE LOW

### Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

### **PRODUCT NAME**

Muscimol

### STATEMENT OF HAZARDOUS NATURE

CONSIDERED A HAZARDOUS SUBSTANCE ACCORDING TO OSHA 29 CFR 1910.1200.

# HEALTH AZARD INST BLITY

### **SUPPLIER**

Santa Cruz Biotechnology, Inc. 2145 Delaware Avenue Santa Cruz, California 95060 800.457.3801 or 831.457.3800

### **EMERGENCY**:

ChemWatch

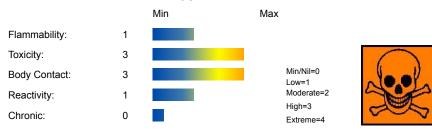
Within the US & Canada: 877-715-9305 Outside the US & Canada: +800 2436 2255 (1-800-CHEMCALL) or call +613 9573 3112

### **SYNONYMS**

C4-H6-N2-O2, "3-isoxazolol, 5-(aminomethyl)-", 5-aminomethyl-3-hydroxyisoazaxole, 5-(aminomethyl)-3-isoazaxole, 5-(aminomethyl)-3-isoxyzole, 3-hydroxy-5-aminomethylisoxazole, 3-hydroxy-5-aminomethylisoxazole, 3-hydroxy-5-aminomethylisoxazole, agarin, "ibotenic acid decarboxylate", "pantherin/ agarin/ insecticide/ pesticide", "RCRA Waste No.: P007", "mushroom Group V (5) toxin", "Amanita muscaria, pantherina isoxazole derivative", "GABA receptor agonist"

### **Section 2 - HAZARDS IDENTIFICATION**

### **CHEMWATCH HAZARD RATINGS**



### **CANADIAN WHMIS SYMBOLS**



# EMERGENCY OVERVIEW

Toxic by inhalation, in contact with skin and if swallowed.

# POTENTIAL HEALTH EFFECTS ACUTE HEALTH EFFECTS

### **SWALLOWED**

- Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual.
- Isoazoleacetic derivatives such as ibotenic acid and muscimol are alkaloids extracted from certain toxic mushrooms (Group V mushroom toxins). Ibotenic acid exhibits potent neuroexcitory activity. Human volunteers ingesting muscimol (7.5 to 10 mg) showed symptoms within an hour. These lasted for 3 to 4 hours with a few effects persisting for about 10 hours with a hangover appearing on the following day. Subjects became inactive and experienced mild fatigue (the mushrooms also cause an initial drowsiness, stupor or sleep). Other symptoms included mild nausea and vomiting, muscle spasms in the extremities, various emotional changes (elation and excitement or fear and withdrawal) and distorted perceptions of space and time. Hallucinations rarely occur.

In the Pacific northwest the Panther mushroom is consumed for recreational purposes. Only rarely do ibotenic acid containing mushrooms contain sufficient of the toxic alkaloid, muscarine, to produce cholinergic effects. Deaths from these mushrooms are rare but children may react in dangerous and unpredictable ways (convulse for example). Many toxicologists are of the opinion that muscimol and ibotenic acid are the intoxicants responsible for pyschomotor reactions experienced by Siberian tribesmen who consumed mushrooms in religious rites and the "soma" consumed by Vedic priests of

ancient India to attain ecstasy and immortality. Popularisation of this idea and related ethnopharmacologic theories has lead to the deliberate consumption of muscimol-containing mushrooms by present day generations to explore altered states of consciousness. Ibotenic acid and muscimol (isoxazole derivatives) can be detected in the urine, within 1 hour of ingestion. Certain eastern Asian users drink urine of isoxazole users to obtain the same effect

The mechanisms by which ibotenic acid and muscimol alter central neural activity may be related to structural similarities to the amino acids glutamic acid and gamma-aminobutyric acid (GABA) respectively. Both GABA and glutamic acid are putative central neurotransmitters. In contrast to the both ibotenic acid and muscimol neither of these amino acids cross the blood-brain barrier to an appreciable extent. When introduced directly to the brain (intrathecally) glutamic acid activates spinal interneurones in a fashion similar to ibotenic acid. Conversely intrathecal GABA and muscimol inhibit the firing of some central neurones. Systemic administration of ibotenic acid and muscimol to laboratory animals produces central inhibition of motor activity with little change to peripheral autonomic activity. Both compounds induce the second produces central inhibition of motor activity with little change to peripheral autonomic activity. Both compounds induce the second produces central inhibition of motor activity with little change to peripheral autonomic activity. Both compounds induce the peripheral autonomic activity and muscimol behave as false neurotransmitters.

■ The material may mimic the actions of the major inhibitory neurotransmitter of the brain, GABA, (gamma-aminobutyric acid) in inhibiting the electrical activity of certain elements of the nervous system. GABA is a putative amino-acid, produced within certain neurones (presynaptic cells) and is released into the synapse, between neurones, on the arrival of an action potential; GABA then interacts with post-synaptic neurones, slowing their rate of firing.

Certain GABA congeners may produce lightheadedness, ataxia, mood elevation and muscle incoordination. Side-effects of uptake of GABA analogues and congeners (such as the isoxazole derivative, muscimol, isolated from hallucinogenic mushrooms), by neurones, may include dizziness, ataxia, euphoria, muscle twitches, and initial psychic stimulations followed by dream-filled sleep. More severe ingestions may produce visual disturbances, fever, confusion, myoclonus, mydriasis, seizures and coma. Residual headache may persist for several days. The congener muscimol is structurally related to GABA, crosses the blood-brain barrier easily, in contrast to GABA, and inhibits the firing of some central neurones. GABA, when introduced directly to the brain by injection (i.e. intrathecally), produces the same effect and similar outcomes to those produced by muscimol.

Another amino-acid, with a similar structure to both GABA and muscimol, is ibotenic acid (also derived from mushrooms). Effects of ingestion are similar to those produced by muscimol. Ibotenic acid, however, binds to a different receptor, NMDA, which is normally activated by the putative neurotransmitter glutamic acid but now is inhibited by the action of ibotenic acid. NMDA receptors, in contrast to GABA receptors, when activated, normally cause neurones to fire. Systemic administration of ibotenic acid and muscimol to laboratory animals produces central inhibition of motor activity with little change to peripheral autonomic activity. Both compounds induce EEG changes in cats, rabbits and rats and thus within the central nervous system both compounds behave as false inhibitory neurotransmitters.

GABA and its congeners inhibit the excitation of cells, of neurological origin, by allowing anions, such as chlorine, to enter the cell thus altering the electric potential of the cell. The GABA receptor acts as a gateway for influx of chloride ion.

One subtype of receptor for GABA, the GABA-A receptor also contains binding sites for anxiolytic barbiturates, benzodiazepines, neurosteroids and, probably, ethanol. These anxiolytic groups potentiate the function of the chloride channels linked to the receptor.

The whole receptor complex can be formed only by the interaction of several individual subunits, each of which is a membrane-spanning protein. Several different types of subunit have been identified and named the alpha-, beta-, and delta- subunits. The receptor may be made from any of up to five possible combinations of these subunits so that the number of possible subtypes of GABA-A receptor is huge and may, in part, explain their variable response to each anxiolytic agent. However, receptors made from any combination of two or three subunit types express much of the function of the native receptor.

### EYE

■ Although the material is not thought to be an irritant, direct contact with the eye may cause transient discomfort characterized by tearing or conjunctival redness (as with windburn). Slight abrasive damage may also result.

### **SKIN**

- Skin contact with the material may produce toxic effects; systemic effectsmay result following absorption.
- The material is not thought to be a skin irritant (as classified using animal models). Abrasive damage however, may result from prolonged

exposures.

<q/>>.

- 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.

### INHALED

- Inhalation of dusts, generated by the material, during the course of normal handling, may produce toxic effects.
- The material is not thought to produce respiratory irritation (as classified using animal models). Nevertheless inhalation of dusts, or fume, 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.

### **CHRONIC HEALTH EFFECTS**

■ Long-term exposure to the product is not thought to produce chronic effects adverse to the health (as classified using animal models); nevertheless exposure by all routes should be minimized as a matter of course.

Long term exposure to high dust concentrations may cause changes in lung function i.e. pneumoconiosis; caused by particles less than 0.5 micron penetrating and remaining in the lung.

	Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS	
NAME	CAS RN	%

muscimol 2763-96-4 >98

### **Section 4 - FIRST AID MEASURES**

### **SWALLOWED**

· IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. · Where Medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise:

### FYF

■ If this product comes in contact with the eyes: · Immediately hold eyelids apart and flush the eye continuously with running water. · Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids

### SKIN

■ If skin or hair contact occurs: · Quickly but gently, wipe material off skin with a dry, clean cloth. · Immediately remove all contaminated clothing, including footwear.

### INHALED

· If fumes or combustion products are inhaled remove from contaminated area. · Lay patient down. Keep warm and rested.

### **NOTES TO PHYSICIAN**

■ Mushroom poisoning (due to Amanita spp.) and other Group V mushroom toxin poisonings

Oral poisonings due to Amanita spp are appear to be related to the amatoxins rather than the phallotoxins which appear to be degraded in the gastrointestinal tract. Phallotoxin injury is probably related to contamination by amatoxins (alpha-amantinin for example is lethal in rats at 0.1.mg/kg - man is said to be more susceptible). Such poisonings may respond to the following treatment regime:

- If spontaneous vomiting has not been extensive and productive, induce emesis with Syrup of Ipecac and/or perform gastric lavage with water or potassium permanganate solution (1:5000). Save the gastric contents.
- · Activated charcoal, several teaspoons in water by mouth. If vomiting does not prevent its retention, this dose of activated charcoal should be given every few hours to interrupt the early enterohepatic cycling of the amatoxins. Alternatively, a tube can be introduced into the duodenum with continuous aspiration.
- · Saline catharsis with sodium sulfate (15 to 30 gms in water) by mouth. High colonic enemas may also help to stimulate prompt evacuation. a clinical impression persists that the sooner and more vigorous the purging, whether spontaneous or induced by treatment, the less severe is the late injury to vital organs.
- · Meperidine (Demerol) for the control of pain. Morphine is best avoided because it may delay purging.
- · Correct dehydration and shock by the intravenous administration of replacement fluids.
- · Intravenous infusions of glucose when and if hypoglycaemia appears.
- · To promote amatoxin excretion and to limit renal involvement, try to maintain a brisk urine flow during the first two days, if necessary by using mannitol.
- · Early extracorporeal haemodialysis or better haemoperfusion over activated charcoal is also judged worthwhile during the first three days to eliminate the toxin.
- · Intravenous corticosteroids have been recommended, e.g., 20-40 mg dexamethasone daily, in the hope of inhibiting toxin fixation in the liver. This form of therapy has not been demonstrated objectively.
- · Another experimental regime that is alleged to protect the liver is the intravenous infusion of large doses of penicillin G (250 mg/kg daily) during the first 2-days.
- · A trial with intravenous thioctic acid (alpha-lipoic acid) may or may not be useful.
- · Digitalis may be given a trial if hypotension persists after rehydration is completed.
- Institute supportive therapy for impending and hepatic insufficiencies

GOSSELIN, SMITH & HODGE: Clinical Toxicology of Commercial Products, 5th Ed.

Treat symptomatically.

Section 5 - FIRE FIGHTING MEASURES				
Vapour Pressure (mmHG):	Negligible			
Upper Explosive Limit (%):	Not available.			
Specific Gravity (water=1):	Not available			
Lower Explosive Limit (%):	Not available.			

### **EXTINGUISHING MEDIA**

- · Water spray or fog.
- · Foam.

### **FIRE FIGHTING**

- · Alert Emergency Responders and tell them location and nature of hazard.
- · Wear full body protective clothing with breathing apparatus.

When any large container (including road and rail tankers) is involved in a fire,

consider evacuation by 800 metres in all directions.

### GENERAL FIRE HAZARDS/HAZARDOUS COMBUSTIBLE PRODUCTS

- · Combustible solid which burns but propagates flame with difficulty.
- · Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust may burn rapidly and fiercely if ignited.

Combustion products include: carbon monoxide (CO), carbon dioxide (CO2), nitrogen oxides (NOx), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.

### FIRE INCOMPATIBILITY

■ Avoid contamination with oxidizing agents i.e. nitrates, oxidizing acids,chlorine bleaches, pool chlorine etc. as ignition may result.

### PERSONAL PROTECTION

Glasses:

Gloves:

Respirator:

Particulate

### **Section 6 - ACCIDENTAL RELEASE MEASURES**

### MINOR SPILLS

- $\cdot$  Clean up waste regularly and abnormal spills immediately.
- · Avoid breathing dust and contact with skin and eyes.
- $\cdot$  Wear protective clothing, gloves, safety glasses and dust respirator.
- · Use dry clean up procedures and avoid generating dust.
- · Vacuum up or sweep up. NOTE: Vacuum cleaner must be fitted with an exhaust micro filter (HEPA type) (consider explosion-proof machines designed to be grounded during storage and use).
- · Dampen with water to prevent dusting before sweeping.
- · Place in suitable containers for disposal.

### **MAJOR SPILLS**

- · Clear area of personnel and move upwind.
- $\cdot$  Alert Emergency Responders and tell them location and nature of hazard.

### **Section 7 - HANDLING AND STORAGE**

### PROCEDURE FOR HANDLING

- $\cdot$  Avoid all personal contact, including inhalation.
- $\cdot$  Wear protective clothing when risk of exposure occurs.

Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source.

- $\cdot$  Do NOT cut, drill, grind or weld such containers.
- In addition ensure such activity is not performed near full, partially empty or empty containers without appropriate workplace safety authorisation or permit.

### RECOMMENDED STORAGE METHODS

- Glass container
- $\cdot$  Lined metal can, Lined metal pail/drum
- · Plastic pail.

For low viscosity materials

- Drums and jerricans must be of the non-removable head type.
- · Where a can is to be used as an inner package, the can must have a screwed enclosure.

All inner and sole packagings for substances that have been assigned to Packaging Groups I or II on the basis of inhalation toxicity criteria, must be hermetically sealed.

### STORAGE REQUIREMENTS

· Store in original containers.

· Keep containers securely sealed.

### Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

### **EXPOSURE CONTROLS**

Source	Material	TWA ppm	TWA mg/m³	STEL ppm	STEL mg/m³	Peak ppm	Peak mg/m³	TWA F/CC	Notes
US - California Permissible Exposure Limits for Chemical Contaminants	muscimol (Particulates not otherwise regulated Respirable fraction)		5						(n)
US - Tennessee Occupational Exposure Limits - Limits For Air Contaminants	muscimol (Particulates not otherwise regulated Respirable fraction)		5						
US - Wyoming Toxic and Hazardous Substances Table Z1 Limits for Air Contaminants	muscimol (Particulates not otherwise regulated (PNOR)(f)- Respirable fraction)		5						
US - Michigan Exposure Limits for Air Contaminants	muscimol (Particulates not otherwise regulated, Respirable dust)		5						
Canada - Prince Edward Island Occupational Exposure Limits	muscimol (Particles (Insoluble or Poorly Soluble) [NOS] Inhalable particles)		10						See Appendix B current TLV/BEI Book

### **ENDOELTABLE**

### PERSONAL PROTECTION









### **RESPIRATOR**

Particulate

Consult your EHS staff for recommendations

### FYF

- · Chemical protective goggles with full seal
- · Shielded mask (gas-type)
- · Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lens or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59].

### HANDS/FEET

- Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: such as:
- · frequency and duration of contact,
- · chemical resistance of glove material,
- $\cdot$  glove thickness and
- · dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739).

- · When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374) is recommended.
- · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374) is recommended.
- · Contaminated gloves should be replaced.

Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

- · Rubber gloves (nitrile or low-protein, powder-free latex). Employees allergic to latex gloves should use nitrile gloves in preference.
- · Double gloving should be considered.
- · PVC gloves.
- · Protective shoe covers.
- · Head covering.

### **OTHER**

- · For quantities up to 500 grams a laboratory coat may be suitable.
- · For quantities up to 1 kilogram a disposable laboratory coat or coverall of low permeability is recommended. Coveralls should be buttoned at collar and cuffs.
- · For quantities over 1 kilogram and manufacturing operations, wear disposable coverall of low permeability and disposable shoe covers.
- · For manufacturing operations, air-supplied full body suits may be required for the provision of advanced respiratory protection.
- · Eye wash unit.
- · Ensure there is ready access to an emergency shower.
- · For Emergencies: Vinyl suit.

### **ENGINEERING CONTROLS**

■ For potent pharmacological agents:

### Powders

To prevent contamination and overexposure, no open handling of powder should be allowed.

- · Powder handling operations are to be done in a powders weighing hood, a glove box, or other equivalent ventilated containment system.
- · In situations where these ventilated containment hoods have not been installed, a non-ventilated enclosed containment hood should be used
- · Pending changes resulting from additional air monitoring data, up to 300 mg can be handled outside of an enclosure provided that no grinding, crushing or other dust-generating process occurs.
- An air-purifying respirator should be worn by all personnel in the immediate area in cases where non-ventilated containment is used, where significant amounts of material (e.g., more than 2 grams) are used, or where the material may become airborne (as through grinding, etc.).
- · Powder should be put into solution or a closed or covered container after handling.
- · If using a ventilated enclosure that has not been validated, wear a half-mask respirator equipped with HEPA cartridges until the enclosure is validated for use.

Solutions Handling:

- · Solutions can be handled outside a containment system or without local exhaust ventilation during procedures with no potential for aerosolisation. If the procedures have a potential for aerosolisation, an air-purifying respirator is to be worn by all personnel in the immediate area
- · Solutions used for procedures where aerosolisation may occur (e.g., vortexing, pumping) are to be handled within a containment system or with local exhaust ventilation.
- · In situations where this is not feasible (may include animal dosing), an air-purifying respirator is to be worn by all personnel in the immediate area. If using a ventilated enclosure that has not been validated, wear a half-mask respirator equipped with HEPA cartridges until the enclosure is validated for use.
- · Ensure gloves are protective against solvents in use.

Unless written procedures, specific to the workplace are available, the following is intended as a guide:

- · For Laboratory-scale handling of Substances assessed to be toxic by inhalation. Quantities of up to 25 grams may be handled in Class II biological safety cabinets \*; Quantities of 25 grams to 1 kilogram may be handled in Class II biological safety cabinets\* or equivalent containment systems Quantities exceeding 1 kg may be handled either using specific containment, a hood or Class II biological safety cabinet\*,
- · HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapors.

### **Section 9 - PHYSICAL AND CHEMICAL PROPERTIES**

### **PHYSICAL PROPERTIES**

### Solid

Mixes with water.

State	Divided solid	Molecular Weight	114.10
Melting Range (°F)	348.8 (decomposes)	Viscosity	Not Applicable
Boiling Range (°F)	Not available	Solubility in water (g/L)	Miscible
Flash Point (°F)	Not available	pH (1% solution)	Not available
Decomposition Temp (°F)	Not Available	pH (as supplied)	Not applicable
Autoignition Temp (°F)	Not available.	Vapour Pressure (mmHG)	Negligible
Upper Explosive Limit (%)	Not available.	Specific Gravity (water=1)	Not available
Lower Explosive Limit (%)	Not available.	Relative Vapor Density (air=1)	Not available.
Volatile Component (%vol)	Negligible	Evaporation Rate	Not applicable

### **APPEARANCE**

White powder; mixes with water.

### Section 10 - CHEMICAL STABILITY

### CONDITIONS CONTRIBUTING TO INSTABILITY

- · Presence of incompatible materials.
- Product is considered stable.

### STORAGE INCOMPATIBILITY

· Avoid oxidizing agents, acids, acid chlorides, acid anhydrides.

For incompatible materials - refer to Section 7 - Handling and Storage.

### **Section 11 - TOXICOLOGICAL INFORMATION**

MUSCIMOL

### **TOXICITY AND IRRITATION**

MUSCIMOL:

■ unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances.

TOXICITY	IRRITATION
Oral (rat) LD50: 45 mg/kg	Nil Reported
Intravenous (None) None: rat LD540 4.5 mg/kg	
Intraperitoneal (mouse) LD50: 2.5 mg/kg	
Subcutaneous (mouse) LD50: 3.8 mg/kg	

Intravenous (mouse) LD50: 5.62 mg/kg

Sleep, hallucinations, changes in motor activity, ataxia, dyspnea, nausea and vomiting recorded.

### **Section 12 - ECOLOGICAL INFORMATION**

This material and its container must be disposed of as hazardous waste.

**Ecotoxicity** 

Ingredient Persistence: Persistence: Air Bioaccumulation Mobility

muscimol HIGH LOW HIGH

### **Section 13 - DISPOSAL CONSIDERATIONS**

### **US EPA Waste Number & Descriptions**

B. Component Waste Numbers

When muscimol is present as a solid waste as a discarded commercial chemical product, off-specification species, as a container residue, or a spill residue, use EPA waste number P007 (waste code T).

### **Disposal Instructions**

All waste must be handled in accordance with local, state and federal regulations.

Puncture containers to prevent re-use and bury at an authorized landfill.

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

- · Reduction
- · Reuse
- · Recycling
- · Disposal (if all else fails)

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

DO NOT allow wash water from cleaning equipment to enter drains. Collect all wash water for treatment before disposal.

- · Recycle wherever possible.
- · Consult manufacturer for recycling options or consult Waste Management Authority for disposal if no suitable treatment or disposal facility can be identified.

### Section 14 - TRANSPORTATION INFORMATION

DOT:

Symbols: None Hazard class or Division: 6.1 Identification Numbers: UN1544 PG: II Label Codes: 6.1 Special provisions: IB8, IP2, IP4, T3,

TP33

Packaging: Exceptions: 153 Packaging: Non-bulk: 212 Packaging: Exceptions: 153 Quantity limitations: 25 kg

Passenger aircraft/rail:

Quantity Limitations: Cargo 100 kg Vessel stowage: Location: A

aircraft only:

Vessel stowage: Other: None

Hazardous materials descriptions and proper shipping names: Alkaloids, solid, n.o.s. or Alkaloid salts, solid, n.o.s. poisonous

Air Transport IATA:

ICAO/IATA Class: 6.1 ICAO/IATA Subrisk: None UN/ID Number: 1544 Packing Group: II

Special provisions: A3

Cargo Only

Packing Instructions: 615 Maximum Qty/Pack: 100 kg Passenger and Cargo Passenger and Cargo Packing Instructions: 613 Maximum Qty/Pack: 25 kg

Passenger and Cargo Limited Quantity Passenger and Cargo Limited Quantity

Packing Instructions: Y613 Maximum Qty/Pack: 1 kg

Shipping Name: ALKALOID SALTS, SOLID, N.O.S. \*(CONTAINS

MUSCIMOL)

Maritime Transport IMDG:

IMDG Class: 6.1 IMDG Subrisk: None UN Number: 1544 Packing Group: II

EMS Number: F-A, S-A Special provisions: 43 274

Limited Quantities: 500 g

Shipping Name: ALKALOIDS, SOLID, N.O.S. or ALKALOIDS SALTS, SOLID, N.O.S.

### **Section 15 - REGULATORY INFORMATION**

### muscimol (CAS: 2763-96-4) is found on the following regulatory lists;

"Canada Non-Domestic Substances List (NDSL)","US - Massachusetts Oil & Hazardous Material List","US - New Jersey Right to Know Hazardous Substances","US - Pennsylvania - Hazardous Substance List","US - Vermont Hazardous Constituents","US - Vermont Hazardous Waste - Acutely Hazardous Wastes","US - Washington Discarded Chemical Products List - ""P"" Chemical Products","US Department of Transportation (DOT) List of Hazardous Substances and Reportable Quantities - Hazardous Substances Other Than Radionuclides","US DOE Temporary Emergency Exposure Limits (TEELs)","US List of Lists - Consolidated List of Chemicals Subject to EPCRA, CERCLA and Section 112(r) of the Clean Air Act","US RCRA (Resource Conservation & Recovery Act) - Hazardous Constituents - Appendix VIII to 40 CFR 261","US RCRA (Resource Conservation & Recovery Act) - List of Hazardous Wastes","US SARA Section 302 Extremely Hazardous Substances","US Toxic Substances Control Act (TSCA) - Inventory","US TSCA Section 8 (d) - Health and Safety Data Reporting"

### **Section 16 - OTHER INFORMATION**

### ND

Substance CAS Suggested codes muscimol 2763-96-4

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- Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch 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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