# Safety Data Sheet



According to	the	UN	GHS	revision	8
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Creation Date:	August 12, 2024
Revision Date:	August 12, 2024

1.	IDENTIFICATION		
1.1	GHS Product identifier		
	Product name:	Phenytoin	
	Catalog Number:	т0939	
	CAS Number:	57-41-0	
1.2	Other means of identificatio	n	
	Other names:	-	
1.3	Recommended use of the chemical and restrictions on use		
	Identified uses:	no data available	
1.4	Supplier's details		
	Company:	Targetmol Chemicals Inc.	
	Uses advised against:	36 Washington Street,Wellesley Hills, Massachusetts 02481 USA	
	Tel/Fax:	(781) 999-4286	
1.5	Emergency phone number		
	Emergency phone number:	781-999-4286	
	Service hours:	Monday to Friday, 9am-5pm (Standard timezone:UTC/GMT -5hours).	
2.	HAZARD IDENTIFICATION		

# 2.1 Classification of the substance or mixture

Acute toxicity - Category 4, Oral Carcinogenicity, Category 2 Reproductive toxicity, Category 1B

Pictogram(s):

#### 2.2 GHS label elements, including precautionary statements



Signal word:	Danger	
Hazard statement(s):	H302 Harmful if swallowed H351 Suspected of causing cancer H360 May damage fertility or the unborn child	
Precautionary statement(s):		
Prevention:	P264 Wash thoroughly after handling. P270 Do not eat, drink or smoke when using this product. P203 Obtain, read and follow all safety instructions before use. P280 Wear protective gloves/protective clothing/eye protection/face protection/hearing protection/	
Response:	P301+P317 IF SWALLOWED: Get medical help. P330 Rinse mouth. P318 IF exposed or concerned, get m <mark>edical</mark> advice.	
Storage:	P405 Store locked up.	

Disposal:

P501 Dispose of contents/container to an appropriate treatment and disposal facility in accordance with applicable laws and regulations, and product characteristics at time of disposal.

# 2.3 Other hazards which do not resultin classification

no data available

# 3. COMPOSITION/INFORMATION ON INGREDIENTS

# 3.1 Substances

Chemical name	Common names and synonyms	CAS number	EC number
Phenytoin	-	57-41-0	200-328-6

## 4. FIRST-AID MEASURES

## 4.1 Description of necessary first-aid measures

#### **General advice**

no data available

## If inhaled

Move the victim into fresh air. If breathing is difficult, give oxygen. If not breathing, give artificial respiration and consult a doctor immediately. Do not use mouth to mouth resuscitation if the victim ingested or inhaled the chemical.

#### Following skin contact

Take off contaminated clothing immediately. Wash off with soap and plenty of water. Consult a doctor.

#### Following eye contact

Rinse with pure water for at least 15 minutes. Consult a doctor.

#### Following ingestion

Rinse mouth with water. Do not induce vomiting. Never give anything by mouth to an unconscious person. Call a doctor or Poison Control Center immediately.

## 4.2 Most important symptoms/effects, acute and delayed

Maintain an open airway and assist ventilation if necessary. Administer supplemental oxygen. Treat stupor and coma if they occur. Protect the patient from self-injury caused by ataxia. If seizures occur, consider an alternate diagnosis and treat with other usual anticonvulsants. If hypotension occurs with intravenous phenytoin administration, immediately stop the infusion and administer intravenous fluids and pressors if necessary. There are no specific antidotes. Decontamination: administer activated charcoal orally if conditions are appropriate. Gastric lavage is not necessary after small to moderate ingestions if activated charcoal can be given promptly. Elimination: Repeat-dose activated charcoal may enhance phenytoin elimination but is not necessary and may increase the risk of aspiration pneumonitis in drowsy patients. There is no role for diuresis, dialysis, or hemoperfusion.

# 4.3 Indication of immediate medical attention and special treatment needed, if necessary

SYMPTOMS: Symptoms of exposure to this compound include ataxia, nystagmus, fever, agranulocytosis, lupus erythematosus, epidermal necrolysis, pseudolymphoma, slurred speech, mental confusion, dizziness, insomnia, transient nervousness, headache, dyskinesias, chorea, dystonia, asterixis, polyneuropathy, nausea, vomiting, constipation, rash (scarlatiniform or morbilliform), dermatitis (bullous, exfoliative or purpuric), thrombocytopenia, leukopenia, granulocytopenia, pancytopenia with or without bone marrow suppression, macrocytosis, megaloblastic anemia, coarsening of the facial features, gingival hyperplasia, toxic hepatitis, respiratory depression, Stevens-Johnson syndrome, coma and death. Other symptoms include central nervous system effects such as depression and motor restlessness, allergic reactions, gastric distress, hirsutism and blood dyscrasias. Exposure can cause liver damage, kidney damage, adenopathy, aplastic anemia, pulmonary changes, lymph gland enlargement, cardiac irregularities, peripheral nerve damage, tremor, drug psychosis, rigidity and convulsions. Exposure can also cause motor twitchings, decreased coordination, enlargement of the lips, hypertrichosis, Peyronie's Disease, periarteritis nodosa, immunoglobulin abnormalities, dysarthria, hyperreflexia, lethargy, hypertension and circulatory depression. It may cause tenderness of the gums, rickets, reduced bone density, osteomalacia, polyarthropathy, hyperglycemia, erythema multiforme, hypotension, blurred vision, unsteady gait, facial changes, thickening of the skull, thickening of the heel pad, eosinophilia, hemolytic anemia, myasthenia gravis, acquired hemophilia, leukemia, pulmonary function loss, decreased sexual potency and fertility, and cholestasis. It may also cause lymphadenopathy, lymphoma including Hodgkin's disease, hallucinations, excitation, cardiac arrhythmias, cerebellar-vestibular effects, behavioral changes, increased frequency of seizures, gastrointestinal symptoms, vertigo, mydriasis, hyperactivity, silliness, dullness, drowsiness, anorexia, inhibition of release of anti-diuretic hormone, glycosuria, hepatic necrosis, neutropenia and red-cell aplasia. Exposure may lead to blood changes, tumors of the skin and appendages, change in motor activity, degenerative brain changes and jaundice. It may also lead to diplopia, weakness of accommodation and convergence, stuporous mental state, mental disturbance, oscillopsia (very fine periodic dancing of the eyes vertically or horizontally),

# A DRUG SCREENING EXPERT

ophthalmoplegia and conjunctivitis. It can cause the eyes to be temporarily fixed in mid-position and can interfere with the vestibuloocular reflex arc. ACUTE/CHRONIC HAZARDS: This compound is harmful by ingestion, inhalation and skin absorption. It may cause irritation. When heated to decomposition it emits toxic fumes of carbon monoxide, carbon dioxide and nitrogen oxides. (NTP, 1992)

## 5. FIRE-FIGHTING MEASURES

## 5.1 Extinguishing media

Fires involving this material can be controlled with a dry chemical, carbon dioxide or Halon extinguisher. A water spray may also be used. (NTP, 1992)

## 5.2 Specific hazards arising from the chemical

Flash point data for this chemical are not available; however, it is probably combustible. (NTP, 1992)

## 5.3 Special protective actions for fire-fighters

Wear self-contained breathing apparatus for firefighting if necessary.

## 6. ACCIDENTAL RELEASE MEASURES

#### 6.1 Personal precautions, protective equipment and emergency procedures

Avoid dust formation. Avoid breathing mist, gas or vapours. Avoid contacting with skin and eye. Use personal protective equipment. Wear chemical impermeable gloves. Ensure adequate ventilation. Remove all sources of ignition. Evacuate personnel to safe areas. Keep people away from and upwind of spill/leak.

## 6.2 Environmental precautions

Prevent further spillage or leakage if it is safe to do so. Do not let the chemical enter drains. Discharge into the environment must be avoided.

## 6.3 Methods and materials for containment and cleaning up

PRECAUTIONS FOR "CARCINOGENS": A high-efficiency particulate arrestor (HEPA) or charcoal filters can be used to minimize amt of carcinogen in exhausted air ventilated safety cabinets, lab hoods, glove boxes or animal rooms ... Filter housing that is designed so that used filters can be transferred into plastic bag without contaminating maintenance staff is avail commercially. Filters should be placed in plastic bags immediately after removal ... The plastic bag should be sealed immediately ... The sealed bag should be labelled properly ... Waste liquids ... should be placed or collected in proper containers for disposal. The lid should be secured & the bottles properly labelled. Once filled, bottles should be placed in plastic bag, so that outer surface ... is not contaminated ... The plastic bag should also be sealed & labelled ... Broken glassware ... should be decontaminated by solvent extraction, by chemical destruction, or in specially designed incinerators. Chemical Carcinogens

## 7. HANDLING AND STORAGE

#### 7.1 Precautions for safe handling

Handling in a well ventilated place. Wear suitable protective clothing. Avoid contact with skin and eyes. Avoid formation of dust and aerosols. Use non-sparking tools. Prevent fire caused by electrostatic discharge steam.

## 7.2 Conditions for safe storage, including any incompatibilities

PRECAUTIONS FOR "CARCINOGENS": Storage site should be as close as practical to lab in which carcinogens are to be used, so that only small quantities required for ... expt need to be carried. Carcinogens should be kept in only one section of cupboard, an explosion-proof refrigerator or freezer (depending on chemicophysical properties ...) that bears appropriate label. An inventory ... should be kept, showing quantity of carcinogen & date it was acquired ... Facilities for dispensing ... should be contiguous to storage area. Chemical Carcinogens

## 8. EXPOSURE CONTROLS/PERSONAL PROTECTION

#### 8.1 Control parameters

**Occupational Exposure limit values** 

no data available

#### **Biological limit values**

no data available

## 8.2 Appropriate engineering controls

Ensure adequate ventilation. Handle in accordance with good industrial hygiene and safety practice. Set up emergency exits and the riskelimination area.

## 8.3 Individual protection measures, such as personal protective equipment (PPE)

#### Eye/face protection

Wear tightly fitting safety goggles with side-shields conforming to EN 166(EU) or NIOSH (US).

#### **Skin protection**

Wear fire/flame resistant and impervious clothing. Handle with gloves. Gloves must be inspected prior to use. Wash and dry hands. The selected protective gloves have to satisfy the specifications of EU Directive 89/686/EEC and the standard EN 374 derived from it.

#### **Respiratory protection**

If the exposure limits are exceeded, irritation or other symptoms are experienced, use a full-face respirator.

#### Thermal hazards

no data available

#### 9. PHYSICAL AND CHEMICAL PROPERTIES

Physical state	PHYSICAL DESCRIPTION: Fine white or almost white crystalline powder. Odorless or almost odorles Tasteless. (NTP, 1992)	
Color	Needles (alcohol)	
Odour	Odorless	
Melting point/ freezing point	312°C(lit.)	
Boilingpoint or initial boiling point and boiling range	121°C(lit.)	
Flammability	no data available	
Lower and upper explosion limit/flammability limit	no data available	
Flash point	0°C(lit.)	
Auto-ignition temperature	no data available	
Decomposition temperature	no data available	
рН	no data available	
Kinematic viscosity	no data available	
Solubility	Ethanol: 11 mg/mL (43.6 mM), DMSO: 55 mg/mL (218.02 mM),	
N-octanol-water partition coefficient	no data available	
Vapour pressure	1.2X10-10 mm Hg at 25 deg C (est)	
Density and/ or relative density	1.257g/cm3	
Relative vapour density	no data available	
Particle characteristics	no data available	

## 10. STABILITY AND REACTIVITY

#### 10.1 Reactivity

no data available

## 10.2 Chemical stability

Sensitive to light

#### 10.3 Possibility of hazardous reactions

PHENYTOIN is an amide. Amides/imides react with azo and diazo compounds to generate toxic gases. Flammable gases are formed by the reaction of organic amides/imides with strong reducing agents. Amides are very weak bases (weaker than water). Imides are less basic yet and in fact react with strong bases to form salts. That is, they can react as acids. Mixing amides with dehydrating agents such as P2O5 or SOCl2 generates the corresponding nitrile. The combustion of these compounds generates mixed oxides of nitrogen (NOx). This

chemical is incompatible with strong oxidizers and strong bases. (NTP, 1992)

#### 10.4 Conditions to avoid

no data available

#### 10.5 Incompatible materials

no data available

#### 10.6 Hazardous decomposition products

When heated to decomposition it emits very toxic fumes of /nitrogen oxides/.

## 11. TOXICOLOGICAL INFORMATION

#### Acute toxicity

Oral: LD50 Rat oral 1635 mg/kg Inhalation: no data available Dermal: no data available

#### Skin corrosion/irritation

no data available

#### Serious eye damage/irritation

no data available

Respiratory or skin sensitization

no data available

Germ cell mutagenicity

no data available

#### Carcinogenicity

Classification of carcinogenicity: 1) evidence in humans: inadequate; 2) evidence in animals: sufficient. Overall summary evaluation of carcinogenic risk to humans is Group 2B: The agent is possibly carcinogenic to humans.

Reproductive toxicity

no data available

#### STOT-single exposure

no data available

#### STOT-repeated exposure

no data available

#### Aspiration hazard

no data available

#### 12. ECOLOGICAL INFORMATION

## 12.1 Toxicity

Toxicity to fish: no data available Toxicity to daphnia and other aquatic invertebrates: no data available Toxicity to algae: no data available Toxicity to microorganisms: no data available

#### 12.2 Persistence and degradability

no data available

#### 12.3 Bioaccumulative potential

An estimated BCF of 16 was calculated in fish for phenytoin(SRC), using a log Kow of 2.47(1) and a regression-derived equation(2). According to a classification scheme(3), this BCF suggests the potential for bioconcentration in aquatic organisms is low(SRC).

## 12.4 Mobility in soil

The Koc of phenytoin is estimated as 520(SRC), using a log Kow of 2.47(1) and a regression-derived equation(2). According to a classification scheme(3), this estimated Koc value suggests that phenytoin is expected to have moderate mobility in soil.

## 12.5 Other adverse effects

no data available

## 13. DISPOSAL CONSIDERATIONS

#### 13.1 Disposal methods

#### Product

The material can be disposed of by removal to a licensed chemical destruction plant or by controlled incineration with flue gas scrubbing. Do not contaminate water, foodstuffs, feed or seed by storage or disposal. Do not discharge to sewer systems.

#### Contaminated packaging

Containers can be triply rinsed (or equivalent) and offered for recycling or reconditioning. Alternatively, the packaging can be punctured to make it unusable for other purposes and then be disposed of in a sanitary landfill. Controlled incineration with flue gas scrubbing is possible for combustible packaging materials.

#### 14. TRANSPORT INFORMATION

#### 14.1 UN Number

no data available

#### 14.2 UN Proper Shipping Name

no data available

#### 14.3 Transport hazard class(es)

no data available

#### 14.4 Packing group, if applicable

no data available

#### 14.5 Environmental hazards

no data available

## 14.6 Special precautions for user

no data available

#### 14.7 Transport in bulk according to IMO instruments

no data available

## 15. **REGULATORY INFORMATION**

#### 15.1 Safety, health and environmental regulations specific for the product in question

European Inventory of Existing Commercial Chemical Substances (EINECS)	Listed.
EC Inventory	Listed.
United States Toxic Substances Control Act (TSCA) Inventory	Not Listed.
China Catalog of Hazardous chemicals 2015	Not Listed.
New Zealand Inventory of Chemicals (NZIOC)	Listed.
Philippines Inventory of Chemicals and Chemical Substances (PICCS)	Listed.
Vietnam National Chemical Inventory	Listed.
Chinese Chemical Inventory of Existing Chemical Substances (China IECSC)	Listed.
Korea Existing Chemicals List (KECL)	Listed.

#### **OTHER INFORMATION** 16.

#### Information on revision

Creation Date	August 12, 2024
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#### Abbreviations and acronyms

- CAS: Chemical Abstracts Service
- ADR: European Agreement concerning the International Carriage of Dangerous Goods by Road
- RID: Regulation concerning the International Carriage of Dangerous Goods by Rail
- IMDG: International Maritime Dangerous Goods
- IATA: International Air Transportation Association
- TWA: Time Weighted Average
- STEL: Short term exposure limit
- LC50: Lethal Concentration 50%
- LD50: Lethal Dose 50%
- EC50: Effective Concentration 50%

#### References

IPCS - The International Chemical Safety Cards (ICSC), website: http://www.ilo.org/dyn/icsc/showcard.home HSDB - Hazardous Substances Data Bank, website: https://toxnet.nlm.nih.gov/newtoxnet/hsdb.htm IARC - International Agency for Research on Cancer, website: http://www.iarc.fr/ eChemPortal - The Global Portal to Information on Chemical Substances by OECD, website: http://www.echemportal. org/echemportal/index?pageID=0&request\_locale=en CAMEO Chemicals, website: http://cameochemicals.noaa.gov/search/simple ChemIDplus, website: http://chem.sis.nlm.nih.gov/chemidplus/chemidlite.jsp ERG - Emergency Response Guidebook by U.S. Department of Transportation, website: http://www.phmsa.dot. gov/hazmat/library/erg Germany GESTIS-database on hazard substance, website: http://www.dguv.de/ifa/gestis/gestis-stoffdatenbank/index-2.jsp ECHA - European Chemicals Agency, website: https://echa.europa.eu/

#### **Other Information**

no data available

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