

# Cyclosol LA

GHS Safety Data Sheet (Conforms to Regulation (EC) No 1907/2006, Article 31.)

Issue Date: 19-Oct-2012

Version No: 2.1.1.1

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## Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

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### PRODUCT NAME

Cyclosol LA

### PRODUCT USE

Used according to manufacturer's directions.

### SUPPLIER

Company: Eurovet Animal Health BV

Address: Handelsweg 25

5531 AE Bladel

Netherlands

Telephone: +31 497544300

Fax: +31 497 544 302

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## Section 2 - HAZARDS IDENTIFICATION

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### GHS Classification

Acute Toxicity (Oral) Category 4

Carcinogen Category 2

Lactation Effects

Reproductive Toxicity Category 2

Serious Eye Damage Category 1

Skin Corrosion/Irritation Category 2

STOT - SE (Narcosis) Category 3

STOT - SE (Resp. Irr.) Category 3



### EMERGENCY OVERVIEW

#### HAZARD

#### DANGER

H302	Harmful if swallowed.
H315	Causes skin irritation.
H318	Causes serious eye damage.
H335	May cause respiratory irritation.
H336	May cause drowsiness or dizziness.
H351	Suspected of causing cancer.
H361	Suspected of damaging fertility or the unborn child.
H362	May cause harm to breast-fed children.

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## PRECAUTIONARY STATEMENTS

### Prevention

Code	Phrase
P201	Obtain special instructions before use.
P202	Do not handle until all safety precautions have been read and understood.
P260	Do not breathe dust/fume/gas/mist/vapours/spray.
P261	Avoid breathing dust/fume/gas/mist/vapours/spray.
P263	Avoid contact during pregnancy/while nursing.
P264	Wash ... thoroughly after handling.
P270	Do not eat, drink or smoke when using this product.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P281	Use personal protective equipment as required.

### Response

Code	Phrase
P301+P312	IF SWALLOWED: Call a POISON CENTER or doctor/physician if you feel unwell.
P302+P352	IF ON SKIN: Wash with plenty of soap and water.
P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.
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.
P310	Immediately call a POISON CENTER or doctor/physician.
P312	Call a POISON CENTER or doctor/physician if you feel unwell.
P330	Rinse mouth.
P332+P313	If skin irritation occurs: Get medical advice/attention.
P362	Take off contaminated clothing and wash before re-use.

### Storage

Code	Phrase
P403+P233	Store in a well-ventilated place. Keep container tightly closed.
P405	Store locked up.

### Disposal

Code	Phrase
P501	Dispose of contents/container to ...

## Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

### Composition:

Contains per ml: 216 mg oxytetracycline dihydrate (equivalent to 200 mg oxytetracycline).

NAME	CAS RN
oxytetracycline	79-57-2

## Section 4 - FIRST AID MEASURES

### SWALLOWED

- IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY.
- For advice, contact a Poisons Information Centre or a doctor.
- Urgent hospital treatment is likely to be needed.

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- In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition.

## EYE

- If aerosols come in contact with the eyes:
  - Wash out immediately with fresh 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.
  - Seek medical attention without delay; if pain persists or recurs seek medical attention.
  - Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

## SKIN

- 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.

## INHALED

- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.
- Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
- Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.

## NOTES TO PHYSICIAN

Treat symptomatically.

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## Section 5 - FIRE FIGHTING MEASURES

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### EXTINGUISHING MEDIA

- Water spray or fog.
- Foam.
- Dry chemical powder.
- BCF (where regulations permit).

### FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water course.
- Use water delivered as a fine spray to control fire and cool adjacent area.

### FIRE/EXPLOSION HAZARD

- Combustible.
- Slight fire hazard when exposed to heat or flame.
- Heating may cause expansion or decomposition leading to violent rupture of containers.
- On combustion, may emit toxic fumes of carbon monoxide (CO).

Combustion products include: carbon dioxide (CO<sub>2</sub>), nitrogen oxides (NO<sub>x</sub>), other pyrolysis products typical of burning organic material.

May emit poisonous fumes.



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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.

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## Section 6 - ACCIDENTAL RELEASE MEASURES

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### MINOR SPILLS

- Remove all ignition sources.
- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- Control personal contact with the substance, by using protective equipment.

### MAJOR SPILLS

Moderate hazard.

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water course.

**Personal Protective Equipment advice is contained in Section 8 of the MSDS.**

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## Section 7 - HANDLING AND STORAGE

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### PROCEDURE FOR HANDLING

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- Use in a well-ventilated area.
- Prevent concentration in hollows and sumps.

### SUITABLE CONTAINER

- Packaging as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.

### STORAGE INCOMPATIBILITY

- Avoid strong acids, bases.
- Avoid reaction with oxidising agents, bases and strong reducing agents.

### STORAGE REQUIREMENTS

- Store in original containers.
- Keep containers securely sealed.
- No smoking, naked lights or ignition sources.
- Store in a cool, dry, well-ventilated area.

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## Section 8 - EXPOSURE CONTROLS / PERSONAL PROTECTION

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### EXPOSURE CONTROLS

The following materials had no OELs on our records:

- oxytetracycline: CAS:79- 57- 2 CAS:6153- 64- 6

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## MATERIAL DATA

CYCLOSOL:

Not available

## PERSONAL PROTECTION

### RESPIRATOR

• Type A-P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

### EYE

- Safety glasses with side shields.
- Chemical goggles.
- 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], [AS/NZS 1336 or national equivalent].

### HANDS/FEET

- Wear chemical protective gloves, e.g. PVC.
- Wear safety footwear or safety gumboots, e.g. Rubber.

The selection of the suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.

The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.

Suitability and durability of glove type is dependent on usage.

### OTHER

- Overalls.
- P.V.C. apron.
- Barrier cream.
- Skin cleansing cream.

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## Section 9 - PHYSICAL AND CHEMICAL PROPERTIES

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### APPEARANCE

Clear liquid; mixes with water.

### PHYSICAL PROPERTIES

Liquid.

Mixes with water.

State	Liquid
Solubility in water (g/L)	Miscible
pH (10% solution)	7.5 - 8.5



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## Section 10 - CHEMICAL STABILITY AND REACTIVITY INFORMATION

### CONDITIONS CONTRIBUTING TO INSTABILITY

- Presence of incompatible materials.
- Product is considered stable.
- Hazardous polymerisation will not occur.

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

## Section 11 - TOXICOLOGICAL INFORMATION

### Health hazard summary table:

Acute toxicity	Acute Tox. (oral) 4
Skin corrosion/irritation	Skin Irrit. 2
Serious eye damage/irritation	Eye Dam. 1
Respiratory or skin sensitization	Not applicable
Germ cell mutagenicity	Not applicable
Carcinogenicity	Carc. 2
Reproductive toxicity	Lact. Repr. 2
STOT- single exposure	STOT SE 3 STOT SE 3
STOT- repeated exposure	Not applicable
Aspiration hazard	Not applicable

### POTENTIAL HEALTH EFFECTS

#### ACUTE HEALTH EFFECTS

##### SWALLOWED

- 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.
- The material may simulate the actions of GABA (gamma-aminobutyric acid), a major inhibitory neurotransmitter of the brain. Hence it inhibits the electrical activity of certain parts of the nervous systems.

##### EYE

- Although the liquid 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).

##### SKIN

- The material is not thought to be a skin irritant (as classified by EC Directives using animal models). Temporary discomfort, however, may result from prolonged dermal exposures.
- Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.
- 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 vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.

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- There is some evidence to suggest that the material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage.
- Inhalation hazard is increased at higher temperatures.
- Inhalation of high concentrations of gas/vapour causes lung irritation with coughing and nausea, central nervous depression with headache and dizziness, slowing of reflexes, fatigue and inco-ordination.

## CHRONIC HEALTH EFFECTS

- There has been concern that this material can cause cancer or mutations, but there is not enough data to make an assessment. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure.

There is some evidence from animal testing that exposure to this material may result in toxic effects to the unborn baby. Repeated or prolonged exposures to tetracyclines can cause sore throat, hoarseness, a black hairy tongue, bulky loose stools, fat in the faeces, inflammation of the mouth cavity, difficulty swallowing, damage to the anogenital area and ulcers of the oesophagus. Deposits in the eye may cause abnormal pigmentation of the conjunctivae. Tetracyclines can interfere with vitamin K function and impair blood clotting. They are deposited in the bones. If pregnant women take them, they can interfere with bone growth of the foetus. Hypersensitivity reactions include burning of the eyes, conjunctivitis, spotty and red rashes, dermatitis with sloughing, hives, itching, swollen cracked lips, an inflamed tongue, fever, asthma, fatty liver, blockage of bile, loss of platelets, neutrophils, white blood cells or all blood cells, swelling due to blood vessels and nerves, inflammation of the membranous sac surrounding the heart, exacerbation of lupus, anaphylactic shock and skin rash due to capillary bleeds. Other signs and symptoms include lung infiltrates, diabetes, temporary muscle disorders, blood poisoning, psychotic reactions and fatal liver damage. Sensitivity to light aggravated by sunlight may occur. Loosening and pigmentation of the nails may occur at the same time. Increased pressure in the head can cause swelling of the optic nerve, headache, vision impairment, and bleeding from the retina, especially in children. Pregnant women seem to be most susceptible to liver damage caused by tetracyclines. Jaundice followed by uraemia, acidosis and irreversible shock is usual. Tetracyclines are secreted in the breast milk and readily cross the placenta to affect the foetus. The foetus will show retardation of skeletal development and underdevelopment of the enamel of the teeth. Long-term use of oxytetracyclines often results in kidney damage and failure, with increased urinary output, extreme thirst, protein in the urine, acidosis, sugar and excess amino acids in the urine.

## TOXICITY AND IRRITATION

- Not available. Refer to individual constituents.

## SKIN

oxytetracycline	GESAMP/EHS Composite List - GESAMP Hazard Profiles	D1: skin irritation/corrosion (1)
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## Section 12 - ECOLOGICAL INFORMATION

No data

### Ecotoxicity

Ingredient	Persistence: Water/Soil	Persistence: Air	Bioaccumulation	Mobility
oxytetracycline	No Data Available	No Data Available	LOW	No Data Available



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## Section 13 - DISPOSAL CONSIDERATIONS

- Consult State Land Waste Authority for disposal.
  - Bury or incinerate residue at an approved site.
  - Dispose of in an authorised landfill.
- According to the European Waste Catalogue, Waste Codes are not product specific but application specific. Waste Codes should be assigned by the User based on the application in which the product is used.

## Section 14 - TRANSPORTATION INFORMATION

### HAZCHEM:

None

NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS: ADR, IATA, IMDG

## Section 15 - REGULATORY INFORMATION



### Annex I of Directive 67/548/EEC

#### RISK

Risk Codes	Risk Phrases
R22	■ Harmful if swallowed.
R37/38	■ Irritating to respiratory system and skin.
R40(3)	■ Limited evidence of a carcinogenic effect.
R41	■ Risk of serious damage to eyes.
R63(3)	■ Possible risk of harm to the unborn child.

#### SAFETY

Safety Codes	Safety Phrases
S23	■ Do not breathe gas/ fumes/ vapour/ spray.
S24	■ Avoid contact with skin.
S25	■ Avoid contact with eyes.
S36	■ Wear suitable protective clothing.
S37	■ Wear suitable gloves.
S39	■ Wear eye/ face protection.
S53	■ Avoid exposure - obtain special instructions before use.
S40	■ To clean the floor and all objects contaminated by this material, use water.
S13	■ Keep away from food, drink and animal feeding stuffs.
S26	■ In case of contact with eyes, rinse with plenty of water and contact Doctor or Poisons Information Centre.
S46	■ If swallowed, IMMEDIATELY contact Doctor or Poisons Information Centre (show this container or label).

### Annex II of Directive 67/548/EEC: Indications of Danger

Xn Harmful



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## REGULATIONS

No data for Cyclosol LA.

This safety data sheet is in compliance with the following EU legislation and its adaptations – as far as applicable - : 67/548/EEC, 1999/45/EC, 98/24/EC, 92/85/EEC, 94/33/EC, 91/689/EEC, 1999/13/EC, Regulation (EU) No 453/2010, Regulation (EC) No 1907/2006, Regulation (EC) No 1272/2008, and their amendments.

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## Section 16 - OTHER INFORMATION

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### INGREDIENTS WITH MULTIPLE CAS NUMBERS

Ingredient Name	CAS
oxytetracycline	79-57-2, 6153-64-6

■ 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.

■ For detailed advice on Personal Protective Equipment, refer to the following EU CEN Standards:

EN 16 Personal eye-protection

EN 340 Protective clothing

EN 374 Protective gloves against chemicals and micro-organisms

EN 13832 Footwear protecting against chemicals

EN 133 Respiratory protective devices.

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