

SECTION-1: Identification of the substance / mixture and the company / undertaking

Catalogue Number	CS-O-48342
Product Name	Clortermine
CAS No.	10389-73-8
Category	Metabolite
Synonyms	1-(o-Chlorophenyl)-2-methyl-2-propylamine
Brand	Clearsynth Labs Ltd.
Identified uses	Laboratory Chemicals
Uses advised against	Not available
Company	Clearsynth Labs Ltd. Mumbai, India
Emergency Phone #	+91-22-245045900
REACH No.	Not available

SECTION 2: Hazards identification

Disclaimer: This is sample MSDS. Please email sales@clearsynth.com for more details.

2.1 Classification of the substance or mixture-Regulation (EC) No 1272/2008:

Not available

2.2 Label Elements

Signal Word: Not available

Not available

Hazard Statement(s)

Code	Statement
Not available	Not available

Precautionary Statement(s)

Code	Statement
Not available	Not available

SECTION 3: Composition / information on ingredients

3.1 Substance

Component : Clortermine
CAS Number : 10389-73-8
Molecular Formula : C₁₀H₁₄CIN
Molecular Weight : 183.68
Parent Chemical : -
Synonyms : 1-(o-Chlorophenyl)-2-methyl-2-propylamine
Concentration : Not available

SECTION 4: First aid measures

SECTION 4: First-aid measures

4.1 Description of first aid measures

General advice: Seek medical attention if symptoms occur or persist. Show this Safety Data Sheet to the physician.

Inhalation: Move person to fresh air. If breathing is difficult, seek medical attention.

Skin contact: Wash with plenty of soap and water. Remove contaminated clothing and wash before reuse. Seek medical attention if irritation develops.

Eye contact: Rinse cautiously with water for several minutes. Remove contact lenses if present and easy to do. Continue rinsing. Seek medical attention.

Ingestion: Rinse mouth. Do NOT induce vomiting unless directed by medical personnel. Never give anything by mouth to an unconscious person. Seek medical attention.

4.2 Most important symptoms and effects, both acute and delayed

Not available.

4.3 Indication of any immediate medical attention and special treatment needed

Treat symptomatically. No data available.

SECTION 5: Firefighting measures

SECTION 5: Fire-fighting measures

5.1 Extinguishing media

Suitable extinguishing media: Use extinguishing measures appropriate to local circumstances and the surrounding environment (e.g., water spray, alcohol-resistant foam, dry chemical, carbon dioxide).

Unsuitable extinguishing media: Not available.

5.2 Special hazards arising from the substance or mixture

Hazardous combustion products: Not available. Thermal decomposition may produce irritating and/or toxic fumes.

5.3 Advice for firefighters

Wear self-contained breathing apparatus (SCBA) and full protective gear. Use water spray to cool unopened containers. Avoid inhalation of combustion products.

SECTION 6: Accidental release measures

SECTION 6: Accidental release measures

6.1 Personal precautions, protective equipment and emergency procedures

Avoid breathing dust/vapors/mist. Avoid contact with skin and eyes. Provide adequate ventilation. Use appropriate personal protective equipment.

6.2 Environmental precautions

Avoid release to the environment. Prevent further leakage or spillage if safe to do so. Do not allow to enter drains, surface water, or soil.

6.3 Methods and material for containment and cleaning up

Contain spill. Collect spilled material using methods that minimize dust generation. Place in a suitable, closed container for disposal. Clean contaminated area with water and detergent as appropriate.

6.4 Reference to other sections

See Section 8 for personal protective equipment and Section 13 for disposal considerations.

SECTION-7: Handling and storage

SECTION 7: Handling and storage

7.1 Precautions for safe handling

Handle in accordance with good industrial hygiene and safety practice. Avoid contact with skin, eyes, and clothing. Avoid breathing dust/vapors. Use with adequate ventilation. Wash hands thoroughly after handling.

7.2 Conditions for safe storage, including any incompatibilities

Store tightly closed in original container in a cool, dry, well-ventilated place. Protect from moisture. Keep away from incompatible materials.

Incompatible materials: Not available.

7.3 Specific end use(s)

For laboratory/research use only. Not available for other uses.

SECTION 8: Exposure controls / personal protection

SECTION 8: Exposure controls/personal protection

8.1 Control parameters

Occupational exposure limits: Not available.

Biological limit values: Not available.

8.2 Exposure controls

Engineering controls: Use local exhaust ventilation or general ventilation to minimize exposure.

Personal protective equipment (PPE):

- Eye/face protection: Safety glasses with side shields or chemical goggles.
- Skin protection: Protective gloves (material not available). Wear protective clothing as appropriate.
- Respiratory protection: If ventilation is inadequate or exposure is possible, use a NIOSH/EN-approved respirator appropriate for the hazard (type not available).
- Hygiene measures: Wash hands after handling. Remove contaminated clothing and wash before reuse.

SECTION 9: Physical and chemical properties

9.1 Information on basic physical and chemical properties

Test	Result
Appearance	No data available
IR spectrum	No data available
pH	No data available
Solubility	No data available

Property	Value
a) Physical State	No data available
b) Color	No data available
c) Odor	No data available
d) pH	No data available
e) Vapour Pressure	No data available
f) Viscosity	No data available
g) Initial Boiling Point and boiling range	No data available
h) Melting Point / Freezing Point	No data available
i) Auto Ignition Temperature	No data available
j) Flash Point	No data available
k) Explosion Limit, Lower	No data available
l) Explosion Limit, Upper	No data available
m) Decomposition Temperature	No data available
n) Loss on Drying	No data available
o) Relative Density	No data available
p) Solubility (in DMSO)	No data available
q) Oxidizing Properties	No data available

SECTION 10: Stability and reactivity

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10.1 Reactivity

No data available.

10.2 Chemical stability

Stable under recommended storage conditions.

10.3 Possibility of hazardous reactions

No data available.

10.4 Conditions to avoid

Heat, open flames, and other ignition sources (if applicable). Avoid dust generation. Other conditions: Not available.

10.5 Incompatible materials

Not available.

10.6 Hazardous decomposition products

Not available. May emit irritating and/or toxic fumes upon decomposition/combustion.

SECTION 11: Toxicological information

11.1 Information on toxicological effects

- Acute toxicity: Main risks and target organs: Acute central nervous system stimulation, cardiotoxicity causing tachycardia, arrhythmias, hypertension and cardiovascular collapse. High risk of dependency and abuse. Summary of clinical effects: Cardiovascular: Palpitation, chest pain, tachycardia, arrhythmias and hypertension are common; cardiovascular collapse can occur in severe poisoning. Myocardial ischaemia, infarction and ventricular dysfunction are described. Central Nervous System (CNS): Stimulation of CNS, tremor, restlessness, agitation, insomnia, increased motor activity, headache, convulsions, coma and hyperreflexia are described. Stroke and cerebral vasculitis have been observed. Gastrointestinal: Vomiting, diarrhea and cramps may occur. Genitourinary: Increased bladder sphincter tone may cause dysuria, hesitancy and acute urinary retention. Renal failure can occur secondary to dehydration or rhabdomyolysis. Renal ischemia may be noted. Dermatologic: Skin is usually pale and diaphoretic, but mucous membranes appear dry. Endocrine: Transient hyperthyroxinemia may be noted. Metabolism: Increased metabolic and muscular activity may result in hyperventilation and hyperthermia. Weight loss is common with chronic use. Fluid/Electrolyte: Hypo- and hyperkalemia have been reported. Dehydration is common.

Musculoskeletal: Fasciculations and rigidity may be noted. Rhabdomyolysis is an important consequence of severe poisoning. Psychiatric: Agitation, confusion, mood elevation, increased wakefulness, talkativeness, irritability and panic attacks are typical. Chronic abuse can cause delusions and paranoia. A withdrawal syndrome occurs after abrupt cessation following chronic use.

- Skin corrosion/irritation: No data available.

- Serious eye damage/eye irritation: No data available.

- Respiratory or skin sensitization: No data available.

- Germ cell mutagenicity: No data available.

- Carcinogenicity: No data available.

- Reproductive toxicity: Teratogenicity: Use of the compound for medical indications does not pose a significant risk to the fetus for congenital anomalies. Mild withdrawal symptoms may be observed in the newborn, but the few studies of infant follow-up have not shown long-term sequelae, although more studies of this nature are needed. Illicit maternal use or abuse presents a significant risk to the fetus and newborn, including intrauterine growth retardation, premature delivery and the potential for increased maternal, fetal and neonatal morbidity. These poor outcomes are probably multifactorial in origin, involving multiple drug use, life-styles and poor maternal health. However, cerebral injuries occurring in newborns exposed in utero appear to be directly related to the vasoconstrictive properties of the compound. Those children exposed throughout pregnancy tended to be more aggressive.

- STOT-single exposure: Main risks and target organs: Acute central nervous system stimulation, cardiotoxicity causing tachycardia, arrhythmias, hypertension and cardiovascular collapse. Summary of clinical effects:

Cardiovascular: Palpitation, chest pain, tachycardia, arrhythmias and hypertension are common; cardiovascular collapse can occur in severe poisoning. Myocardial ischaemia, infarction and ventricular dysfunction are described. Central Nervous System (CNS): Stimulation of CNS, tremor, restlessness, agitation, insomnia, increased motor activity, headache, convulsions, coma and hyperreflexia are described. Stroke and cerebral vasculitis have been observed. Gastrointestinal: Vomiting, diarrhea and cramps may occur. Genitourinary: Increased bladder sphincter tone may cause dysuria, hesitancy and acute urinary retention. Renal failure can occur secondary to dehydration or rhabdomyolysis. Renal ischemia may be noted. Dermatologic: Skin is usually pale and diaphoretic, but mucous membranes appear dry. Endocrine: Transient hyperthyroxinemia may be noted. Metabolism: Increased metabolic and muscular activity may result in hyperventilation and hyperthermia. Fluid/Electrolyte: Hypo- and hyperkalemia have been reported. Dehydration is common. Musculoskeletal: Fasciculations and rigidity may be noted. Rhabdomyolysis is an important consequence of severe poisoning. Psychiatric: Agitation, confusion, mood elevation, increased wakefulness, talkativeness, irritability and panic attacks are typical.

- STOT-repeated exposure: High risk of dependency and abuse. Weight loss is common with chronic use. Chronic abuse can cause delusions and paranoia. A withdrawal syndrome occurs after abrupt cessation following chronic use.

- Aspiration hazard: No data available.

Likely routes of exposure

- Oral: Readily absorbed from the gastro-intestinal tract and buccal mucosa. Inhalation: Rapidly absorbed by inhalation and is abused by this route. Parenteral: Frequent route of entry in abuse situations.

Symptoms related to the physical, chemical and toxicological characteristics

- Cardiovascular: Palpitation, chest pain, tachycardia, arrhythmias and hypertension; cardiovascular collapse can occur in severe poisoning; myocardial ischaemia, infarction and ventricular dysfunction. Central Nervous System (CNS): Stimulation of CNS, tremor, restlessness, agitation, insomnia, increased motor activity, headache, convulsions, coma and hyperreflexia; stroke and cerebral vasculitis. Gastrointestinal: Vomiting, diarrhea and cramps. Genitourinary: Dysuria, hesitancy and acute urinary retention; renal failure secondary to dehydration or rhabdomyolysis; renal ischemia. Dermatologic: Skin usually pale and diaphoretic; mucous membranes dry. Endocrine: Transient hyperthyroxinemia. Metabolism: Hyperventilation and hyperthermia; weight loss with chronic use. Fluid/Electrolyte: Hypo- and hyperkalemia; dehydration. Musculoskeletal: Fasciculations and rigidity; rhabdomyolysis. Psychiatric: Agitation, confusion, mood elevation, increased wakefulness, talkativeness, irritability and panic attacks; chronic abuse can cause delusions and paranoia; withdrawal syndrome after abrupt cessation following chronic use.

SECTION 12: Ecological information

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12.1 Toxicity

Not available.

12.2 Persistence and degradability

Not available.

12.3 Bioaccumulative potential

Not available.

12.4 Mobility in soil

Not available.

12.5 Results of PBT and vPvB assessment

Not available.

12.6 Endocrine disrupting properties

Not available.

12.7 Other adverse effects

Not available.

SECTION 13: Disposal considerations

SECTION 13: Disposal considerations

13.1 Waste treatment methods

Dispose of contents/container in accordance with local/regional/national/international regulations. Do not discharge to drains.

Recommended disposal method: Not available; treat as hazardous chemical waste unless determined otherwise by competent authority.

Contaminated packaging: Dispose of as unused product.

SECTION 14: Transport information

SECTION 14: Transport information

14.1 UN number

Not available.

14.2 UN proper shipping name

Not available.

14.3 Transport hazard class(es)

Not available.

14.4 Packing group

Not available.

14.5 Environmental hazards

Not available.

14.6 Special precautions for user

Not available.

14.7 Maritime transport in bulk according to IMO instruments

Not available.

SECTION 15: Regulatory information

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

Not available.

15.2 Chemical safety assessment

Not available.

SECTION 16: Other information

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CAS No.: 10389-73-8

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Emergency phone: +91-22-245045900

Disclaimer: The information provided is believed to be accurate based on available data, but no warranty is expressed or implied. Users are responsible for determining suitability for their particular application and for compliance with applicable laws and regulations.

Revision date: Not available.

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