

SAFETY DATA SHEET

1. Identification

Product identifier Thioridazine Hydrochloride

Other means of identification

Catalog number 1663008

Chemical name 10H-Phenothiazine, 10-[2-(1-methyl-2-piperidinyl)ethyl]-2-(methylthio)-, monohydrochloride

Recommended use Specified quality tests and assay use only.

Recommended restrictions Not for use as a drug. Not for administration to humans or animals.

Manufacturer/Importer/Supplier/Distributor information

Company name U. S. Pharmacopeia **Address** 12601 Twinbrook Parkway

Rockville

MD

20852-1790

US

Telephone RS Technical Services 301-816-8129

Website www.usp.org

E-mail RSTECH@usp.org

CHEMTREC within US & **Emergency phone number** 1-800-424-9300

Canada

Canada

CHEMTREC outside US &

+1 703-527-3887

2. Hazard(s) identification

Physical hazards Not classified.

Health hazards Acute toxicity, oral Category 4

Specific target organ toxicity, single

exposure

Category 1 (heart)

Category 1 (nervous system)

Specific target organ toxicity, repeated exposure

OSHA hazard(s) Not classified.

Label elements



Signal word Danger

Harmful if swallowed. Causes damage to organs (heart). Causes damage to organs (nervous **Hazard statement**

system) through prolonged or repeated exposure.

Precautionary statement

Prevention Wash thoroughly after handling.

Response If swallowed: Call a poison center/doctor if you feel unwell. Rinse mouth. If exposed: Call a poison

center/doctor. Get medical advice/attention if you feel unwell.

Storage Store locked up.

Disposal Dispose of contents/container in accordance with local/regional/national/international regulations.

Hazard(s) not otherwise

classified (HNOC)

Not classified.

3. Composition/information on ingredients

Substance

Hazardous components

Chemical name Common name and synonyms **CAS** number % Thioridazine Hydrochloride 100 130-61-0

Material name: Thioridazine Hydrochloride USP SDS US

4. First-aid measures

Inhalation

Move to fresh air. Call a physician if symptoms develop or persist.

Skin contact

Wash off with soap and plenty of water. Get medical attention if irritation develops and persists.

Eye contact

Immediately flush eyes with plenty of water for at least 15 minutes. Remove contact lenses, if present and easy to do. Continue rinsing. Get medical attention if irritation develops and persists.

Ingestion

Rinse mouth thoroughly. IF SWALLOWED: Immediately call a POISON CENTER or

doctor/physician.

Most important

symptoms/effects, acute and

delayed

Narcosis. Decrease in motor functions. Behavioral changes.

Indication of immediate medical attention and special treatment needed

Treatment of phenothiazine overdose should be symptomatic and supportive.

- 1. Do NOT induce vomiting. Perform gastric lavage. Administer activated charcoal as a slurry.
- 2. Control cardiac arrhythmias with intravenous phenytoin. Treat ventricular tachydysrhythmias with sodium bicarbonate.
- 3. For Torsades de Pointes, treat hemodynamically unstable patients with electrical cardioversion. Treat stable patients with magnesium and/or atrial overdrive pacing. Correct electrolyte abnormalities.
- 4. Treat hypotension with positioning, intravenous fluids, and norepinephrine or phenylephrine. Do NOT use epinephrine.
- 5. Treat convulsions with a benzodiazepine and phenytoin. Monitor ECG. Do NOT use barbiturates that may potentiate respiratory and CNS depression.
- 6. For parkinsonian effects or dystonia, administer benztropine or diphenhydramine.
- 7. Treat neuroleptic malignant syndrome with cooling and bromocriptine.
- 8. Monitor acid-base status, fluid and electrolyte balance, hepatic enzymes, renal function, urine output, and cardiac function.
- 9. Most phenothiazines are not removed by dialysis. [Meditext; USP DI]

General information

Remove from exposure. Remove contaminated clothing. For treatment advice, seek guidance from an occupational health physician or other licensed health-care provider familiar with workplace chemical exposures. In the United States, the national poison control center phone number is 1-800-222-1222. If person is not breathing, give artificial respiration. If breathing is difficult, give oxygen if available. Persons developing serious hypersensitivity (anaphylactic) reactions must receive immediate medical attention.

5. Fire-fighting measures

Suitable extinguishing media

Water spray, dry chemical, carbon dioxide, or foam as appropriate for surrounding fire and

As with all fires, evacuate personnel to a safe area. Firefighters should use self-contained

materials.

Unsuitable extinguishing

media

None known.

Specific hazards arising from

the chemical

No unusual fire or explosion hazards noted.

Special protective equipment and precautions for firefighters

Fire-fighting

Wear suitable protective equipment.

equipment/instructions

breathing equipment and protective clothing. Cool containers exposed to flames with water until well after the fire is out.

Specific methods

6. Accidental release measures

Personal precautions, protective equipment and emergency procedures

Keep unnecessary personnel away. Do not touch damaged containers or spilled material unless wearing appropriate protective clothing. Avoid inhalation of dust from the spilled material. Ensure adequate ventilation. Wear appropriate personal protective equipment.

Methods and materials for containment and cleaning up

Sweep up or vacuum up spillage and collect in suitable container for disposal. Avoid the generation of dusts during clean-up. For waste disposal, see section 13 of the SDS. Wash spill site.

7. Handling and storage

Precautions for safe handling

As a general rule, when handling USP Reference Standards, avoid all contact and inhalation of dust, mists, and/or vapors associated with the material. Clean equipment and work surfaces with suitable detergent or solvent after use. After removing gloves, wash hands and other exposed skin thoroughly. Use of a designated area is recommended for handling of potent materials.

Conditions for safe storage, including any incompatibilities

Store in tight container as defined in the USP-NF. This material should be handled and stored per label instructions to ensure product integrity.

8. Exposure controls/personal protection

Biological limit values

No biological exposure limits noted for the ingredient(s).

Exposure guidelines

No exposure standards allocated.

Appropriate engineering controls

Airborne exposure should be controlled primarily by engineering controls such as general dilution ventilation, local exhaust ventilation, or process enclosure. Local exhaust ventilation is generally preferred to general exhaust because it can control the contaminant at its source, preventing dispersion into the work area. An industrial hygiene survey involving air monitoring may be used to determine the effectiveness of engineering controls. Effectiveness of engineering controls intended for use with highly potent materials should be assessed by use of nontoxic surrogate materials

Local exhaust ventilation such as a laboratory fume hood or other vented enclosure is recommended, particularly for grinding, crushing, weighing, or other dust-generating procedures.

Individual protection measures, such as personal protective equipment

Safety glasses with sideshields are recommended. Face shields or goggles may be required if Eye/face protection

splash potential exists or if corrosive materials are present. Approved eye protection (e.g., bearing

the ANSI Z87 or CSA stamp) is preferred. Maintain eyewash facilities in the work area.

Skin protection

Respiratory protection

Hand protection Chemically compatible gloves. For handling solutions, ensure that the glove material is protective

against the solvent being used. Use handling practices that minimize direct hand contact.

Employees who are sensitive to natural rubber (latex) should use nitrile or other synthetic nonlatex

gloves. Use of powdered latex gloves should be avoided due to the risk of latex allergy.

Other For handling of laboratory scale quantities, a cloth lab coat is recommended. Where significant quantities are handled, work clothing may be necessary to prevent take-home contamination.

Where respirators are deemed necessary to reduce or control occupational exposures, use

NIOSH-approved respiratory protection and have an effective respirator program in place

(applicable U.S. regulation OSHA 29 CFR 1910.134).

Thermal hazards

General hygiene considerations

Handle in accordance with good industrial hygiene and safety practice.

9. Physical and chemical properties

Appearance White to slightly yellow, granular powder.

Physical state Solid. Form Powder. Odor Faint odor. **Odor threshold** Not available. Not available.

318.2 - 329 °F (159 - 165 °C) Melting point/freezing point

Initial boiling point and boiling

range

Not available.

Not available. Flash point **Evaporation rate** Not available. Flammability (solid, gas) Not applicable.

Upper/lower flammability or explosive limits

Flammability limit - lower (%)

Not available.

Flammability limit - upper

Not available.

Not available. **Explosive limit - lower (%)** Explosive limit - upper (%) Not available. Not available. Vapor density

Relative density Not available. Solubility in water Freely soluble.

Partition coefficient 5.637 (n-octanol/water)

Auto-ignition temperature

Decomposition temperature

Not available. Not available. Not available.

Other information

Viscosity

Chemical family Piperidine phenothiazine. C21H26N2S2 . HCI Molecular formula

Molecular weight 407.04

4.2 - 5.2 (1% solution) pH in aqueous solution

Solubility (other)

Freely soluble in ethanol, in methanol, and in chloroform; soluble in dimethyl sulfoxide; slightly

soluble in benzene; insoluble in ether.

10. Stability and reactivity

Reactivity No reactivity hazards known.

Chemical stability Material is stable under normal conditions.

Possibility of hazardous

reactions

No dangerous reaction known under conditions of normal use.

Conditions to avoid None known.

Incompatible materials Strong oxidizing agents.

Hazardous decomposition

products

SOx, NOx, HCI. Irritating and/or toxic fumes or gases. Emits toxic fumes under fire conditions.

11. Toxicological information

Information on likely routes of exposure

Ingestion Harmful if swallowed.

InhalationDue to lack of data the classification is not possible.Skin contactDue to lack of data the classification is not possible.Eye contactDue to lack of data the classification is not possible.

Symptoms related to the physical, chemical, and toxicological characteristics

For phenothiazines: Abnormal heartbeat. Sudden death. Involuntary movement (muscle spasms; uncontrolled body movements; difficulty breathing, speaking, or swallowing; loss of balance; trembling or shaking hands and fingers; shuffling walk; unusual facial expressions; eyelid spasms; twisting of neck, trunk, arms, or legs). Rigidity. Weakness. Incoordination. Dizziness. Drowsiness.

Disorientation. Pinpoint pupils. Yellow eyes and/or skin. Dry mouth. Constipation. Nasal congestion. Decreased sweating. Difficulty urinating. Increased sensitivity of skin or eyes to sunlight. Skin rash. Skin discoloration. Changes in menstrual period. Swelling or pain in breasts or milk secretion. Weight gain. Vomiting. Convulsions. Coma.

__

Delayed and immediate effects

of exposure

Phenothiazines: Coma. Extrapyramidal effects. Low blood pressure. Hypothermia or

hyperthermia. Central nervous system toxicity. Cardiac toxicity. Respiratory depression. Sudden

death.

Chronic effects For phenothiazines: Skin and eye discoloration. Tardive dyskinesia.

Cross sensitivity Persons sensitive to any other phenothiazine may be sensitive to this material also.

Medical conditions aggravated

by exposure

Porphyria. Lowered levels of P450 2D6 isozyme activity.

Phenothiazines: Active alcoholism. Blood, liver, kidney, respiratory, or cardiovascular disorders. Pheochromocytoma. History of convulsive disorders, brain damage, neuroleptic malignant syndrome, or dermatoses. Acquired immune deficiency syndrome (AIDS). Glaucoma. Parkinson's

disease. Reye's syndrome. Breast cancer. Hypocalcemia. Exposure to extreme heat or

phosphorus insecticides.

Acute toxicity Harmful if swallowed.

Product Species Test Results

Thioridazine Hydrochloride (CAS 130-61-0)

Acute Oral

LD50 Dog 160 mg/kg

 Mouse
 385 mg/kg

 Rabbit
 1100 mg/kg

 Rat
 1060 mg/kg

Skin corrosion/irritationDue to lack of data the classification is not possible. **Serious eye damage/eye**Due to lack of data the classification is not possible.

irritation

Due to lack of data the diagonication is not possible

Respiratory sensitizationDue to lack of data the classification is not possible. **Skin sensitization**Due to lack of data the classification is not possible.

Germ cell mutagenicity Based on available data, the classification criteria are not met.

Mutagenicity

Drosophila heritable translocation assay

Result: Positive

In vitro studies with human lymphocytes

Result: No increase in the frequency of chromosome

aberrations

Material name: Thioridazine Hydrochloride

USP SDS US

7395 Version #: 03 Revision date: 07-21-2015 Issue date: 04-25-2008

Mutagenicity

In vivo studies in mice

Result: No increase in the frequency of chromosome aberrations in germ cells, micronucleii, or sperm head abnormalities.

Carcinogenicity

Based on available data, the classification criteria are not met.

This product is not considered to be a carcinogen by IARC, ACGIH, NTP, or OSHA.

Phenothiazines produce an elevation in prolactin concentrations. In vitro studies show about 1/3 of human breast cancers are prolactin-dependent. Studies in rodents found an increase in mammary tumors after long-term administration of antipsychotic medications. Early epidemiological studies did not show an association between chronic administration of

antipsychotics and breast cancer in women. A later study found a modest dose-related increased risk of breast cancer in women using antipsychotic dopamine antagonists. The available evidence

is inconclusive.

Reproductive toxicity Based on available data, the classification criteria are not met.

There have been reports of prolonged jaundice, under or overactive reflexes, movement

disorders, and withdrawal effects (runny nose, vomiting, difficulty breathing) in newborns exposed

to phenothiazines in utero.

A related material did not cause birth defects in animal studies.

Specific target organ toxicity -

single exposure

Causes damage to organs (heart).

Specific target organ toxicity -

repeated exposure

Causes damage to organs (nervous system) through prolonged or repeated exposure.

Based on available data, the classification criteria are not met. **Aspiration hazard**

12. Ecological information

Ecotoxicity

Product Species Test Results

Thioridazine Hydrochloride (CAS 130-61-0)

Acute

Crustacea EC50 0.76 mg/l, 24 hours Daphnia magna

Persistence and degradability No data is available on the degradability of this product.

Bioaccumulative potential Not available. Mobility in soil Not available. Other adverse effects Not available.

13. Disposal considerations

Disposal instructions This product, in its present state, when discarded or disposed of, is not a hazardous waste

according to Federal regulations (40 CFR 261.4 (b)(4)). Under RCRA, it is the responsibility of the user of the product to determine, at the time of disposal, whether the product meets RCRA

criteria for hazardous waste. Dispose in accordance with all applicable regulations.

Local disposal regulations

Hazardous waste code

Not available. Not available.

Waste from residues / unused

products

Empty containers or liners may retain some product residues. This material and its container must be disposed of in a safe manner (see: Disposal instructions).

Contaminated packaging Empty containers should be taken to an approved waste handling site for recycling or disposal.

Since emptied containers may retain product residue, follow label warnings even after container is

emptied.

14. Transport information

DOT

Not regulated as a hazardous material by DOT.

ΙΔΤΔ

Not regulated as a dangerous good.

Transport in bulk according to Annex II of MARPOL 73/78 and the IBC Code

No information available.

15. Regulatory information

US federal regulations CERCLA/SARA Hazardous Substances - Not applicable.

One or more components are not listed on TSCA.

7395 Version #: 03 Revision date: 07-21-2015 Issue date: 04-25-2008

Superfund Amendments and Reauthorization Act of 1986 (SARA)

Hazard categories Immediate Hazard - Yes

Delayed Hazard - Yes Fire Hazard - No Pressure Hazard - No Reactivity Hazard - No

SARA 302 Extremely

hazardous substance

No

SARA 311/312 Hazardous chemical

Other federal regulations

Safe Drinking Water Act

Not regulated.

(SDWA)

J

Food and Drug Administration (FDA) Not regulated.

US state regulations

California Safe Drinking Water and Toxic Enforcement Act of 1986 (Proposition 65): This material is not known to contain any chemicals currently listed as carcinogens or reproductive toxins.

International Inventories

Country(s) or region	Inventory name	On inventory (yes/no)*
Australia	Australian Inventory of Chemical Substances (AICS)	Yes
Canada	Domestic Substances List (DSL)	Yes
Canada	Non-Domestic Substances List (NDSL)	No
China	Inventory of Existing Chemical Substances in China (IECSC)	No
Europe	European Inventory of Existing Commercial Chemical Substances (EINECS)	Yes
Europe	European List of Notified Chemical Substances (ELINCS)	No
Japan	Inventory of Existing and New Chemical Substances (ENCS)	No
Korea	Existing Chemicals List (ECL)	Yes
New Zealand	New Zealand Inventory	Yes
Philippines	Philippine Inventory of Chemicals and Chemical Substances (PICCS)	No
United States & Puerto Rico	Toxic Substances Control Act (TSCA) Inventory	No

^{*}A "Yes" indicates that all components of this product comply with the inventory requirements administered by the governing country(s)

16. Other information, including date of preparation or last revision

 Issue date
 04-25-2008

 Revision date
 07-21-2015

Version # 03

Further information Not available.

Disclaimer USP Reference Standards are sold for chemical test and assay purposes only, and NOT for

human consumption. The information contained herein is applicable solely to the chemical substance when used as a USP Reference Standard and does not necessarily relate to any other use of the substance described, (i.e. at different concentrations, in drug dosage forms, or in bulk quantities). USP Reference Standards are intended for use by persons having technical skill and at their own discretion and risk. This information has been developed by USP staff from sources considered reliable but has not been independently verified by the USP. Therefore, the USP Convention cannot guarantee the accuracy of the information in these sources nor should the statements contained herein be considered an official expression. NO REPRESENTATION OR WARRANTY, EXPRESS OR IMPLIED, INCLUDING THE WARRANTIES OF MERCHANTABILITY

AND FITNESS FOR A PARTICULAR PURPOSE is made with respect to the information

contained herein.

Revision Information Hazard(s) identification: <INDENT>Response

First-aid measures: General information

Toxicological information: Medical conditions aggravated by exposure

Toxicological information: Acute toxicity

Toxicological information: Symptoms related to the physical, chemical, and toxicological

characteristics

Toxicological information: Delayed and immediate effects of exposure

Regulatory Information: United States

Material name: Thioridazine Hydrochloride

USP SDS US