View NSN Online: https://aerobasegroup.gr/nsn/6505-01-308-7697

LYPHOMED INC

-- DEXTROSE INJECTION

MSDS Safety Information

FSC: 6505

NIIN: 01-308-7697 MSDS Date: 01/01/1994 MSDS Num: BXBRR

Product ID: DEXTROSE INJECTION

MFN: 02

Responsible Party Cage: IO580

Name: LYPHOMED INC Address: 2020 RUBY ST

City: MELROSE PARK IL 60160-1112

Info Phone

Number: 312-345-6170

Emergency Phone Number: 312-345-6170 Preparer's Name: CHRISTINA J. BARRINGTON

Review Ind: Y Published: Y

Contractor Summary

Cage: 0K706

Name: FUJISAWA USA, INC. Address: 3 PARKWAY NORTH City: DEERFIELD IL 60015-2548

Phone: 708-317-0800 OR 800-888-7704

Cage: IO580

Name: LYPHOMED INC

Address: 10401 W TOUHY AVE City: ROSEMONT IL 60018

Phone: 312-450-7569;312-450-750

0

Cage: 60567

Name: LYPHOMED INC DIV OF FUJISAWA USA INC

Address: 2020 RUBY ST

City: MELROSE PARK IL 60160-1112

Phone: 312-345-6170

Item Description Information

Item Name: DEXTROSE INJECTION,USP

Type of Container: UNKNOWN

Ingredients

Cas: 50-99-7

Name: DEXTROSE % Wt: UNKNO

WN

Other REC Limits: NONE RECOMMENDED

OSHA PEL: NOT ESTABLISHED ACGIH TLV: NOT ESTABLISHED

Cas: 7732-18-5

RTECS #: ZC0110000

Name: WATER FOR INJECTION

% Wt: UNKNOWN

Other REC Limits: NONE RECOMMENDED

OSHA PEL: NOT ESTABLISHED ACGIH TLV: NOT ESTABLISHED

Health Hazards Data

LD50 LC50 Mixture: ORAL LD50 (RAT) IS UNKNOWN

Route Of Entry Inds - Inhalation: YES

Skin: YES Ingestion: YES

Carcinogenicity Inds - NTP: NO

IARC: NO OSHA: NO

Effects of Exposure: IMMEDIATE EFFECTS: EYE, SKIN AND RESPIRATORY MAY OCCUR.

DELAYED EFFECTS: NONE.

Explanation Of Carcinogenicity: NOT CARCINOGENIC.

Signs And Symptions Of Overexposure: THIS PRODUCT IS INTENDED FOR THERAPUTIC USE ONLY WHEN PRESCRIBED BY A PHYSICIAN. POTENTIAL ADVERSE REACTIONS FROM PRESCRIBED DOSES AND OVERDOSES ARE DESCRIBED IN THE PACKAGE INSERT. OCCUPATIONAL EXPOS URE HAS NOT BEEN FULLY INVEST

IGATED.

Medical Cond Aggravated By Exposure: PRE-EXISTING SKIN AND RESPIRATORY CONDITIONS.

First Aid: INHALATION-MOVE PERSON TO FRESH AIR IMMEDIATELY. GIVE ARTIFICIAL RESPIRATION AND CARDIOPULMONARY RESUSCITATION (CPR) IF REQUIRED. SEEK MEDICAL ATTENTION. INGESTION-FLUSH MOUTH OUT WITH WATER IMMEDIATE LY. SEEK MEDICAL ATTENTION. SKIN-REMOVECONTAMINATED CLOTHING. FLUSH AREA WITH WATER FOR AT LEAST 15 MIN. SEEK MEDICAL ATTENTION. EYE-IMMEDIATELY FLUSH WITH WATER FOR AT LEAST 15 MIN. SE

EK PHYSICIAN.

Handling and Disposal

Spill Release Procedures: WEAR RECOMMENDED PERSONAL PROTECTOVE EQUIPMENT. USE ABSORBENT TOWELS OR BOOMS TO CLEAN-UP SPILL. WIPE SURFACE CLEAN AND WASH WITH SOAP AND WATER.

Waste Disposal Methods: DISPOSE OF IN ACCORDANCE WITH FEDERAL, STATE AND LOCAL REGULATIONS.

Handling And Storage Precautions: WHEN HANDLING PHARMACEUTICAL PRODUCTS, AVOID

LL CONTACT AND INHALATION OF DUST, FUMES, MIST, AND/OR VAPOR ASSOCIATED WITH THE PRODUCT.

Other Precautions: FOR ADVERSE DRUG REACTION INFORMATION CALL (708) 317-5937.

Fire and Explosion Hazard Information

Flash Point Method: CC

Flash Point Text: >200F,>93C

Lower Limits: NE Upper Limits: NE

Extinguishing Media: WATER SPRAY, DRY CHEMICAL, CARBON DIOXIDE OR FOAM AS

APPROPIATE

Fire Fighting Procedures: WEAR SELF-CONTAINED BREATHING APPARATUS AND

PROTECTIVE CLOTHING.

Unusual Fire/Explosion Hazard: NONE.

Control Measures

Respiratory Protection: WITH SATISFACTORY VENTILATION, RESPIRATORY PROTECTION NOT USUALLY REQUIRED.

Ventilation: GENERAL ROOM VENTILATION IS USUALLY SATISFACTORY, USE LOCAL EXHAUST VENTILATION WHEN NECESSARY.

Protective Gloves: DISPOS

ABLE LATEX GLOVES RECOMMENDED.

Eye Protection: SAFETY GLASSES OR GOGGLES RECOMMENDED.

Other Protective Equipment: DISPOSABLE GARMETS IF DIRECT SKIN CONTACT IS

ANTICIPATED.

Work Hygienic Practices: NONE SPECIFIED BY MANUFACTURER.

Supplemental Safety and Health: NONE.

Physical/Chemical Properties

HCC: C3
B.P. Text: NE
M.P/F.P Text: NE
Decomp Text: NE
Vapor Pres: NE
Vapor Density: NE

S

pec Gravity: NE PH: 3.5-6 Evaporation Rate & Deference: NE Solubility in Water: FREELY WATER SOLUBL. Appearance and Odor: CLEAR, COLORLESS, ODORLESS SOLUTION. Percent Volatiles by Volume: NE Corrosion Rate: NE ______ Reactivity Data ______ Stability Indicator: YES Stability Condition To Avoid: NONE. Materials To Avoid: NONE. Hazardous Decomposition Products: NONE. Hazardous Polymerization Indic ator: NO Conditions To Avoid Polymerization: NONE. _____ **Toxicological Information** _____ **Ecological Information** ______ ______ **MSDS** Transport Information _____ _____ _____ Regulatory Information ______ Other Information ______ ______ Transportation Information ______

Responsible Party Cage: IO580

Trans ID NO: 124109

Product ID: DEXTROSE INJECTION MSDS Prepared Date: 01/01/1994

Review Date: 06

/14/1994 MFN: 2

Net Unit Weight: UNKNOWN

AF MMAC Code: NR Multiple KIT Number: 0

Review IND: Y

Type Of Container: UNKNOWN

Detail DOT Information

DOT PSN Code: ZZZ

DOT Proper Shipping Name: NOT REGULATED BY THIS MODE OF TRANSPORTATION

Detail IMO Information

IMO PSN Code: ZZZ

IMO Proper Shipping Name: NOT REGULATED FOR THIS MODE OF TRANSPORTATION

Detail IATA Information

IATA PSN Code: ZZZ

IATA Proper Shipping Name: NOT REGULATED BY THIS MODE OF TRANSPORTATION

Detail AFI Information

AFI PSN Code: ZZZ

AFI Proper Shipping Name: NOT REGULATED BY TH

IS MODE OF TRANSPORTATION

HAZCOM Label

Product ID: DEXTROSE INJECTION

Cage: IO580 Assigned IND: Y

Company Name: LYPHOMED INC Street: 10401 W TOUHY AVE

City: ROSEMONT IL Zipcode: 60018

Health Emergency Phone: 312-345-6170

Label Required IND: Y

Date Of Label Review: 06/14/1994

Status Code: C

Label Date: 06/14/1994 Origination Code: Z Eye Protection IND: YES Skin Protection IND: YES

Sign

al Word: CAUTION
Health Hazard: Slight
Contact Hazard: None
Fire Hazard: Slight
Reactivity Hazard: None

Hazard And Precautions: IN CASE OF SPILL: WEAR RECOMMENDED PERSONAL PROTECTOVE EQUIPMENT. USE ABSORBENT TOWELS OR BOOMS TO CLEAN-UP SPILL. WIPE SURFACE CLEAN AND WASH WITH SOAP AND WATER, FIRST AID: INHALATION-MOVE PERSON TO FRESH AIR IMMEDIATELY. GIVE ARTIFICIALRESPIRATION AND CARDIOPULMONARY RESUSCITATION (CPR) IF REQUIRED. SEEK MEDICAL ATTENTION. INGESTION-FLUSH MOUTH OUT WITH WA

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PHYSICIAN.

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