

**The University of Western Ontario**  
**BIOLOGICAL AGENTS REGISTRY FORM**  
**Approved Biohazards Subcommittee: October 14, 2011**  
**Biosafety Website: [www.uwo.ca/humanresources/biosafety/](http://www.uwo.ca/humanresources/biosafety/)**

This form must be completed by each Principal Investigator holding a grant administered by the University of Western Ontario (UWO) or in charge of a laboratory/facility where the use of Level 1, 2 or 3 biological agents is described in the laboratory or animal work proposed. The form must also be completed if any work is proposed involving animals carrying zoonotic agents infectious to humans or involving plants, fungi, or insects that require Public Health Agency of Canada (PHAC) or Canadian Food Inspection Agency (CFIA) permits.

This form must be updated at least every 3 years or when there are changes to the biological agents being used.

Containment Levels will be established in accordance with Laboratory Biosafety Guidelines, 3rd edition, 2004, Public Health Agency of Canada (PHAC) or Containment Standards for Veterinary Facilities, 1<sup>st</sup> edition 1996, Canadian Food Inspection Agency (CFIA).

Electronically completed forms are to be submitted to Occupational Health and Safety, (OHS), (Support Services Building, Room 4190 or to [jstanle2@uwo.ca](mailto:jstanle2@uwo.ca)) for distribution to the Biohazards Subcommittee. For questions regarding this form, please contact the Biosafety Officer at extension 81135 or [biosafety@uwo.ca](mailto:biosafety@uwo.ca). If there are changes to the information on this form (excluding grant title and funding agencies), contact Occupational Health and Safety for a modification form. See website: [www.uwo.ca/humanresources/biosafety/](http://www.uwo.ca/humanresources/biosafety/).

Please ensure that all questions are fully and clearly answered. Failure to do so will lead to the form being returned, which will cause delays in your approval and frustration for you and your colleagues on the Committee.

**If you are re-submitting this form as requested by the Biohazards Subcommittee, please make modifications to the form in bold print, highlighted in yellow. Please re-submit forms electronically.**

PRINCIPAL INVESTIGATOR:	<b>Christopher Pin</b>
DEPARTMENT:	<b>Paediatrics</b>
ADDRESS:	<b>A5-134, Victoria Research Laboratories</b>
PHONE NUMBER:	<b>x53073</b>
EMERGENCY PHONE NUMBER(S):	<b>519-657-1263</b>
EMAIL:	<b><a href="mailto:cpin@uwo.ca">cpin@uwo.ca</a></b>

Location of experimental work to be carried out :

Building : <b>Victoria Research Laboratories</b>	Room(s): <b>5<sup>th</sup> floor open lab</b>
Building : <b>Victoria Research Laboratories</b>	Room(s): <b>A7-111</b>
Building : _____	Room(s): _____

**\*For work being performed at Institutions affiliated with the University of Western Ontario, the Safety Officer for the Institution where experiments will take place must sign the form prior to its being sent to the University of Western Ontario Biosafety Officer (See Section 15.0, Approvals).**

FUNDING AGENCY/AGENCIES: **Internal Funding - Core Facility**

GRANT TITLE(S): **London Regional Transgenic and Gene Targeting Facility**

UNDERGRADUATE COURSE NAME(IF APPLICABLE): **N/A**

List all personnel working under Principal Investigators supervision in this location:

<u>Name</u>	<u>UWO E-mail Address</u>	<u>Date of Biosafety Training</u>
<b>Linsay Drysdale</b>	<b><a href="mailto:ldrysdal@uwo.ca">ldrysdal@uwo.ca</a></b>	<b>November, 2007</b>
<b>Lucimar Ferreira</b>	<b><a href="mailto:luteodoro@gmail.com">luteodoro@gmail.com</a></b>	<b>June, 2008</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Changes to Every Page



**Please include a ONE page research summary or teaching protocol in lay terms.  
Forms with summaries more than one page will not be reviewed.**

The LRTGT generates genetically modified mice as a service for London-based researchers. This includes work with both embryonic stem (ES) cells and live mice. In total, we perform five services that involve superovulation of female mice or work with tissue culture cell lines. Superovulation of female mice occurs for (1) rederivation or (2) cryopreservation of mouse lines, (3) pronuclear injection of DNA into single cell embryos, or (4) for blastocyst injections of ES cells followed by transfer to pseudopregnant females. (5) We use ES cells to alter single genes before we select correctly targeted cells and inject these into blastocyst embryos.

**1.0 Microorganisms**

1.1 Does your work involve the use of biological agents?  YES  NO  
 (non-pathogenic and pathogenic biological agents including but not limited to bacteria and other microorganisms, viruses, prions, parasites or pathogens of plant or animal origin)? If no, please proceed to Section 2.0

Do you use microorganisms that require a permit from the CFIA?  YES  NO  
 If YES, please give the name of the species \_\_\_\_\_

What is the origin of the microorganism(s)? \_\_\_\_\_

Please describe the risk (if any) of escape and how this will be mitigated:

*Please attach the CFIA permit.*

Please describe any CFIA permit conditions:

1.2 Please complete the table below:

Full Scientific Name of Biological Agent(s)* (Be specific)	Is it known to be a human pathogen? YES/NO	Is it known to be an animal pathogen? YES/NO	Is it known to be a zoonotic agent? YES/NO	Maximum quantity to be cultured at one time? (in Litres)	Source/ Supplier	PHAC or CFIA Containment Level
<i>E.coli Dh5alpha</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	100 ml liquid		<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
<i>E.coli - XL1Blue</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	100 ml liquid		<input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3

*\*Please attach a Material Safety Data Sheet or equivalent from the supplier if the bacterium used is not on this link: [http://www.uwo.ca/humanresources/docandform/docs/ohs/CFIA\\_Ecoli\\_list.pdf](http://www.uwo.ca/humanresources/docandform/docs/ohs/CFIA_Ecoli_list.pdf)*

Additional Comments: We use bacteria simply for cloning of new DNA plasmids and expansion of plasmid DNA

## 2.0 Cell Culture

2.1 Does your work involve the use of cell cultures?  YES  NO  
 (If NO, please proceed to Section 3.0)

2.2 Please indicate the type of primary cells (i.e. derived from fresh tissue) that will be grown in culture:

Cell Type	Is this cell type used in your work?	Source of Primary Cell Culture Tissue	AUS Protocol Number
Human	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Not applicable
Rodent	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>fibroblasts (DR4 mice)</b>	<b>2008-027</b>
Non-human primate	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Other (specify)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

2.3 Please indicate the type of established cells that will be grown in culture in:

Cell Type	Is this cell type used in your work?	Specific cell line(s)*	Containment Level of each cell line	Supplier / Source of cell line(s)
Human	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Rodent	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<b>Mouse ES cells R1, G4, E14Tg2A</b>	<b>All are 2</b>	<b>Andras Nagy (U of T)</b>
Non-human primate	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Other (specify)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

*\*Please attach a Material Safety Data Sheet or equivalent from the supplier. (For more information, see [www.atcc.org](http://www.atcc.org))*

2.4 For above named cell type(s) indicate PHAC or CFIA containment level required  1  2  2+  3

Additional Comments:   I  

## 3.0 Use of Human Source Materials

3.1 Does your work involve the use of human source materials?  YES  NO  
 If no, please proceed to Section 4.0

3.2 Indicate in the table below the Human Source Material to be used.

Human Source Material	Source/Supplier /Company Name	Is Human Source Material Infected With An Infectious Agent? YES/UNKNOWN	Name of Infectious Agent (If applicable)	PHAC or CFIA Containment Level (Select one)
Human Blood (whole) or other Body Fluid		<input type="checkbox"/> Yes <input type="checkbox"/> Unknown		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
Human Blood (fraction) or other Body Fluid		<input type="checkbox"/> Yes <input type="checkbox"/> Unknown		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
Human Organs or Tissues (unpreserved)		<input type="checkbox"/> Yes <input type="checkbox"/> Unknown		<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2+ <input type="checkbox"/> 3
Human Organs or Tissues (preserved)		Not Applicable		Not Applicable

Additional Comments: \_\_\_\_\_

#### 4.0 Genetically Modified Organisms and Cell lines

4.1 Will genetic modifications be made to the microorganisms, biological agents, or cells described in Sections 1.0 and 2.0?  YES  NO If **NO**, please proceed to Section 5.0

4.2 Will genetic modification(s) involving plasmids be done?  YES, complete table below  NO

Bacteria Used for Cloning *	Plasmid(s) **	Source of Plasmid	Gene Transformed or Transfected	Will there be a change due to transformation of the bacteria?	Will there be a change in the pathogenicity of the bacteria after the genetic modification?	What are the consequences due to the transformation of the bacteria?
<b>E.Coli DH5<math>\alpha</math></b>	<b>Targeting vectors#</b>	<b>- genes as per requests to the LRTGT#</b>		<b>No</b>	<b>No</b>	<b>None</b>
<b>E.Coli XL1Blue</b>	<b>Transgenic constructs#</b>					

\* Please attach a Material Safety Data Sheet or equivalent if available.

\*\* Please attach a plasmid map.

\*\*\*No Material Safety Data Sheet is required for the following strains of E. coli:

[http://www.uwo.ca/humanresources/docandform/docs/ohs/CFIA\\_Ecoli\\_list.pdf](http://www.uwo.ca/humanresources/docandform/docs/ohs/CFIA_Ecoli_list.pdf)

4.3 Will genetic modification(s) of bacteria and/or cells involving viral vectors be made?

YES, complete table below  NO

Virus Used for Vector Construction	Vector(s) *	Source of Vector	Gene(s) Transduced	Describe the change that results from transduction

\* Please attach a Material Safety Data Sheet or equivalent.

4.3.1 Will virus be replication defective?  YES  NO

4.3.2 Will virus be infectious to humans or animals?  YES  NO

4.3.3 Will this be expected to increase the containment level required?  YES  NO

#### 5.0 Will genetic sequences from the following be involved?

- ◆ HIV  NO  YES, specify
- ◆ HTLV 1 or 2 or genes from any Level 1 or Level 2 pathogens  NO  YES, specify
- ◆ SV 40 Large T antigen  NO  YES
- ◆ E1A oncogene  NO  YES
- ◆ Known oncogenes  NO  YES, specify
- ◆ Other human or animal pathogen and or their toxins  NO  YES, specify

5.1 Is any work being conducted with prions or prion sequences?  NO  YES

Additional Comments: **As part of the mandate for the London Regional Transgenic and Gene Targeting Facility, we receive plasmid DNA (digested or undigested) to either inject into one cell mouse embryos or electroporate in**



## 6.0 Human Gene Therapy Trials

6.1 Will human clinical trials be conducted involving a biological agent?  YES  NO  
(including but not limited to microorganisms, viruses, prions, parasites or pathogens of plant or animal origin)  
If no, please proceed to Section 7.0

6.2 If YES, please specify which biological agent will be used:  
Please attach a full description of the biological agent.

6.3 Will the biological agent be able to replicate in the host?  YES  NO

6.4 How will the biological agent be administered?

6.5 Please give the Health Care Facility where the clinical trial will be conducted:

6.6 Has human ethics approval been obtained?  YES, number:  NO  PENDING

## 7.0 Animal Experiments

7.1 Will live animals be used?  YES  NO If NO, please proceed to section 8.0

7.2 Name of animal species to be used **Mouse**

7.3 AUS protocol # **2008-027**

7.4 List the location(s) for the animal experimentation and housing. **VRL A7-111**

7.5 Will any of the agents listed in section 4.0 be used in live animals  
 NO  YES, specify: **Some of the plasmids will be used to generate genetically modified mice**

7.6 Will the agent(s) be shed by the animal:  
 YES  NO, please justify: **The DNA will be integrated into the genome. Any DNA not integrated will be targeted by the cell for degradation**

## 8.0 Use of Animal species with Zoonotic Hazards

8.1 Will any animals with zoonotic hazards or their organs, tissues, lavages or other body fluids including blood be used (see list below)?  YES  NO - If NO, please proceed to section 9.0

8.2 Will live animals be used?  YES  NO

8.3 If YES, please specify the animal(s) used:

- |                             |  |                             |
|-----------------------------|--|-----------------------------|
| ◆ Pound source dogs         | <input type="checkbox"/> YES                     | <input type="checkbox"/> NO |
| ◆ Pound source cats         | <input type="checkbox"/> YES                     | <input type="checkbox"/> NO |
| ◆ Cattle, sheep or goats    | <input type="checkbox"/> YES, species            | <input type="checkbox"/> NO |
| ◆ Non-human primates        | <input type="checkbox"/> YES, species            | <input type="checkbox"/> NO |
| ◆ Wild caught animals       | <input type="checkbox"/> YES, species & colony # | <input type="checkbox"/> NO |
| ◆ Birds                     | <input type="checkbox"/> YES, species            | <input type="checkbox"/> NO |
| ◆ Others (wild or domestic) | <input type="checkbox"/> YES, specify            | <input type="checkbox"/> NO |

8.4 If no live animals are used, please specify the source of the specimens:

## 9.0 Biological Toxins and Hormones

9.1 Will toxins or hormones of biological origin be used?  YES  NO If NO, please proceed to Section 10.0

9.2 If YES, please name the toxin(s) or hormones(s) **Human and equine Chorionic Gonadotrophin (HCG, ECG), Toxins: mitomycin C**

Please attach information, such as a Material Safety Data Sheet, for the toxin(s) used.

9.3 What is the LD<sub>50</sub> (specify species) of the toxin or hormone **Not available for HCG or ECG; mitomycin C (30 mg/kg; rat)**

9.4 How much of the toxin or hormone is handled at one time\*? **HCG (20 IU); ECG (20 IU); mitomycin C (2 mg)**

9.5 How much of the toxin or hormone is stored\*? **HCG (25000 IU); ECG (25000 IU); mitomycin C (10 mg)**

9.6 Will any biological toxins or hormones be used in live animals?  YES  NO

If YES, Please provide details: **HCG and ECG (superovulate female mice) caerulein (experimental model for pancreatitis in mice)**

\*For information on biosecurity requirements, please see:

[http://www.uwo.ca/humanresources/docandform/docs/healthandsafety/biosafety/Biosecurity\\_Requirements.pdf](http://www.uwo.ca/humanresources/docandform/docs/healthandsafety/biosafety/Biosecurity_Requirements.pdf)

Additional Comments: **Not equine chorionic gonadotrophin is commonly referred to as Pregnant Mare Serum (PMS)**

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## 10.0 Insects

10.1 Do you use insects?  YES  NO - If NO, please proceed to Section 11.0

10.2 If YES, please give the name of the species.

10.3 What is the origin of the insect?

10.4 What is the life stage of the insect?

10.5 What is your intention?  Initiate and maintain colony, give location:

"One-time" use, give location:

10.6 Please describe the risk (if any) of escape and how this will be mitigated:

10.7 Do you use insects that require a permit from the CFIA permit?  YES  NO

If YES, Please attach the CFIA permit & describe any CFIA permit conditions:

## 11.0 Plants

- 11.1 Do you use plants?  YES  NO - If **NO**, please proceed to Section 12.0
- 11.2 If YES, please give the name of the species.
- 11.3 What is the origin of the plant?
- 11.4 What is the form of the plant (seed, seedling, plant, tree...)?
- 11.5 What is your intention?  Grow and maintain a crop  "One-time" use
- 11.6 Do you do any modifications to the plant?  YES  NO  
If yes, please describe:
- 11.7 Please describe the risk (if any) of loss of the material from the lab and how this will be mitigated:
- 11.8 Is the CFIA permit attached?  YES  NO  
If **YES**, Please attach the CFIA permit & describe any CFIA permit conditions:

## 12.0 Import Requirements

- 12.1 Will any of the above agents be imported?  YES, country of origin  NO  
If **NO**, please proceed to Section 13.0
- 12.2 Has an Import Permit been obtained from HC for human pathogens?  YES  NO
- 12.3 Has an import permit been obtained from CFIA for animal or plant pathogens?  YES  NO
- 12.4 Has the import permit been sent to OHS?  YES, please provide permit #  NO

## 13.0 Training Requirements for Personnel Named on Form

All personnel named on the above form who will be using any of the above named agents are required to attend the following training courses given by OHS:

- ◆ Biosafety
- ◆ Laboratory and Environmental/Waste Management Safety
- ◆ WHMIS (Western or equivalent)
- ◆ Employee Health and Safety Orientation

As the Principal Investigator, I have ensured that all of the personnel named on the form who will be using any of the biological agents in Sections 1.0 to 9.0 have been trained.

**An X in the check box indicates you agree with the above statement...**   
**Enter Your Name** Christopher Pin **Date:** October 12, 2012

**14.0 Containment Levels**

14.1 For the work described in sections 1.0 to 9.0, please indicate the highest HC or CFIA Containment Level required.  1  2  2+  3

14.2 Has the facility been certified by OHS for this level of containment?

- YES, location and date of most recent biosafety inspection:
- NO, please certify
- NOT REQUIRED for Level 1 containment

14.3 Please indicate permit number (not applicable for first time applicants):

**15.0 Procedures to be Followed**

15.1 Are additional risk reduction measures necessary beyond containment level 1, 2, 2+ or 3 measures that are unique to these agents?  YES  NO

If YES please describe:

15.2 Please outline what will be done if there is an exposure to the biological agents listed such as a needlestick injury or an accidental splash:

**Skin exposure: Wash the affected area thoroughly using antimicrobial soap and report incident to OHS. Splash to eyes: Immediately flush eyes with running water for 15 minutes using eyewash and forcibly hold eye(s) open to ensure effective wash behind the eyelids. Report incident to OHS. Needle stick: Wash affected area thoroughly using antimicrobial soap for 5 minutes and report incident**

15.3 As the Principal Investigator, I will ensure that this project will follow the Western Biosafety Guidelines and Procedures Manual for Containment Level 1 & 2 Laboratories (and the Level 3 Facilities Manual for Level 3 projects). I will ensure that UWO faculty, staff and students working in my laboratory have an up-to-date Hazard Communication Form, found at <http://www.shs.uwo.ca/workplace/workplacehealth.html>

*An X in the check box indicates you agree with the above statement...*

*Enter Your Name Christopher Pin Date: October 12, 2012*

15.4 Additional Comments: \_\_\_\_\_

**16.0 Approvals**

1) UWO Biohazards Subcommittee: SIGNATURE: \_\_\_\_\_  
Date: \_\_\_\_\_

2) Safety Officer for the University of Western Ontario SIGNATURE: \_\_\_\_\_  
Date: \_\_\_\_\_

3) Safety Officer for Institution where experiments will take place (if not UWO): SIGNATURE: \_\_\_\_\_  
Date: Nov 12, 2012

Approval Number: \_\_\_\_\_ Expiry Date (3 years from Approval): \_\_\_\_\_

Special Conditions of Approval:



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### TOXIN USE RISK ASSESSMENT

<b>Name of Toxin:</b>	Human Chorionic Gonadotrophin (HCG)
<b>Proposed Use Dose:</b>	<b>20</b> IU
<b>Proposed Storage Dose:</b>	<b>25000</b> IU
<b>LD<sub>50</sub> (species):</b>	µg

<b>Calculation:</b>			
	0 µg/kg	x	50 kg/person
	Dose per person based on LD <sub>50</sub> in µg = 0		
	<b>LD<sub>50</sub> per person with safety factor of 10 based on LD<sub>50</sub> in µg =</b>		<b>0</b>

Comments/Recommendations:



**Western**  
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**TOXIN USE RISK ASSESSMENT**

<b>Name of Toxin:</b>	Equine Chorionic Gonadotrophin (ECG)
<b>Proposed Use Dose:</b>	<b>20</b> IU
<b>Proposed Storage Dose:</b>	<b>25000</b> IU
<b>LD<sub>50</sub> (species):</b>	µg

<b>Calculation:</b>	0 µg/kg	x	50 kg/person
Dose per person based on LD <sub>50</sub> in µg =	0		
<b>LD<sub>50</sub> per person with safety factor of 10 based on LD<sub>50</sub> in µg =</b>	<b>0</b>		

**Comments/Recommendations:**



**Western**  
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**TOXIN USE RISK ASSESSMENT**

<b>Name of Toxin:</b>	Mitomycin C
<b>Proposed Use Dose:</b>	2000 µg
<b>Proposed Storage Dose:</b>	10000 µg
<b>LD<sub>50</sub> (species):</b>	30000 µg

<b>Calculation:</b>	
30000 µg/kg	x 50 kg/person
Dose per person based on LD <sub>50</sub> in µg = 1500000	
<b>LD<sub>50</sub> per person with safety factor of 10 based on LD<sub>50</sub> in µg = 150000</b>	

**Comments/Recommendations:**



Issuing Date 08/03/10

Revision Number 0

**1. PRODUCT AND COMPANY IDENTIFICATION**

**Product Name** Mitomycin C  
**Product Code(s)** J594  
**UN-No** 2811  
**Synonyms** AMETYCIN \* AMETYCINE \* 7-AMINO-9-ALPHA-METHOXYMITOSANE \* MITOCIN-C \* MITOMYCIN \* MITOMYCIN-C \* MITOMYCINUM \* MMC \* MUTAMYCIN \* MYTOMYCIN \* MITOMYCYNA C (POLISH) \* NCI-C04706 \* NSC 26980 \* RCRA WASTE NUMBERU010 \*

**Distributor**  
 AMRESKO INC.  
 6681 Cochran Road  
 SOLON, OHIO 44139

**Company Phone Number** 1-800-829-2805  
**Emergency Telephone Number** Chemtrec 1-800-424-9300

**2. HAZARDS IDENTIFICATION**

**Emergency Overview**

Suspected carcinogen  
 Highly toxic  
 Suspected mutagen  
 Irritant

**Appearance** Gray      **Physical State** Powder      **Odor** No information available

**Potential Health Effects**

**Acute Toxicity**

**Eyes** Irritating to eyes.  
**Skin** Irritating to skin. Very toxic in contact with skin.  
**Inhalation** Irritating to respiratory system. Very toxic by inhalation.  
**Ingestion** Causes irritation by ingestion. Very toxic if swallowed.

**Chronic Effects** Suspected carcinogen. Suspected mutagen. May cause heritable genetic damage.

**Aggravated Medical Conditions** None known.

**Environmental Hazard** See Section 12 for additional Ecological Information.

**3. COMPOSITION/INFORMATION ON INGREDIENTS**

**Formula** C15H18N4O5

Chemical Name	CAS-No	Weight %
Mitomycin-C	50-07-7	95-100

**4. FIRST AID MEASURES**

**Eye Contact** Rinse thoroughly with plenty of water for at least 15 minutes and consult a physician.

**Skin Contact** Wash skin with soap and water.

**Inhalation** Move to fresh air. If breathing becomes difficult, give oxygen.

**Ingestion** Clean mouth with water and afterwards drink plenty of water.

**Notes to Physician** Treat symptomatically.

**5. FIRE-FIGHTING MEASURES**

**Flammable Properties** Not flammable.

**Flash Point** Not determined

**Suitable Extinguishing Media** Dry chemical, CO2, water spray or regular foam.

**Hazardous Combustion Products** Carbon oxides, Nitrogen oxides (NOx)

**Explosion Data**

**Sensitivity to Mechanical Impact** Not sensitive.

**Sensitivity to Static Discharge** Not sensitive.

**Specific Hazards Arising from the Chemical**  
Use water spray to cool fire-exposed containers.

**Protective Equipment and Precautions for Firefighters** As in any fire, wear self-contained breathing apparatus pressure-demand, MSHA/NIOSH (approved or equivalent) and full protective gear.

**NFPA**                      **Health Hazard -**                      **Flammability -**                      **Stability -**                      **Physical and Chemical Hazards -**

**6. ACCIDENTAL RELEASE MEASURES**

**Personal Precautions** Avoid contact with skin, eyes and clothing. Use personal protective equipment. Ensure adequate ventilation

**Methods for Containment** Prevent further leakage or spillage if safe to do so.

**Methods for Cleaning Up** Avoid dust formation. Pick up and transfer to properly labeled containers. Ventilate area and wash spill site after material pickup is complete.

**7. HANDLING AND STORAGE**

**Handling** Handle in accordance with good industrial hygiene and safety practice.

**Storage** Keep containers tightly closed in a dry, cool and well-ventilated place.

**8. EXPOSURE CONTROLS / PERSONAL PROTECTION**

Chemical Name	ACGIH TLV	OSHA PEL	NIOSH IDLH
Mitomycin-C 50-07-7			

**Engineering Measures**                      Showers  
 Eyewash stations  
 Ventilation systems.

**Personal Protective Equipment**  
**Eye/Face Protection**                      Tightly fitting safety goggles.  
**Skin and Body Protection**                Wear protective gloves/clothing.  
**Respiratory Protection**                    If exposure limits are exceeded or irritation is experienced, NIOSH/MSHA approved respiratory protection should be worn. Positive-pressure supplied air respirators may be required for high airborne contaminant concentrations. Respiratory protection must be provided in accordance with current local regulations.

**Hygiene Measures**                            Handle in accordance with good industrial hygiene and safety practice.

**9. PHYSICAL AND CHEMICAL PROPERTIES**

<b>Appearance</b>	Gray	<b>Odor</b>	No information available
<b>Physical State</b>	Powder	<b>Autoignition Temperature</b>	No information available
<b>Flash Point</b>	No information available	<b>Flammability Limits in Air</b>	No information available
<b>Boiling Point/Range</b>	No information available	<b>Solubility</b>	No information available
<b>Explosion Limits</b>	No information available	<b>Vapor Density</b>	No information available.
<b>Molecular Weight</b>	334.3		
<b>Evaporation Rate</b>	No information available		

**10. STABILITY AND REACTIVITY**

**Stability**    Stable under recommended storage conditions.

**Incompatible Products**                        Strong oxidizing agents. Strong acids. Strong bases.

**Conditions to Avoid**                            None known based on information supplied.

**Hazardous Decomposition Products**        Carbon oxides. Nitrogen oxides (NOx).

**Hazardous Polymerization**                    Hazardous polymerization does not occur.

**11. TOXICOLOGICAL INFORMATION**

**Acute Toxicity**

**Product Information**                            Irritating to eye, skin and respiratory system. Toxic by inhalation, in contact with skin, or if swallowed.

Chemical Name	LD50 Oral	LD50 Dermal	LC50 Inhalation
Mitomycin-C	30 mg/kg ( Rat )		

**Chronic Toxicity**

**Chronic Toxicity**                                Suspected carcinogen. Suspected mutagen. May cause heritable genetic damage.

<b>Chemical Name</b> Mitomycin-C	<b>ACGIH</b>	<b>IARC</b> Group 2B	<b>NTP</b>	<b>OSHA</b> X
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**Target Organ Effects** Bone marrow, Liver

**12. ECOLOGICAL INFORMATION**

**Ecotoxicity**

The environmental impact of this product has not been fully investigated.

**13. DISPOSAL CONSIDERATIONS**

**Waste Disposal Method** Dispose of material in accordance with all federal, state, and local regulations.

**Contaminated Packaging** Dispose of in accordance with all federal, state and local regulations.

<b>Chemical Name</b>
Mitomycin-C - 50-07-7

<b>Chemical Name</b>	<b>RCRA - Halogenated Organic Compounds</b>	<b>RCRA - P Series Wastes</b>	<b>RCRA - F Series Wastes</b>	<b>RCRA - K Series Wastes</b>	<b>RCRA - U Series Wastes</b>
Mitomycin-C - 50-07-7					U010

**14. TRANSPORT INFORMATION**

**DOT** Regulated  
**Proper Shipping Name** TOXIC SOLID, ORGANIC, N.O.S. (CONTAINING MITOMYCIN C)  
**Hazard Class** 6.1  
**UN-No** 2811  
**Packing Group** II

**IATA** Regulated  
**UN-No** 2811  
**Proper Shipping Name** TOXIC SOLID, ORGANIC, N.O.S. (CONTAINING MITOMYCIN C)  
**Hazard Class** 6.1  
**Packing Group** II

**15. REGULATORY INFORMATION**

**International Inventories**

**TSCA** Complies  
**DSL** Does not Comply  
**EINECS/ELINCS** Complies  
**ENCS** Does not Comply  
**IECSC** Does not Comply  
**KECL** Does not Comply  
**PICCS** Does not Comply

AICS Complies

**U.S. Federal Regulations**

**SARA 313**

Section 313 of Title III of the Superfund Amendments and Reauthorization Act of 1986 (SARA). This product contains a chemical or chemicals which are subject to the reporting requirements of the Act and Title 40 of the Code of Federal Regulations, Part 372:

**SARA 311/312 Hazard Categories**

Acute Health Hazard	Yes
Chronic Health Hazard	Yes
Fire Hazard	No
Sudden Release of Pressure Hazard	No
Reactive Hazard	No

**Clean Water Act**

This product does not contain any substances regulated as pollutants pursuant to the Clean Water Act (40 CFR 122.21 and 40 CFR 122.42).

**Clean Air Act, Section 112 Hazardous Air Pollutants (HAPs) (see 40 CFR 61)**

This product does not contain any substances regulated as hazardous air pollutants (HAPS) under Section 112 of the Clean Air Act Amendments of 1990.

**CERCLA**

Chemical Name	Hazardous Substances RQs	Extremely Hazardous Substances RQs
Mitomycin-C	10 lb	10 lb

**U.S. State Regulations**

**California Proposition 65**

This product contains the following Proposition 65 chemicals:

Chemical Name	CAS-No	California Prop. 65
Mitomycin-C	50-07-7	Carcinogen

Chemical Name	Massachusetts	New Jersey	Pennsylvania	Illinois	Rhode Island
Mitomycin-C	X	X	X		X

**International Regulations**

**Mexico - Grade** No information available.

**Canada**

**WHMIS Hazard Class**

Not determined

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**16. OTHER INFORMATION**

Issuing Date 08/03/10

Revision Date

Revision Note No information available.

**Disclaimer**

The information provided on this MSDS is correct to the best of our knowledge, information and belief at the date of its publication. The information given is designed only as a guide for safe handling, use, processing, storage, transportation, disposal and release and is not to be considered as a warranty or quality specification. The information relates only to the specific material designated and may not be valid for such material used in combination with any other material or in any process, unless specified in the text.

**End of MSDS**

**SAFETY DATA SHEET**Order  
NumberCustomer  
Number**1. Identification of the substance/preparation and of the company/undertaking**

**Product name** : Gonadotropin, Pregnant Mare Serum **Catalog #** : 367222  
**Chemical formula** : N/A **Supplier** : Manufactured by EMD Biosciences, Inc.  
 10394 Pacific Center Court  
 San Diego, CA 92121  
 (858)450-5558/(800)854-3417  
 FAX: (858)453-3552

**Synonym** : PMSG

**Emergency telephone number** : **Call Chemtrec®**  
**(800)424-9300 (within U.S.A.)**  
**(703)527-3887 (outside U.S.A.)**

**2. Composition / information on ingredients****Substance/Preparation** : Substance

Chemical name*	CAS No.	EC Number	Symbol	R-Phrases
1) Gonadotropin, Pregnant Mare Serum	9002-70-4	Not available.	Xn	R40

**3. Hazards identification**

**Physical/chemical hazards** : Not applicable.  
**Human health hazards** : WARNING!  
 POSSIBLE BIRTH DEFECT HAZARD.  
 MAY CAUSE BIRTH DEFECTS BASED ON ANIMAL DATA.  
 MAY CAUSE ALLERGIC RESPIRATORY AND SKIN REACTION.  
 MAY CAUSE DAMAGE TO THE FOLLOWING ORGANS: REPRODUCTIVE SYSTEM,  
 GASTROINTESTINAL TRACT.  
 POSSIBLE CANCER HAZARD  
 CONTAINS MATERIAL WHICH MAY CAUSE CANCER BASED ON ANIMAL DATA.  
 CONTAINS MATERIAL WHICH MAY CAUSE HERITABLE GENETIC EFFECTS  
 BASED ON ANIMAL DATA.

**4. First-aid measures**First-Aid measures

**Inhalation** : If inhaled, remove to fresh air. If not breathing, give artificial respiration. If breathing is difficult, give oxygen. Get medical attention.

**Ingestion** : Do NOT induce vomiting unless directed to do so by medical personnel. Never give anything by mouth to an unconscious person. If large quantities of this material are swallowed, call a physician immediately. Loosen tight clothing such as a collar, tie, belt or waistband.

**Skin Contact** : In case of contact, immediately flush skin with plenty of water for at least 15 minutes while removing contaminated clothing and shoes. Cold water may be used. Wash clothing before reuse. Thoroughly clean shoes before reuse. Get medical attention.

**Eye Contact** : Check for and remove any contact lenses. In case of contact, immediately flush eyes with plenty of water for at least 15 minutes. Cold water may be used. Get medical attention.

Effects and symptoms

**Inhalation** : Hazardous in case of inhalation (lung sensitizer).  
**Skin Contact** : Hazardous in case of skin contact (sensitizer).  
**Aggravating conditions** : Repeated exposure to a highly toxic material may produce general deterioration of health by an accumulation in one or many human organs.

## 5. Fire-fighting measures

**Flammability of the Product** : May be combustible at high temperature.

### Extinguishing Media

**Suitable** : SMALL FIRE: Use DRY chemical powder.  
LARGE FIRE: Use water spray, fog or foam. Do not use water jet.

**Hazardous thermal (de)composition products** : These products are nitrogen oxides (NO, NO2...).

**Special fire-fighting procedures** : Fire fighters should wear positive pressure self-contained breathing apparatus (SCBA) and full turnout gear.

**Protection of fire-fighters** : Be sure to use an approved/certified respirator or equivalent.

## 6. Accidental release measures

**Personal precautions** : Splash goggles. Full suit. Dust respirator. Boots. Gloves. A self-contained breathing apparatus should be used to avoid inhalation of the product. Suggested protective clothing might not be sufficient; consult a specialist BEFORE handling this product.

**Small Spill and Leak** : Use appropriate tools to put the spilled solid in a convenient waste disposal container. Finish cleaning by spreading water on the contaminated surface and dispose of according to local and regional authority requirements.

**Large Spill and Leak** : Use a shovel to put the material into a convenient waste disposal container. Finish cleaning by spreading water on the contaminated surface and allow to evacuate through the sanitary system

## 7. Handling and storage

**Handling** : Keep locked up. Keep away from heat. Keep away from sources of ignition. Empty containers pose a fire risk, evaporate the residue under a fume hood. Ground all equipment containing material. Do not breathe dust. Avoid contact with skin. Wear suitable protective clothing. If you feel unwell, seek medical attention and show the label when possible.

**Storage** : Keep container tightly closed. Keep container in a cool, well-ventilated area. Do not store above 4°C (39.2°F).

### Packaging materials

**Recommended use** : Use original container.

## 8. Exposure controls/personal protection

**Engineering measures** : Use process enclosures, local exhaust ventilation, or other engineering controls to keep airborne levels below recommended exposure limits. If user operations generate dust, fume or mist, use ventilation to keep exposure to airborne contaminants below the exposure limit.

**Hygiene measures** : Wash hands after handling compounds and before eating, smoking, using lavatory, and at the end of day.

### Ingredient Name

### Occupational Exposure Limits

1) Gonadotropin, Pregnant Mare Serum Not available.

### Personal protective equipment

**Respiratory system** : Dust respirator. Be sure to use an approved/certified respirator or equivalent. Wear appropriate respirator when ventilation is inadequate.

**Skin and body** : Lab coat.

**Hands** : Gloves.

**Eyes** : Safety glasses.

**Protective Clothing (Pictograms)** :



## 9. Physical and chemical properties

**Physical state** : Solid. (Solid powder.)

**Color** : White.

**Molecular Weight** : Not available.

**Solubility** : Easily soluble in cold water.

**Flash point** : Not available.

**Explosive properties** : Risks of explosion of the product in presence of mechanical impact: Not available.  
Risks of explosion of the product in presence of static discharge: Not available.

## 10. Stability and reactivity

Stability	: The product is stable.
Conditions to avoid	: Not available.
Hazardous Decomposition Products	: These products are nitrogen oxides (NO, NO2...).

## 11. Toxicological information

**RTECS #** : TU4517000

### Local effects

Skin irritation	: Not available.
Sensitization	: Hazardous in case of skin contact (sensitizer), of inhalation (lung sensitizer).
Acute toxicity	: LD50: Not available. LC50: Not available.
Chronic toxicity	: Repeated exposure to a highly toxic material may produce general deterioration of health by an accumulation in one or many human organs.
Other Toxic Effects on Humans	: Not available. Hazardous in case of skin contact (sensitizer), of inhalation (lung sensitizer).  May cause congenital malformations in the foetus.  Not available.

### Specific effects

Carcinogenic effects	: Not available.
Mutagenic effects	: Not available.
Reproduction toxicity	: Classified Reproductive system/toxin/female, Reproductive system/toxin/male [SUSPECTED].
Teratogenic effects	: Classified POSSIBLE for human.

## 12. Ecological information

Ecotoxicity	: Not available.
Toxicity of the Products of Biodegradation	: The product itself and its products of degradation are not toxic.

## 13. Disposal considerations

Methods of disposal; Waste of residues; Contaminated packaging	: Waste must be disposed of in accordance with federal, state and local environmental control regulations.
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## 14. Transport information

### International transport regulations

#### Land - Road/Railway

ADR/RID Class : Not controlled under ADR (Europe).

#### Sea

IMDG Class : Not controlled under IMDG.

#### Air

IATA-DGR Class : Not controlled under IATA.

Special Provisions for Transport : Not applicable.

## 15. Regulatory information

### EU Regulations

Hazard symbol(s) :



Classification : Harmful

Risk Phrases : R68- Possible risks of irreversible effects.

- Safety Phrases** : S22- Do not breathe dust.  
S36- Wear suitable protective clothing.
- Contains** : - Gonadotropin, Pregnant Mare Serum
- U.S. Federal Regulations** : TSCA: No products were found.  
SARA 302/304/311/312 extremely hazardous substances: No products were found.  
SARA 302/304 emergency planning and notification: No products were found.  
SARA 302/304/311/312 hazardous chemicals: No products were found.  
SARA 311/312 MSDS distribution - chemical inventory - hazard identification: No products were found.  
SARA 313 toxic chemical notification and release reporting: No products were found.  
Clean Water Act (CWA) 307: No products were found.  
Clean Water Act (CWA) 311: No products were found.  
Clean air act (CAA) 112 accidental release prevention: No products were found.  
Clean air act (CAA) 112 regulated flammable substances: No products were found.  
Clean air act (CAA) 112 regulated toxic substances: No products were found.
- HCS Classification** : CLASS: Target organ effects.
- State Regulations** :
- WHMIS (Canada)** : CLASS D-2A: Material causing other toxic effects (VERY TOXIC).  
No products were found.

## 16. Other information

### Hazardous Material Information System (U.S.A.)

Health	* 2
Fire Hazard	1
Reactivity	0
Personal Protection	E

### National Fire Protection Association (U.S.A.)



### Notice to Reader

*To the best of our knowledge, the information contained herein is accurate. However, neither the above named supplier nor any of its subsidiaries assumes any liability whatsoever for the accuracy or completeness of the information contained herein. Final determination of suitability of any material is the sole responsibility of the user. All materials may present unknown hazards and should be used with caution. Although certain hazards are described herein, we cannot guarantee that these are the only hazards that exist.*

<b>Catalog #</b> 367222	<b>Date of issue</b> 3/24/2003.	<b>Page: 4/4</b>
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# Material Safety Data Sheet

Revision: 6/07/2004



Hazard information is provided for compliance with both the UK Chemicals (Hazard Information and Packaging) (CHIP) Regulations and the US Hazard Communication Standard (HCS)

## IDENTIFICATION OF THE SUBSTANCE/PREPARATION AND COMPANY

PRODUCT NAME:  
Chorionic Gonadotropin (HCG) 5,000 I.U./ vial

PRODUCT CODE:  
13662

EEC NUMBER:  
232-660-2

SUPPLIER:  
USB Corporation, 26111 Miles Road, Cleveland, Ohio 44128 Phone: (216) 765-5000

Emergency Contact:  
Chemtrec (800) 424-9300  
Outside USA & Canada 703 527 3887

## COMPOSITION/HAZARDOUS COMPONENTS

<u>HAZARD</u>	<u>CAS NO.</u>	<u>%WT</u>	<u>TLV</u>	<u>CHIP R &amp; S Phrases</u>
Chorionic Gonadotropin (HCG) 5,000 I.U. / vial	9002-61-3	2.7%	---	R:36/37/38 Irritating to eyes, respiratory system and skin. S:24/25 Avoid contact with skin and eyes. S:36/37 Wear suitable protective clothing and gloves.

## HAZARDS IDENTIFICATION

CHIP  
Irritant  
HCS  
Irritant

## FIRST-AID MEASURES

**EYES:** Flush with water for 15 minutes. Seek medical advice if irritation persists.  
**SKIN:** Flush with water, then wash thoroughly with soap and water. Remove contaminated clothing and wash before reuse. Seek medical attention if irritation persists.  
**INHALATION:** Remove the victim from exposure and move to fresh air. If breathing is difficult, give oxygen. If not breathing, give artificial respiration. Keep victim quiet and warm. Seek immediate medical attention.  
**INGESTION:** Drink water and seek immediate medical attention. Avoid alcoholic beverages. Never give anything by mouth to an unconscious person.

## FIRE-FIGHTING INFORMATION

Use media suitable to extinguish the supporting or surrounding fire. Wear NIOSH (or equivalent) approved self contained breathing apparatus. For small fires only: use carbon dioxide, dry powder or foam. Emits toxic fumes under fire conditions. May be combustible at high temperature.  
Flash Point = No data available.

## ACCIDENTAL RELEASE MEASURES

Wear appropriate personal protective equipment and clothing including lab coat, safety goggles, gloves and NIOSH-approved respirator. Collect in a manner that does not create dust and place in a suitable waste container. Avoid contact of material with skin or eyes. Use adequate ventilation.

## HANDLING AND STORAGE

Caution: Handle all products prepared from human sources as if they were capable of transmitting infectious agents. Avoid accidental inoculation, intravenous injection or contact with open wounds. Wash thoroughly after handling. Observe universal precautions when working with this product. Products from human sources have been tested and found negative for Hepatitis B and HIV viruses. Wear appropriate personal protective equipment and clothing including lab coat, safety goggles, gloves and NIOSH-approved respirator. Avoid contact of material with skin or eyes. Use adequate ventilation. Store ambient away from incompatible materials.

This data sheet is based upon information believed to be reliable. The Company makes no statement or warranty as to the accuracy or completeness of the information contained herein which is offered for your consideration, investigation and verification. Any use of the information contained in this data sheet must be determined by the user to be in accordance with appropriate applicable regulations.

For Further Information, contact your local USB Authorized distributor, Amersham Biosciences	<b>Asia Pacific</b> +852 2811 8693  +61 2 9894 5188  +61 576 0616 10  +852 73888	<b>Canada</b> 1 800 463 5800  <b>Central and East Europe</b> +43 1 982 3826  <b>Denmark</b> +45 4516 2400  <b>Finland</b> 358 (9) 512 3940	<b>Former Soviet Union</b> +7 (095) 232 0250  <b>France</b> 0169 18 28 00  <b>Germany</b> 07 61 49 03 0  <b>Italy</b> 02 27322 1	<b>Japan</b> 81 3 5331 9337  <b>Latin America</b> +55 11 3667 5700  <b>Middle East and Africa</b> +30 (1) 96 00 687  <b>Netherlands</b> 0165 580 410	<b>Norway</b> 63 89 23 10  <b>Portugal</b> 01 417 70 35  <b>South East Asia</b> 60 3 724 2080  <b>South East Europe</b> +43 (1) 982 3826	<b>Spain</b> 935 944 950  <b>Sweden</b> 018 164000  <b>Switzerland</b> 01 802 81 50  <b>UK</b> 0800 515313	<b>USA</b> USB Corporation (216) 765-5000 If purchased from Amersham Biosciences use 1 800 526 3593
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MSDS information may be continued on back of page.

## PERSONAL PROTECTION

Caution: Handle all products prepared from human sources as if they were capable of transmitting infectious agents. Avoid accidental inoculation, intravenous injection or contact with open wounds. Wash thoroughly after handling. Observe universal precautions when working with this product. Products from human sources have been tested and found negative for Hepatitis B and HIV viruses. Wear appropriate personal protective equipment and clothing including lab coat, safety goggles, gloves and NIOSH-approved respirator. A qualified industrial hygienist should evaluate the need for respiratory protection. Use respiratory protection approved by NIOSH (or equivalent) and appropriate to the hazard. Avoid contact of material with skin or eyes. Mechanical ventilation or local exhaust as needed to control exposure to dust, vapors or mists. Access to a safety shower and eye-wash.

## PHYSICAL AND CHEMICAL PROPERTIES

Appearance: White, lyophilized powder  
Vapor Pressure: No data available  
Solubility (Water): Soluble  
Percent Volatile: No data available  
Chemical formula: No data available

Boiling Point: No data available  
Vapor Density: No data available  
Specific Gravity: No data available  
Evaporation Rate: No data available  
Melting Point: No data available

## STABILITY AND REACTIVITY

Product is stable under normal conditions. Incompatible with strong oxidizing agents. Hazardous decomposition products may include toxic fumes and gases. Hazardous polymerization will not occur.

## TOXICOLOGICAL INFORMATION

### EFFECTS OF OVEREXPOSURE:

EYES: No toxicity data found, but contact may cause irritation and slight corneal injury.

SKIN: No toxicity data found, but contact may cause irritation and/or allergic reaction.

INHALATION: No toxicity data found, but excessive dust may cause irritation if inhaled.

INGESTION: May cause irritation of the digestive tract.

### ADDITIONAL INFORMATION:

Mutation and reproductive effects data under RTECS MD6953000.

Caution: Handle all products prepared from human sources as if they were capable of transmitting infectious agents. Avoid accidental inoculation, intravenous injection or contact with open wounds. Wash thoroughly after handling. Observe universal precautions when working with this product. Products from human sources have been tested and found negative for Hepatitis B and HIV viruses. Signs and symptoms of overexposure include: headaches, irritability, restlessness, depression, tiredness, edema, precocious puberty and gynecomastia. Hypersensitivity reactions both localized and systemic in nature, including erythema, urticaria, rash, angioedema, dyspnea and shortness of breath, have been reported. Adverse reproductive effects have been reported in humans.

Reproductive: Fertility - pre-implantation mortality (e.g. reduction in number of implants per female; total number of implants per corpora lutea)(1978). Post-implantation mortality (e.g. dead and/or resorbed implants per total number of implants)(1970).

Paternal Effects - spermatogenesis (incl. genetic material, sperm morphology, motility, and count)(1960). Testes, epididymis, sperm duct (1959).

Effects on Embryo or Fetus - extra-embryonic structures (e.g., placenta, umbilical cord) (1947). Fetal death (1917).

Maternal Effects - ovaries, fallopian tubes, uterus, cervix, vagina (1960). Menstrual cycle changes or disorders (1974).

Effects on Newborn - growth statistics (e.g.%, reduced weight gain) (1949).

Definitions: RTECS = Registry of Toxic Effects of Chemical Substances.

## ECOLOGICAL INFORMATION

No information available.

## DISPOSAL CONSIDERATIONS

Dispose of material in accordance with applicable local, state, and federal regulations.

## TRANSPORTATION INFORMATION

US DOT / IATA: No information available.

## REGULATORY INFORMATION

RCRA - No applicable information.

SARA 302 - This material does not have an RQ or a TPQ.

SARA 313 - This material is not reportable under Section 313.

EPA TSCA Section 8(b) - This chemical substance is **NOT** specifically listed on the EPA TSCA Inventory. It is supplied for research and development use only, by or directly under the supervision of technically qualified individuals. **NOT** for manufacturing or commercial purposes.

Exposure Limits - Not established.

California Proposition 65 - No applicable information.