

Piperacillin / Tazobactam For Injection Steriscience Specialties Pvt Ltd

Chemwatch: **02-1750** Version No: **4.1** Safety Data Sheet Chemwatch Hazard Alert Code: 1

Issue Date: 10/12/2021 Print Date: 14/04/2022 S.GHS.IND.EN

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

Product Identifier

Product name	Piperacillin / Tazobactam For Injection
Chemical Name	Not Applicable
Synonyms	Not Available
Chemical formula	Not Applicable
Other means of identification	Not Available

Relevant identified uses of the substance or mixture and uses advised against

Relevant identified uses	Antibiotic with broad spectrum of activity against Gram negative bacilli and Gram-negative and positive cocci. Given intravenously and
	intramuscularly in the treatment of pseudomonal and other Gram negative infections.

Details of the supplier of the safety data sheet

Registered company name	Steriscience Specialties Pvt Ltd	
Address	Opp IIMB, Bilekahalli, Dorasani Palya, Begur Hobli,Bannerghata Road,BENGALURU Karnataka 560076 India	
Telephone	+91 80 67840000	
Fax	+91 80 67840700	
Website	www.steri-science.com	
Email	info@steriscience.com	

Emergency telephone number

Association / Organisation	Steriscience Specialties Pvt Ltd	
Emergency telephone numbers	+91 80 69093100	
Other emergency telephone numbers	Not Available	

Once connected and if the message is not in your prefered language then please dial 01

SECTION 2 Hazards identification

Classification of the substance or mixture



Note: The hazard category numbers found in GHS classification in section 2 of this SDSs are NOT to be used to fill in the NFPA 704 diamond. Blue = Health Red = Fire Yellow = Reactivity White = Special (Oxidizer or water reactive substances)

Classification	Acute Toxicity (Oral) Category 5, Hazardous to the Aquatic Environment Long-Term Hazard Category 3
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Label elements

Hazard pictogram(s)	Not Applicable
Signal word	Warning
Hazard statement(s)	
H303	May be harmful if swallowed.
H412	Harmful to aquatic life with long lasting effects.

Precautionary statement(s) Prevention

P273 Avoid release to the environment

Precautionary statement(s) Response

P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider if you feel unwell.
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Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

P501

Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
59703-84-3	>60	piperacillin sodium
89785-84-2	10-20	tazobactam sodium
144-55-8	٨	sodium bicarbonate

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	 If this product comes 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 Contact	 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.
Inhalation	 If dust is inhaled, remove from contaminated area. Encourage patient to blow nose to ensure clear passage of breathing. If irritation or discomfort persists seek medical attention.
Ingestion	 If swallowed do NOT induce vomiting. If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. Observe the patient carefully. Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. Seek medical advice. If poisoning occurs, contact a doctor or Poisons Information Centre.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

Penicillins are widely distributed in body fluids and tissues. They appear in pleural, pericardial, peritoneal and synovial fluids and diffuse across the placenta into foetal circulation. Only small amounts pass into normal cerebrospinal fluid. Plasma half-life is about 30 minutes with about 55-80% bound to plasma proteins. 20-35% appears in the urine within an hour. Only small concentrations appear in the bile.

When cutaneous reactions occur, they may subside spontaneously within a few hours or days following withdrawal of the antibiotic. Administration of antihistamines, or in the absence of a response, corticosteroids, may control reactions. At the first sign of an immediate reaction to penicillin treatment, 0.3 to 1 ml of adrenalin injection should be given intramuscularly (or in severe cases, 0.2 ml well diluted intravenously) followed by a further dose should no improvement occur. This may be followed by an antihistamine such as diphenhydramine or chlorpheniramine, given parenterally and a corticosteroid given intravenously. Should bronchospasm be severe, aminophylline (250 mg in 10 ml) may be given intravenously. Assisted respiration is necessary if there is upper airways obstruction and plasma or suitable electrolyte solutions should be given intravenously fi circulatory failure occurs. Severe urticaria and/or joint pains may be treated with oral corticosteroids.

MARTINDALE; The Extra Pharmacopoeia, 29th Edition.

- Treatment of penicillin overdose may include the following:
- Perform gastric decontamination in cases of severe ingestion.

Administer activated charcoal as a slurry.

- \cdot Manage anaphylaxis with establishment of patent airway, epinephrine, and diphenhydramine.
- · For seizures, administer intravenous diazepam or lorazepam. If seizures recur, consider phenobarbital.
- For hypotension, dysrhythmias, respiratory depression, and need for endotracheal intubation.
- · Evaluate for hypoglycemia, electrolyte disturbances, and hypoxia.
- Treat dysrhythmias with standard antiarrhythmic drugs, if necessary
- \cdot Monitor fluid and electrolyte status and patients with severe vomiting and/or diarrhea.
- · Monitor for renal and hematologic abnormalities.
- · For coagulopathies,administer vitamin K.
- For moderate to severe pseudomembranous colitis, manage with fluids and electrolytes, protein supplementation, and treatment with an antibacterial drug clinically effective against
 Clostridium difficile colitis.

 \cdot Hemodialysis may aid in the removal of penicillins from the blood.

[Meditext 2007 and PDR 2007]

Extinguishing media

- ▶ There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

Special hazards arising from the substrate or mixture

Fire Incompatibility	Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result	
Advice for firefighters		
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves in the event of a fire. Prevent, by any means available, spillage from entering drains or water courses. Use fire fighting procedures suitable for surrounding area. DO NOT approach containers suspected to be hot. Cool fire exposed containers with water spray from a protected location. If safe to do so, remove containers from path of fire. Equipment should be thoroughly decontaminated after use. 	
Fire/Explosion Hazard	 Solid which exhibits difficult combustion or is difficult to ignite. Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an explosive mixture with air, and any source of ignition, i.e. flame or spark, will cause fire or explosion. Dust clouds generated by the fine grinding of the solid are a particular hazard; accumulations of fine dust (420 micron or less) may burn rapidly and fiercely if ignited; once initiated larger particles up to 1400 microns diameter will contribute to the propagation of an explosion. A dust explosion may release large quantities of gaseous products; this in turn creates a subsequent pressure rise of explosive force capable of damaging plant and buildings and injuring people. Usually the initial or primary explosion takes place in a confined space such as plant or machinery, and can be of sufficient force to damage or rupture the plant. If the shock wave from the primary explosion enters the surrounding area, it will disturb any settled dust layers, forming a second dust cloud, and often initiate a much larger secondary explosion. All large scale explosions have resulted from chain reactions of this type. Dry dust can also be charged electrostatically by turbulence, pneumatic transport, pouring, in exhaust ducts and during transport. Build-up of electrostatic charge may be prevented by bonding and grounding. Powder handling equipment such as dust collectors, dryers and mills may require additional protection measures such as explosion venting. All movable parts coming in contact with this material should have a speed of less than 1-metre/sec. Combustion products include: carbon monoxide (CO) carbon dioxide (CO2) nitrogen oxides (NOx) sulfur oxides (SOx) other pyrolysis products typical of burning organic material. May emit poisonous furnes. 	

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	 Clean up waste regularly and abnormal spills immediately. Avoid breathing dust and contact with skin and eyes. Wear protective clothing, gloves, safety glasses and dust respirator. Use dry clean up procedures and avoid generating dust. Vacuum up or sweep up. NOTE: Vacuum cleaner must be fitted with an exhaust micro filter (HEPA type) (consider explosion-proof machines designed to be grounded during storage and use). Dampen with water to prevent dusting before sweeping. Place in suitable containers for disposal.
Major Spills	 Moderate hazard. CAUTION: Advise personnel in area. Alert Emergency Services and tell them location and nature of hazard. Control personal contact by wearing protective clothing. Prevent, by any means available, spillage from entering drains or water courses. Recover product wherever possible. IF DRY: Use dry clean up procedures and avoid generating dust. Collect residues and place in sealed plastic bags or other containers for disposal. IF WET: Vacuum/shovel up and place in labelled containers for disposal. ALWAYS: Wash area down with large amounts of water and prevent runoff into drains. If contamination of drains or waterways occurs, advise Emergency Services.

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

SECTION 7 Handling and storage

Precautions for safe handling	
Safe 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. DO NOT enter confined spaces until atmosphere has been checked.

	DO NOT allow material to contact humans, exposed food or food utensils.
	Avoid contact with incompatible materials.
	When handling, DO NOT eat, drink or smoke.
	Keep containers securely sealed when not in use.
	Avoid physical damage to containers.
	Always wash hands with soap and water after handling.
	Work clothes should be laundered separately. Launder contaminated clothing before re-use.
	Use good occupational work practice.
	Observe manufacturer's storage and handling recommendations contained within this SDS.
	Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
	Organic powders when finely divided over a range of concentrations regardless of particulate size or shape and suspended in air or some
	other oxidizing medium may form explosive dust-air mixtures and result in a fire or dust explosion (including secondary explosions)
	Minimise airborne dust and eliminate all ignition sources. Keep away from heat, hot surfaces, sparks, and flame.
	Establish good housekeeping practices.
	Remove dust accumulations on a regular basis by vacuuming or gentle sweeping to avoid creating dust clouds.
	Use continuous suction at points of dust generation to capture and minimise the accumulation of dusts. Particular attention should be given
	to overhead and hidden horizontal surfaces to minimise the probability of a "secondary" explosion. According to NFPA Standard 654, dust
	layers 1/32 in.(0.8 mm) thick can be sufficient to warrant immediate cleaning of the area.
	Do not use air hoses for cleaning.
	Minimise dry sweeping to avoid generation of dust clouds. Vacuum dust-accumulating surfaces and remove to a chemical disposal area.
	Vacuums with explosion-proof motors should be used.
	Control sources of static electricity. Dusts or their packages may accumulate static charges, and static discharge can be a source of ignition.
	Solids handling systems must be designed in accordance with applicable standards (e.g. NFPA including 654 and 77) and other national avidance
	guidance.
	 Do not empty directly into naminable solvents of in the presence or naminable vapors. The parents: the parketing participant and all carling and the parket must be acquired with electrical baseling and grounding systems. Plastic base and
	 The operator, the packaging container and an equipment must be grounded with electrical bonding and grounding systems. Plastic bags and plastice cannot be arguinged, and antistatic hange do not completely protect against development of static charges.
	produces cannot be grownedd, and annastand bags do not completely protect against development or stanto charges.
	an appropriate influence
	Do NOT cut drill aring or weld such containers
	In addition ensure such activity is not performed near full partially empty or empty containers without appropriate workplace safety
	authorisation or permit.
	Store in original containers.
	Keep containers securely sealed.
Other information	Store in a cool, dry, well-ventilated area.
Other Information	Store away from incompatible materials and foodstuff containers.
	Protect containers against physical damage and check regularly for leaks.
	Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	Vials. ▶ Glass container is suitable for laboratory quantities
Storage incompatibility	Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2		TEEL-3
sodium bicarbonate	13 mg/m3	140 mg/m3		840 mg/m3
Ingredient	Original IDLH		Revised IDLH	
piperacillin sodium	Not Available		Not Available	
tazobactam sodium	Not Available		Not Available	
sodium bicarbonate	Not Available		Not Available	

Exposure controls

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Appropriate engineering controls	Enclosed local exhaust ventilation is required at points of dust, fume or vapour generation. HEPA terminated local exhaust ventilation should be considered at point of generation of dust, fumes or vapours. Barrier protection or laminar flow cabinets should be considered for laboratory scale handling. A fume hood or vented balance enclosure is recommended for weighing/ transferring quantities exceeding 500 mg. When handling quantities up to 500 gram in either a standard laboratory with general dilution ventilation (e.g. 6-12 air ch preferred. Quantities up to 1 kilogram may require a designated laboratory using fume hood, biological safety cabinet, o enclosures. Quantities exceeding 1 kilogram should be handled in a designated laboratory or containment laboratory us containment technology. Manufacturing and pilot plant operations require barrier/ containment and direct coupling technologies. Barrier/ containment technology and direct coupling (totally enclosed processes that create a barrier between the equipr typically use double or split butterfly valves and hybrid unidirectional airflow/ local exhaust ventilation solutions (e.g. pow Glove bags, isolator glove box systems are optional. HEPA filtration of exhaust from dry product handling areas is requir Fume-hoods and other open-face containment devices are acceptable when face velocities of at least 1 m/s (200 feet/m Partitions, barriers, and other partial containment technologies are required to prevent migration of the material to uncor non-routine emergencies maximum local and general exhaust are necessary. Air contaminants generated in the workpla "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove Type of Contaminant:	aanges per hour) is r approved vented ing appropriate barrier/ ment and the room) vder containment booths). red. ninute) are achieved. ntrolled areas. For ace possess varying e the contaminant. Air Speed:

	solvent, vapours, etc. evaporating from tank (in still air)	0.25-0.5 m/s (50-100 f/min.)		
	aerosols, fumes from pouring operations, intermittent conta low velocity into zone of active generation)	0.5-1 m/s (100-200 f/min.)		
	direct spray, drum filling, conveyer loading, crusher dusts, motion)	1-2.5 m/s (200-500 f/min.)		
	Within each range the appropriate value depends on:			
	Lower end of the range	Upper end of the range		
	1: Room air currents minimal or favourable to capture	1: Disturbing room air currents		
	2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity		
	3: Intermittent, low production.	3: High production, heavy use		
	4: Large hood or large air mass in motion	4: Small hood-local control only		
	Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction point should be a minimum or 1-2.5 m/s (200-500 f/min.) for extraction of gases discharged 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used. The need for respiratory protection should also be assessed where incidental or accidental exposure is anticipated: Dependent on levels of contamination, PAPR, full face air purifying devices with P2 or P3 filters or air supplied respirators should be evaluated. The following protective devices are recommended where exposures exceed the recommended exposure control guidelines by factors of: 10; high efficiency particulate (HEPA) filters or cartridges 10-25; loose-fitting (Tyvek or helmet type) HEPA powered-air purifying respirator. 25-50; a full face-piece negative pressure respirator with HEPA filters 50-100; tight-fitting, full face-piece MEPA PAPR 100, 1000, o head cherryd HEPA power particulate is reprised or interprised are pressure and on the PA pressure and on the PA pressure and on the pressure deviced deviced HEPA PAPR			
Personal protection				
Eye and face protection	 When handling very small quantities of the material eye protection may not be required. For laboratory, larger scale or bulk handling or where regular exposure in an occupational setting occurs: Chemical goggles. Face shield. Full face shield may be required for supplementary but never for primary protection of eyes. Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses 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] 			
Skin protection	See Hand protection below			
Hands/feet protection	 Rubber gloves (nitrile or low-protein, powder-free latex, latex/ nitrile). Employees allergic to latex gloves should use nitrile gloves in preference. Double gloving should be considered. PVC gloves. Change gloves frequently and when contaminated, punctured or torn. Wash hands immediately after removing gloves. Protective shoe covers. [AS/NZS 2210] Head covering. Experience indicates that the following polymers are suitable as glove materials for protection against undissolved, dry solids, where abrasive particles are not present. polychloroprene. nitrile rubber. butyl rubber. fluorocaoutchouc. polyvinyl chloride. Gloves should be examined for wear and/ or degradation constantly. 			
Body protection	See Other protection below			
Other protection	 For quantities up to 500 grams a laboratory coat may be suitable. For quantities up to 1 kilogram a disposable laboratory coat or coverall of low permeability is recommended. Coveralls should be buttoned at collar and cuffs. For quantities over 1 kilogram and manufacturing operations, wear disposable coverall of low permeability and disposable shoe covers. For manufacturing operations, air-supplied full body suits may be required for the provision of advanced respiratory protection. Eye wash unit. Ensure there is ready access to an emergency shower. For Emergencies: Vinyl suit 			

Respiratory protection

Particulate. (AS/NZS 1716 & 1715, EN 143:2000 & 149:001, ANSI Z88 or national equivalent)

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	-AUS / Class1 P2	-
up to 50	1000	-	-AUS / Class 1 P2

up to 50	5000	Airline *	-
up to 100	5000	-	-2 P2
up to 100	10000	-	-3 P2
100+			Airline**

* - Continuous Flow ** - Continuous-flow or positive pressure demand

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	White odourless powder; soluble in water.		
Physical state	Divided Solid	Relative density (Water = 1)	Not Available
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Applicable	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Applicable
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	Not Applicable	Taste	Not Available
Evaporation rate	Not Applicable	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Applicable	Gas group	Not Available
Solubility in water	Miscible	pH as a solution (Not Available%)	Not Available
Vapour density (Air = 1)	Not Applicable	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Information on toxicological effects

InhabitThe material is not thought to produce either adverse health effects or irritation of the respiratory tract following exposure of animals by at least one other protue and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting.Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled.ImpetionAccidental ingestion of the material may be exposed to further risk if handling and use of the material result in excessive exposures.Accidental ingestion of the material may be damaging to the health of the individual. Penson suth inpaired respiratory diarhoea, nausea, heartburn and itchiness of the anus. They are fairly safe in the non-allergic.The material is not thought to produce adverse health effects or skin irritation following contact (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.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 is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may cause transient discomfort characterised by tearing or conjunctival redness (as with windburn). Slight abrasive damage may also result.Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the genulation. There		
IngestionAccidental ingestion of the material may be damaging to the health of the individual. Penicillins can cause temporary diarrhoea, nausea, heartburn and itchiness of the anus. They are fairly safe in the non-allergic.Skin ContactThe material is not thought to produce adverse health effects or skin irritation following contact (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. 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.EyeAlthough the material is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may cause transient discomfort characterised by tearing or conjunctival redness (as with windburn). Slight abrasive damage may also result.ChronicSubstance accumulation, in the human body, may occur and may cause a sensitisation reaction in some persons compared to the general population. There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the general	Inhaled	The material is not thought to produce either adverse health effects or irritation of the respiratory tract following inhalation (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting. Persons with impaired respiratory function, airway diseases and conditions such as emphysema or chronic bronchitis, may incur further disability if excessive concentrations of particulate are inhaled. If prior damage to the circulatory or nervous systems has occurred or if kidney damage has been sustained, proper screenings should be conducted on individuals who may be exposed to further risk if handling and use of the material result in excessive exposures.
Skin ContactThe material is not thought to produce adverse health effects or skin irritation following contact (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. 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.EveAlthough the material is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may cause transient discomfort characterised by tearing or conjunctival redness (as with windburn). Slight abrasive damage may also result.ChronicSubstance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general 	Ingestion	Accidental ingestion of the material may be damaging to the health of the individual. Penicillins can cause temporary diarrhoea, nausea, heartburn and itchiness of the anus. They are fairly safe in the non-allergic.
Eye Although the material is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may cause transient discomfort characterised by tearing or conjunctival redness (as with windburn). Slight abrasive damage may also result. Chronic Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the	Skin Contact	The material is not thought to produce adverse health effects or skin irritation following contact (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. 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.
Chronic Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the	Eye	Although the material is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may cause transient discomfort characterised by tearing or conjunctival redness (as with windburn). Slight abrasive damage may also result.
	Chronic	Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence that inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the

	general population. Long term exposure to high dust concentrations may cause changes in lung function i.e. pneumoconiosis, caused by particles less than 0.5 micron penetrating and remaining in the lung. Repeated ingestion of penicillins can cause nausea and/or vomiting, stomach upset, diarrhoea, sore or dry throat, and a sore or black hairy tongue. Resistance may develop for some bacteria, and there may be overgrowth of non-susceptible organisms (superinfection). Exposure to small quantities may induce hypersensitivity reactions characterised by acute bronchospasm, hives (urticaria), deep dermal wheals (angioneurotic oedema), running nose (rhinitis) and blurred vision. Anaphylactic shock and skin rash (non-thrombocytopenic purpura) may occur.			
Piperacillin / Tazobactam For	ΤΟΧΙΟΙΤΥ	IRRITATION		
Injection	Not Available	Not Available		
	ΤΟΧΙΟΙΤΥ	IRRITATION		
piperacillin sodium	Oral (Rat) LD50; >10000 mg/kg ^[2]	Not Available		
	ΤΟΧΙΟΙΤΥ	IRRITATION		
tazobactam sodium	Oral (Mouse) LD50; >5000 mg/kg ^[2]	Not Available		
	ΤΟΧΙΟΙΤΥ	IRRITATION		
sodium bicarbonate	Oral (Mouse) LD50; 3360 mg/kg ^[2]	Eye (rabbit): 100 mg rinse - mild		
Legend:	 Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances 			
DIDEDACIULIN CODIUM	Heemerrheen recorded			

PIPERACILLIN SODIUM	Haemorrhage recorded.				
TAZOBACTAM SODIUM	Genetic Toxicity Mutagenic potential was assessed in 5 in vitro and 1 in vivo assay; positive results occurred in one assay (forward mutation assay using mouse lymphoma cells). However, the results were negative when the combination of Pipracillin Sodium and Tazobactum Sodium was assessed in a similar battery of tests. Reproductive Toxicity Studies in mice and rats have shown no evidence of impaired fertility. * Wyeth SDS				
SODIUM BICARBONATE	Oral (human-infant) TDLo: 1260 mg/kg Skin (human): 30 mg/3d-I-mild The material may cause skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin.				
Acute Toxicity	¥	Carcinogenicity	×		
Skin Irritation/Corrosion	×	Reproductivity	×		
Serious Eye Damage/Irritation	× STOT - Single Exposure ×				
Respiratory or Skin sensitisation	×	STOT - Repeated Exposure	×		
Mutagenicity	×	Aspiration Hazard	×		
		Legend: X – Data either nor – Data available	t available or does not fill the criteria for classification to make classification		

SECTION 12 Ecological information

oxicity					
Piperacillin / Tazobactam For Injection	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
piperacillin sodium	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
tazobactam sodium	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
sodium bicarbonate	NOEC(ECx)	240h	Algae or other aquatic plants	26.8mg/l	2
	LC50	96h	Fish	833.28mg/L	4
	EC50	48h	Crustacea	101mg/l	2
Legend:	Extracted from Ecotox databas - Bioconcentrati	1. IUCLID Toxicity Data 2. Europe ECHA F e - Aquatic Toxicity Data 5. ECETOC Aqua ion Data 8. Vendor Data	Registered Substances - Ecotoxicological Informati atic Hazard Assessment Data 6. NITE (Japan) - Bio	on - Aquatic Toxicity 4. L oconcentration Data 7. M	JS EPA, IETI (Japa

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
sodium bicarbonate	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation		
sodium bicarbonate	LOW (LogKOW = -0.4605)		
Mobility in soil			
Ingredient	Mobility		
sodium bicarbonate	HIGH (KOC = 1)		

SECTION 13 Disposal considerations

Waste treatment methods			
Product / Packaging disposal	 Recycle wherever possible. Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material) Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed. 		

SECTION 14 Transport information

Labels Required	
Marine Pollutant	NO

Land transport (UN): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Transport in bulk according to Annex II of MARPOL and the IBC code

Not Applicable

Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

Product name	Group
piperacillin sodium	Not Available
tazobactam sodium	Not Available
sodium bicarbonate	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
piperacillin sodium	Not Available
tazobactam sodium	Not Available
sodium bicarbonate	Not Available

SECTION 15 Regulatory information

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

piperacillin sodium is found on the following regulatory lists	
Not Applicable	

tazobactam sodium is found on the following regulatory lists Not Applicable

sodium bicarbonate is found on the following regulatory lists Not Applicable

National Inventory Status

National Inventory	Status		
Australia - AIIC / Australia Non-Industrial Use	No (tazobactam sodium)		
Canada - DSL	lo (piperacillin sodium; tazobactam sodium)		
Canada - NDSL	No (piperacillin sodium; tazobactam sodium; sodium bicarbonate)		
China - IECSC	No (piperacillin sodium; tazobactam sodium)		
Europe - EINEC / ELINCS / NLP	No (tazobactam sodium)		
Japan - ENCS	No (piperacillin sodium; tazobactam sodium)		
Korea - KECI	No (piperacillin sodium; tazobactam sodium)		
New Zealand - NZIoC	No (piperacillin sodium; tazobactam sodium)		

National Inventory	Status		
Philippines - PICCS	No (piperacillin sodium; tazobactam sodium)		
USA - TSCA	No (piperacillin sodium; tazobactam sodium)		
Taiwan - TCSI	Yes		
Mexico - INSQ	No (piperacillin sodium; tazobactam sodium)		
Vietnam - NCI	No (piperacillin sodium; tazobactam sodium)		
Russia - FBEPH	No (piperacillin sodium; tazobactam sodium)		
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.		

SECTION 16 Other information

Revision Date	10/12/2021
Initial Date	31/03/2008

SDS Version Summary

Version	Date of Update	Sections Updated
3.1	01/11/2019	One-off system update. NOTE: This may or may not change the GHS classification
4.1	10/12/2021	Classification change due to full database hazard calculation/update.

Other information

Ingredients with multiple cas numbers

Name	CAS No
sodium bicarbonate	144-55-8, 1182403-48-0, 151127-72-9, 172672-17-2, 196216-68-9, 199723-76-7, 246180-97-2, 276253-15-7, 29136-18-3

Classification of the preparation and its individual components has drawn on official and authoritative sources as well as independent review by the Chemwatch Classification committee using available literature references.

The 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. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

Definitions and abbreviations

PC-TWA: Permissible Concentration-Time Weighted Average PC-STEL: Permissible Concentration-Short Term Exposure Limit IARC: International Agency for Research on Cancer ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit TEEL: Temporary Emergency Exposure Limit。 IDLH: Immediately Dangerous to Life or Health Concentrations ES: Exposure Standard OSF: Odour Safety Factor NOAEL :No Observed Adverse Effect Level LOAEL: Lowest Observed Adverse Effect Level TLV: Threshold Limit Value LOD: Limit Of Detection OTV: Odour Threshold Value BCF: BioConcentration Factors BEI: Biological Exposure Index AIIC: Australian Inventory of Industrial Chemicals **DSL: Domestic Substances List** NDSL: Non-Domestic Substances List IECSC: Inventory of Existing Chemical Substance in China EINECS: European INventory of Existing Commercial chemical Substances ELINCS: European List of Notified Chemical Substances NLP: No-Longer Polymers ENCS: Existing and New Chemical Substances Inventory KECI: Korea Existing Chemicals Inventory NZIoC: New Zealand Inventory of Chemicals PICCS: Philippine Inventory of Chemicals and Chemical Substances TSCA: Toxic Substances Control Act TCSI: Taiwan Chemical Substance Inventory INSQ: Inventario Nacional de Sustancias Químicas NCI: National Chemical Inventory FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances This document is copyright.

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