



NEWMIND  
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## CERTIFICATE OF ANALYSIS

### Cyclazodone

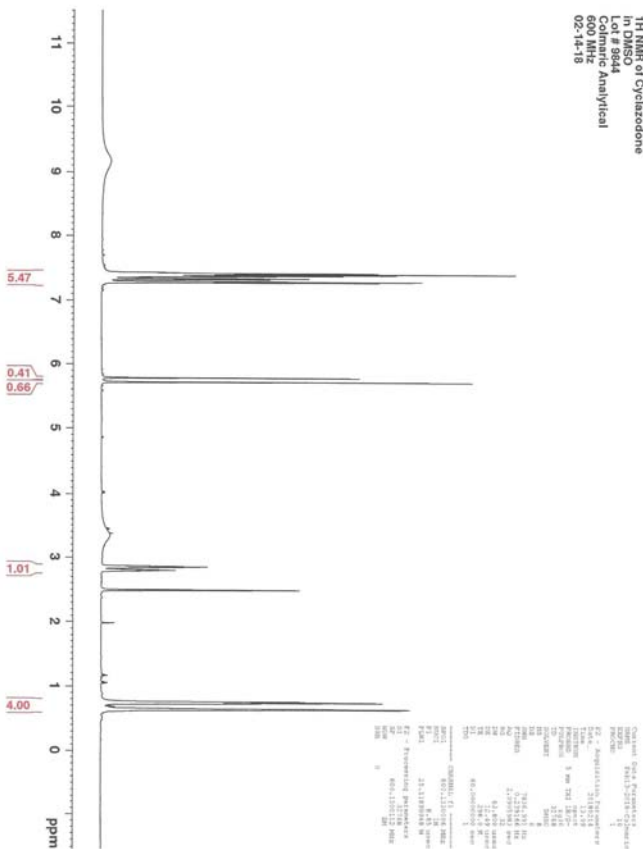
( 2-(cyclopropylamino)-5-phenyl-1,3-oxazol-4-one )

Material Lot #: 20171202      Manufacture Date: 01/08/2018  
Country of Origin: China      Retesting Date: 01/07/2021

Analysis	Claim	Result
Cyclazodone	≥98.0%	98.0%

Test	Claim	Result
Identification	Proton NMR spectrum conforms to structure.	Conforms
Heavy Metals	<10 ppm	Conforms
Lead	<1 ppm	Conforms
Arsenic	<1 ppm	Conforms
Cadmium	<1 ppm	Conforms
Mercury	<1 ppm	Conforms

Cyclazodone should be stored at or below room temperature in a tightly sealed durable container. Cyclazodone should be protected from excess heat, direct sunlight, excess humidity and moisture. Cyclazodone has a stable shelf life of 3 years from the date of testing when properly stored.



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## CERTIFICATE OF ANALYSIS

Product Name	Cyclazodone	Client Lot Number	20171202
Report Date	02/17/18	Laboratory #	9844

Test	Method	Result
Identification	Proton NMR	Conforms to structure
Lead	ICP-MS USP <730>	0.044 ppm
Arsenic	ICP-MS USP <730>	<0.001 ppm
Cadmium	ICP-MS USP <730>	0.011 ppm
Mercury	ICP-MS USP <730>	0.170 ppm

Collin Thomas *COT*  
Laboratory Manager

02/17/2018 2/17/18  
Date

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### Material Safety Data Sheet

Version 3.2  
Revision Date 01/15/2013

#### Section 1 - CHEMICAL PRODUCT AND COMPANY IDENTIFICATION

**PRODUCT NAME**  
CYCLAZODONE

#### SYNONYMS

C12-H12-N2-O2, 2-(cyclopropylamino)-5-phenyl-2-oxazolin-4-one, 2-(cyclopropylamino)-5-phenyl-2-oxazolin-4-one, cyclopropylpemoline, Cyclexanone, cyclazodonom, "pemoline, cyclopropyl-", "LD 3695", "4(5H)-oxazolone, 2-(cyclopropylamino)-5-phenyl-", "4(5H)-oxazolone, 2-(cyclopropylamino)-5-phenyl-", phenyl-5-cyclopropylamino-2-oxazolinone-4, phenyl-5-cyclopropylamino-2-oxazolinone-4, "2-oxazolin-4-one, 2-(cyclopropylamino)-5-phenyl-", "2-oxazolin-4-one, 2-(cyclopropylamino)-5-phenyl-", "Cyclazadone (sic)"

#### PROPER SHIPPING NAME

MEDICINE, SOLID, TOXIC, N.O.S.(contains cyclazodone)

#### PRODUCT USE

Analeptic agent. Never marketed. Cyclazodone is a centrally acting stimulant drug which is related to other drugs such as pemoline and 4-methylaminorex. It is a banned stimulant under the World Anti-Doping Agency prohibited list.

#### SUPPLIER

Company: Synaptent LLC  
Address:  
47 W Polk St 100-241  
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IL, 60605  
USA  
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+1 888-679-6278  
Fax: +1 312-577-1689

#### Section 2 - HAZARDS IDENTIFICATION

#### STATEMENT OF HAZARDOUS NATURE

**HAZARDOUS SUBSTANCE. DANGEROUS GOODS.** According to the Criteria of NOHSC, and the ADG Code.

#### POISONS SCHEDULE

None

#### RISK

» Toxic by inhalation and if swallowed.

#### SAFETY

» Keep locked up.

- » Do not breathe dust.
- » Wear suitable protective clothing.
- » In case of insufficient ventilation wear suitable respiratory equipment.
- » Use only in well ventilated areas.
- » Keep container in a well ventilated place.
- » To clean the floor and all objects contaminated by this material use water and detergent.
- » This material and its container must be disposed of in a safe way.
- » Keep away from food drink and animal feeding stuffs.
- » Take off immediately all contaminated clothing.

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- » This material and its container must be disposed of as hazardous waste.
- » In case of accident by inhalation: remove casualty to fresh air and keep at rest.

## Section 3 - COMPOSITION / INFORMATION ON INGREDIENTS

NAME	CAS RN	%
cyclazodone	14461-91-7	>98

## Section 4 - FIRST AID MEASURES

## SWALLOWED

- Give a slurry of activated charcoal in water to drink. NEVER GIVE AN UNCONSCIOUS PATIENT WATER TO DRINK.
- At least 3 tablespoons in a glass of water should be given.
- Although induction of vomiting may be recommended (IN CONSCIOUS PERSONS ONLY), such a first aid measure is dissuaded due to the risk of aspiration of stomach contents. (i) It is better to take the patient to a doctor who can decide on the necessity and method of emptying the stomach. (ii) Special circumstances may however exist; these include non-availability of charcoal and the ready availability of the doctor.

NOTE: If vomiting is induced, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.

NOTE: Wear protective gloves when inducing vomiting.

- REFER FOR MEDICAL ATTENTION WITHOUT DELAY.
- In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition.
- If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the MSDS should be provided. Further action will be the responsibility of the medical specialist.
- If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the MSDS. (ICSC20305/20307).

## EYE

- » If this product comes in contact with the eyes:
- Immediately hold eyelids apart and flush the eye continuously with 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.
- Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.
- Transport to hospital or doctor without delay.
- Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

## SKIN

- » If skin or hair contact occurs:
- Flush skin and hair with running water (and soap if available).
- Seek medical attention in event of irritation.

## INHALED

- If fumes or combustion products are inhaled remove from contaminated area.
- Lay patient down. Keep warm and rested.
- Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.
- Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask

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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 of 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 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
- Combustion products include: carbon monoxide (CO), carbon dioxide (CO2), nitrogen oxides (NOx), other pyrolysis products typical of burning organic material. May emit poisonous fumes.

## FIRE INCOMPATIBILITY

- Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result.

## HAZCHEM: 2X

## Personal Protective Equipment

- Gas tight chemical resistant suit.
- Limit exposure duration to 1 BA set 30 mins.

## Section 6 - ACCIDENTAL RELEASE MEASURES

## 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

- Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- Prevent, by any means available, spillage from entering drains or water course.
- Stop leak if safe to do so.
- Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labelled containers for recycling.
- Neutralise/decontaminate residue.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- If contamination of drains or waterways occurs, advise emergency services.

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- device, or pocket mask as trained. Perform CPR if necessary.
- Transport to hospital, or doctor, without delay.

## NOTES TO PHYSICIAN

- » for poisons (where specific treatment regime is absent):

## BASIC TREATMENT

- Establish a patent airway with suction where necessary.
- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- Administer oxygen by non-rebreather mask at 10 to 15 L/min.
- Monitor and treat, where necessary, for pulmonary oedema .
- Monitor and treat, where necessary, for shock.
- Anticipate seizures .
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.

## ADVANCED TREATMENT

- Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- Positive-pressure ventilation using a bag-valve mask might be of use.
- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994.

## Section 5 - FIRE FIGHTING MEASURES

## EXTINGUISHING MEDIA

- Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog - Large fires only.

## FIRE FIGHTING

- Alert Fire Brigade and tell them location and nature of hazard.
  - Wear full body protective clothing with breathing apparatus.
  - Prevent, by any means available, spillage from entering drains or water course.
  - 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.
- When any large container (including road and rail tankers) is involved in a fire, consider evacuation by 800 metres in all directions.

## FIRE/EXPLOSION HAZARD

- Combustible solid which burns but propagates flame with difficulty.
- Avoid generating dust, particularly clouds of dust in a confined or unventilated space as dusts may form an

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

## Section 7 - HANDLING AND STORAGE

## PROCEDURE FOR 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 storing and handling recommendations.
  - Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
- Empty containers may contain residual dust which has the potential to accumulate following settling. Such dusts may explode in the presence of an appropriate ignition source.
- Do NOT cut, drill, grind 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.

## SUITABLE CONTAINER

- Glass container is suitable for laboratory quantities.
  - Lined metal can, lined metal pail/ can.
  - Plastic pail.
  - Polyliner drum.
  - Packing as recommended by manufacturer.
  - Check all containers are clearly labelled and free from leaks.
- For low viscosity materials
- Drums and jerricans must be of the non-removable head type.
  - Where a can is to be used as an inner package, the can must have a screwed enclosure.
- For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.):
- Removable head packaging;
  - Cans with friction closures and
  - low pressure tubes and cartridges may be used.

Where combination packages are used, and the inner packages are of glass, there must be sufficient inert cushioning material in contact with inner and outer packages \*.

In addition, where inner packagings are glass and contain liquids of packing group I and II there must be sufficient inert absorbent to absorb any spillage \*.

\* unless the outer packaging is a close fitting moulded plastic box and the substances are not incompatible with the plastic.

All inner and sole packagings for substances that have been assigned to Packaging Groups I or II on the basis of inhalation toxicity criteria, must be hermetically sealed.

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