

B-TC802 Part A

Barnes Products P/L

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Chemwatch: **5246-14**Version No: **3.1.1.1**

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 2

Issue Date: **15/03/2017**Print Date: **29/03/2017**S.GHS.AUS.EN

SECTION 1 IDENTIFICATION OF THE SUBSTANCE / MIXTURE AND OF THE COMPANY / UNDERTAKING

Product Identifier

Product name	B-TC802 Part A
Synonyms	TC802 Part A
Other means of identification	Not Available

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

Relevant identified uses

Polyurethane resin.

Details of the supplier of the safety data sheet

Registered company name	Barnes Products P/L	
Address	Greenhills Avenue Moorebank NSW 2170 Australia	
Telephone	+61 2 9793 7555	
Fax	+61 2 9793 7091	
Website	http://www.barnes.com.au/	
Email	sales@barnes.com.au	

Emergency telephone number

Association / Organisation	Not Available	
Emergency telephone numbers	61 2 9793 7555 Business Hours	
Other emergency telephone numbers	Poisons Information Centre 13 1126 after hours	

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

Poisons Schedule	Not Applicable	
Classification ^[1]	Acute Toxicity (Inhalation) Category 4, Skin Corrosion/Irritation Category 2, Eye Irritation Category 2A, Respiratory Sensitizer Category 1, Skin Sensitizer Category 1, Carcinogenicity Category 2, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation), Specific target organ toxicity - repeated exposure Category 2	
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI	

Label elements

GHS label elements





SIGNAL WORD

DANGER

H332	Harmful if inhaled.	
H315	Causes skin irritation.	
H319	Causes serious eye irritation.	
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.	
H317	May cause an allergic skin reaction.	
H351	Suspected of causing cancer.	
H335	May cause respiratory irritation.	
H373	May cause damage to organs through prolonged or repeated exposure.	
AUH066	Repeated exposure may cause skin dryness and cracking	

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.	
P260	Oo not breathe dust/fume/gas/mist/vapours/spray.	
P271	Use only outdoors or in a well-ventilated area.	
P280	Wear protective gloves/protective clothing/eye protection/face protection.	
P281	Use personal protective equipment as required.	
P285	In case of inadequate ventilation wear respiratory protection.	
P272	Contaminated work clothing should not be allowed out of the workplace.	

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.	
P308+P313	IF exposed or concerned: Get medical advice/attention.	
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER or doctor/physician.	
P362	Take off contaminated clothing and wash before reuse.	
P302+P352	IF ON SKIN: Wash with plenty of soap and water.	
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P312	Call a POISON CENTER or doctor/physician if you feel unwell.	

Precautionary statement(s) Storage

P405	Store locked up.	
P403+P233 Store in a well-ventilated place. Keep container tightly closed.		

Precautionary statement(s) Disposal

P501	Dispose of contents/container in accordance with local regulations.
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SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
101-68-8	40-50	4,4'-diphenylmethane diisocyanate (MDI)
6846-50-0	30-50	2.2.4-trimethyl-1.3-pentanediol diisobutyrate
Not Available	10-20	modified MDI
78-40-0	<5	triethyl phosphate

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Eye Contact

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 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 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 air procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pomask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay. Following uptake by inhalation, move person to an area free from risk of further exposure. Oxygen or artificial respiration should be administered as needed. Asthmatic-type symptoms may develop and may be immediate or delayed up to seven hours. Treatment is essentially symptomatic. A physician should be consulted. 			
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 patient is unconscious, DO NOT attempt to give fluids by mouth. 			

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

For sub-chronic and chronic exposures to isocyanates:

- This material may be a potent pulmonary sensitiser which causes bronchospasm even in patients without prior airway hyperreactivity.
- · Clinical symptoms of exposure involve mucosal irritation of respiratory and gastrointestinal tracts.
- · Conjunctival irritation, skin inflammation (erythema, pain vesiculation) and gastrointestinal disturbances occur soon after exposure.
- Pulmonary symptoms include cough, burning, substernal pain and dyspnoea.
- · Some cross-sensitivity occurs between different isocyanates.
- Noncardiogenic pulmonary oedema and bronchospasm are the most serious consequences of exposure. Markedly symptomatic patients should receive oxygen, ventilatory support and an intravenous line.
- Treatment for asthma includes inhaled sympathomimetics (epinephrine [adrenalin], terbutaline) and steroids.
- Activated charcoal (1 g/kg) and a cathartic (sorbitol, magnesium citrate) may be useful for ingestion.
- Mydriatics, systemic analgesics and topical antibiotics (Sulamyd) may be used for corneal abrasions.
- ▶ There is no effective therapy for sensitised workers.

[Ellenhorn and Barceloux; Medical Toxicology]

NOTE: Isocyanates cause airway restriction in naive individuals with the degree of response dependant on the concentration and duration of exposure. They induce smooth muscle contraction which leads to bronchoconstrictive episodes. Acute changes in lung function, such as decreased FEV1, may not represent sensitivity.

[Karol & Jin, Frontiers in Molecular Toxicology, pp 56-61, 1992]

Personnel who work with isocyanates, isocyanate prepolymers or polyisocyanates should have a pre-placement medical examination and periodic examinations thereafter, including a pulmonary function test. Anyone with a medical history of chronic respiratory disease, asthmatic or bronchial attacks, indications of allergic responses, recurrent eczema or sensitisation conditions of the skin should not handle or work with isocyanates. Anyone who develops chronic respiratory distress when working with isocyanates should be removed from exposure and examined by a physician. Further exposure must be avoided if a sensitivity to isocyanates or polyisocyanates has developed.

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

- Water spray or fog.
- Alcohol stable foam.
- Dry chemical powder.
- ▶ Carbon dioxide.

Special hazards arising from the substrate or mixture

Combustible.

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 full body protective clothing with breathing apparatus.
- ▶ Prevent, by any means available, spillage from entering drains or water course.
- ▶ Use water delivered as a fine spray to control fire and cool adjacent area.
- ► Avoid spraying water onto liquid pools.
- ► DO NOT approach containers suspected to be hot.
- ▶ Cool fire exposed containers with water spray from a protected location.

Fire/Explosion Hazard

- ▶ Moderate fire hazard when exposed to heat or flame.
- When heated to high temperatures decomposes rapidly generating vapour which pressures and may then rupture containers with release of flammable and highly toxic isocyanate vapour.

	 ▶ Burns with acrid black smoke and poisonous fumes. ▶ Combustion yields traces of highly toxic hydrogen cyanide HCN, plus toxic nitrogen oxides NOx and carbon monoxide. Combustion products include: carbon dioxide (CO2) isocyanates and minor amounts of hydrogen cyanide nitrogen oxides (NOx) ritrogen oxides (NOx)
	other pyrolysis products typical of burning organic material. May emit corrosive fumes.
HAZCHEM	Not Applicable

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	Slippery when spilt. Remove all ignition sources. Clean up all spills immediately. Avoid breathing vapours and contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Contain and absorb spill with sand, earth, inert material or vermiculite. Wipe up. Place in a suitable, labelled container for waste disposal.
Major Spills	Slippery when spilt. For isocyanate spills of less than 40 litres (2 m2): Evacuate area from everybody not dealing with the emergency, keep them upwind and prevent further access, remove ignition sources and, if inside building, ventilate area as well as possible. Notify supervision and others as necessary. Put on personal protective equipment (suitable respiratory protection, face and eye protection, protective suit, gloves and impermeable boots). Control source of leakage (where applicable). Dike the spill to prevent spreading and to contain additions of decontaminating solution. Prevent the material from entering drains. Estimate spill pool volume or area. Avoid contamination with water, alkalies and detergent solutions. Material reacts with water and generates gas, pressurises containers with even drum rupture resulting. DO NOT reseal container if contamination is suspected. Open all containers with care. Moderate hazard. Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves. Prevent, by any means available, spillage from entering drains or water course. No smoking, naked lights or ignition sources. Increase ventilation.

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

→ DO NOT	allow clothing	wet with m	naterial to stay i	n contact with skin
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- ▶ Avoid all personal contact, including inhalation.
- ▶ Wear protective clothing when risk of exposure occurs.
- Safe handling

 Use in a well-ventilated area.
 - ▶ Prevent concentration in hollows and sumps.
 - ► DO NOT enter confined spaces until atmosphere has been checked.
 - Avoid smoking, naked lights or ignition sources.
 - ► Avoid contact with incompatible materials.

► Store in original containers.

- Keep containers securely sealed.
- ▶ No smoking, naked lights or ignition sources.
- Store in a cool, dry, well-ventilated area.
 - 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 ▶ Packaging as recommended by manufacturer. · Avoid reaction with water, alcohols and detergent solutions. ▶ Isocyanates and thioisocyanates are incompatible with many classes of compounds, reacting exothermically to release toxic gases. Reactions with amines, strong bases, aldehydes, alcohols, alkali metals, ketones, mercaptans, strong oxidisers, hydrides, phenols, and peroxides can cause vigorous releases of heat. Acids and bases initiate polymerisation reactions in these materials. ▶ Isocyanates easily form adducts with carbodiimides, isothiocyanates, ketenes, or with substrates containing activated CC or CN bonds. Storage ▶ Some isocyanates react with water to form amines and liberate carbon dioxide. This reaction may also generate large incompatibility volumes of foam and heat. Esters react with acids to liberate heat along with alcohols and acids. ▶ Strong oxidising acids may cause a vigorous reaction with esters that is sufficiently exothermic to ignite the reaction products. ▶ Heat is also generated by the interaction of esters with caustic solutions. Flammable hydrogen is generated by mixing esters with alkali metals and hydrides. • Esters may be incompatible with aliphatic amines and nitrates. strong acids

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

Control parameters

Other information

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	4,4'-diphenylmethane diisocyanate (MDI)	Isocyanates, all (as-NCO)	0.02 mg/m3	0.07 mg/m3	Not Available	Sen

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
4,4'-diphenylmethane diisocyanate (MDI)	Methylene diphenyl diisocyanate; (Diphenylmethane diisocyanate; MDI)	0.45 mg/m3	Not Available	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	Methylenebis(isocyanato-benzene), 1,1'-; (Diphenyl methane diisocyanate)	29 mg/m3	40 mg/m3	240 mg/m3
triethyl phosphate	Triethyl phosphate; (TEP)	23 mg/m3	250 mg/m3	320 mg/m3

Ingredient	Original IDLH	Revised IDLH
4,4'-diphenylmethane diisocyanate (MDI)	100 mg/m3	75 mg/m3
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	Not Available	Not Available
modified MDI	Not Available	Not Available
triethyl phosphate	Not Available	Not Available

Exposure controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.

Appropriate engineering controls

Process controls which involve changing the way a job activity or process is done to reduce the risk.

Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

The basic types of engineering controls are:

Personal protection ► Safety glasses with side shields. Chemical goggles. ► Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy Eye and face document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should protection 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. Skin protection See Hand protection below NOTE: Fig. The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact. ► Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed. The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. Hands/feet protection The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturizer is recommended. ▶ Isocyanate resistant materials include Teflon, Viton, nitrile rubber and some PVA gloves. ▶ Protective gloves and overalls should be worn as specified in the appropriate national standard. ► Contaminated garments should be removed promptly and should not be re-used until they have been decontaminated. ▶ NOTE: Natural rubber, neoprene, PVC can be affected by isocyanates **Body protection** See Other protection below Overalls. ▶ P.V.C. apron. Other protection Barrier cream. ▶ Skin cleansing cream. ▶ Eve wash unit. Thermal hazards Not Available

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the *computer-generated* selection:

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Material	СРІ
PE/EVAL/PE	С

- * CPI Chemwatch Performance Index
- A: Best Selection
- B: Satisfactory; may degrade after 4 hours continuous immersion
- C: Poor to Dangerous Choice for other than short term immersion

NOTE: As a series of factors will influence the actual performance of the glove, a final selection must be based on detailed observation. -

* Where the glove is to be used on a short term, casual or infrequent basis, factors such as "feel" or convenience (e.g. disposability), may dictate a choice of gloves which might otherwise be unsuitable following long-term or frequent use. A qualified practitioner should be consulted.

Respiratory protection

Type A-P Filter of sufficient capacity. (AS/NZS 1716 & 1715, EN 143:2000 & 149:2001, ANSI Z88 or national equivalent)

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A-AUS P2	-	A-PAPR-AUS / Class 1 P2
up to 50 x ES	-	A-AUS / Class 1 P2	-
up to 100 x ES	-	A-2 P2	A-PAPR-2 P2 ^

^ - Full-face

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)

Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content. The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.

- In certain circumstances, personal protection of the individual employee is necessary. Personal protective devices should be regarded as being supplementary to substitution and engineering control and should not be used in preference to them as they do nothing to eliminate the hazard.
- However, in some situations, minimising exposure to isocyanates by enclosure and ventilation is not possible, and occupational exposure

- standards may be exceeded, particularly during on-site mixing of paints, spray-painting, foaming and maintenance of machine and ventilation systems. In these situations, air-line respirators or self-contained breathing apparatus complying with the appropriate nationals standard must be used.
- Organic vapour respirators with particulate pre- filters and powered, air-purifying respirators are NOT suitable.
- Personal protective equipment must be appropriately selected, individually fitted and workers trained in their correct use and maintenance. Personal protective equipment must be regularly checked and maintained to ensure that the worker is being protected.
- Air- line respirators or self-contained breathing apparatus complying with the appropriate national standard should be used during the clean-up of spills and the repair or clean-up of contaminated equipment and similar situations which cause emergency exposures to hazardous atmospheric concentrations of isocyanate.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Appearance Pale yellow translucent liquid with slight characteristic odour; reacts slowly with water.		
Physical state	Liquid	Relative density (Water = 1)	1.100 @25C
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	>138
Melting point / freezing point (°C)	Not Applicable	Viscosity (cSt)	44.000 @25C
Initial boiling point and boiling range (°C)	>138 (decomposes)	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	102 (PMCC)	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	<0.1 @25C	Gas group	Not Available
Solubility in water (g/L)	Reacts	pH as a solution (1%)	Not Applicable
Vapour density (Air = 1)	>1	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. Presence of elevated temperatures.
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

Inhaled

The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung

	Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo. Inhalation hazard is increased at higher temperatures. Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful. The vapour/mist may be highly irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis and pulmonary oedema. Possible neurological symptoms arising from isocyanate exposure include headache, insomnia, euphoria, ataxia, anxiety neurosis, depression and paranoia. Gastrointestinal disturbances are characterised by nausea and vomiting. Pulmonary sensitisation may produce asthmatic reactions ranging from minor breathing difficulties to severe allergic attacks; this may occur following a single acute exposure or may develop without warning for several hours after exposure. Sensitized people can react to very low doses, and should not be allowed to work in situations allowing exposure to this material. Continued exposure of sensitised persons may lead to possible long term respiratory impairment. Inhalation hazard is increased at higher temperatures.				
Ingestion	Accidental ingestion of the material may be seriously damaging that ingestion of less than 40 gram may be fatal.	g to the health of the individual; animal experiments indicate			
Skin Contact	The material may cause mild but significant inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering. Repeated exposure may cause skin cracking, flaking or drying following normal handling and use. Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. Open cuts, abraded or irritated skin should not be exposed to this material 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.				
Eye	This material may produce eye irritation in some persons and p Moderate inflammation may be expected with redness; conjunc	-			
Chronic	There has been concern that this material can cause cancer or mutations, but there is not enough data to make an assessment. Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. Harmful: danger of serious damage to health by prolonged exposure through inhalation. This material can cause serious damage if one is exposed to it for long periods. It can be assumed that it contains a substance which can produce severe defects. Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, gasping, severe distress, even loss of consciousness and fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance, euphoria, inco-ordination, anxiety, depression and paranoia.				
B-TC802 Part A	Not Available	IRRITATION Not Available			
4,4'-diphenylmethane diisocyanate (MDI)	TOXICITY Dermal (rabbit) LD50: >6200 mg/kg ^[2] Inhalation (rat) LC50: 0.49 mg/l/4hr ^[1] Oral (rat) LD50: >2000 mg/kg ^[1]	IRRITATION Dermal Sensitiser * Skin (rabbit): 500 mg /24 hours			
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	TOXICITY Dermal (rabbit) LD50: >2000 mg/kg ^[1] Inhalation (rat) LC50: >5.3 mg/l/6h*** ^[2] Oral (rat) LD50: >2000 mg/kg ^[1]	IRRITATION Eye (rabbit): very slight** Skin (guinea pig): 5000mg/kg-mild			
triethyl phosphate	TOXICITY dermal (guinea pig) LD50: >21450 mg/kg ^[2] Oral (rat) LD50: >800 mg/kg ^[1]	IRRITATION Eye : Severe * Skin : Severe *			

4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)

Legend:

The following information refers to contact allergens as a group and may not be specific to this product.

Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of

1. 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

view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other irritants may aggravate symptoms. Allergy causing activity is due to interactions with proteins.

Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema.

Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure

Aromatic and aliphatic diisocyanates may cause airway toxicity and skin sensitization. Monomers and prepolymers exhibit similar respiratory effect. Of the several members of diisocyanates tested on experimental animals by inhalation and oral exposure, some caused cancer while others produced a harmless outcome. This group of compounds has therefore been classified as cancer-causing.

Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, gasping, severe distress, even loss of consciousness and fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance, euphoria, inco-ordination, anxiety, depression and paranoia.

The substance is classified by IARC as Group 3:

NOT classifiable as to its carcinogenicity to humans.

Evidence of carcinogenicity may be inadequate or limited in animal testing.

Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate

2,2,4-TRIMETHYL-1,3-PENTANEDIOL DIISOBUTYRATE

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.

For 2,2,4-trimethyl-1,3-pentanediol diisobutyrate (TXIB)

Laboratory testing showed that TXIB does not cause genetic toxicity. It may damage the kidneys of developing animals but only at levels that also affect the adult.

NOAEL oral (rat), 103 days = 1% in diet *** NOEL oral (dog), 90 days = 1% in diet *** Mutagenicity/Genotoxicity Data: *** Chromosomal aberration assay: Negative (+/- activation) CHO/HGPRT assay: Negative (+/- activation) Salmonella-E.coli reverse mutation assay (Ames test): Negative (+/- activation) *,***,*** Various suppliers MSDS

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

Alkyl esters of phosphoric acid exhibit a low to moderate acute toxicity and metabolised. From studies done on mice, they are not likely to cause gene damage or affect reproduction. However, 2-ethylhexanoic acid produced an effect on newborn rats at high doses to the pregnant female.

NOTE: Substance has been shown to be mutagenic in at least one assay, or belongs to a family of chemicals producing damage or change to cellular DNA.

For toxicological endpoints, the NOAEL is 1000 mg/kg bw for subacute toxicity, a NOEL of 625 mg/kg bw/day for

teratogenicity and about 335 mg/kg bw for fertility effects. On the basis of all data on genotoxicity, a mutagenic effect of TEP is not assumed. The substance is harmful with a narcotic effect and, at high doses, shows certain neurotoxic properties (inhibition of cholinesterase) without indicating delayed neurotoxicity. The substance is not irritant to the skin. Studies on experimental animals showed no irritation properties. The most comprehensive documented, actual study (OECD Guideline 405. GLP) showed moderate irritation in 1 of 3 animals. According to the classification guideline this does not lead to a classification as irritant Triethylphosphate administered orally or i.p. to rodents is eliminated rapidly and comprehensively (90% within 16 hours). The very low acute dermal toxicity indicates a markedly lower adsorption than with oral administration. In a subchronic study (rat; oral, up to 6700 mg/kg bw) retarded weight gain, elevated liver and adrenals weight were observed (a validated NOEL or NOAEL cannot be given, the approx. NOEL based on the available data is about 670 mg/kg bw). A subacute 28-day study performed according actual guidelines after oral administration to rats determined a NOEL of 100 mg/kg bw (increased liver metabolism). An increase of liver metabolism is of no toxicological relevance, therefore a NOAEL of 1000 mg/kg bw was derived. After high doses to rats a depressive effect on the central nervous system and slight inhibition of cholineesterases are described. In mice, a NOAEL of 274 mg/kg bw was determined in an oral study (1/5 LD 50 = 274 mg/kg bw for 4 weeks). In rats a NOEL following inhalatory exposure (5h/d for 12 d) of 366 mg/m3 was determined. Conclusion: low toxicity, no serious damage in oral doses up to 6700 mg/kg bw. The NOAEL in the most relevant tests was 1000 mg/kg bw/day. Reproductive Toxicity In an early study using a small number of animals the litter size was reduced after repeated feeding to both sexes (rat) beginning at 670 mg/kg bw, although no symptoms of poisoning in the parent animals were described for the 670 mg/kg bw dose. The NOEL for effects on the litter size was 335 mg/kg bw/day. Neither testicular weights nor the histological investigation of the testes revealed remarkable findings in this study (max. dose 6700 mg/kg bw/day). A more recent 28-day study with doses up to 1000 mg/kg bw also showed no effect on the testicular weight [Bayer 1992]. A teratogenicity study in rats showed no evidence of a teratogenic potential up to the highest dose of 625 mg/kg bw/day (NOEL developmental toxicity). In the highest dose there was reduction of body weight gain, food intake and feces excretion as a sign of maternal toxicity (NOEL 125 mg/kg bw/day). Genetic Toxicity Aside from several Ames tests with negative results, triethylphosphate induces gene mutations without metabolic activation in S. typhimurium his C117, some bacteria, viruses and a yeast strain. For clarification of the endpoint gene mutation a HPRT test in V79 cell cultures was done. This test revealed a negative result with and without metabolic activation. In an in vitro UDS test on rat hepatocytes triethylphosphate showed no DNA-damaging effect. The results for Drosophilia melanogaster

in the limited documented recessive-lethal tests are contradictory, while in vivo studies on the mouse (cytogenetics in the

TRIETHYL PHOSPHATE

4,4'-DIPHENYLMETHANE The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may DIISOCYANATE (MDI) & produce conjunctivitis. TRIETHYL PHOSPHATE **Acute Toxicity** Carcinogenicity ~ Skin 0 Reproductivity Irritation/Corrosion STOT - Single Serious Eye Damage/Irritation Exposure Respiratory or Skin STOT - Repeated sensitisation **Exposure** 0 0 Mutagenicity **Aspiration Hazard**

bone marrow, dominant lethal test) were negative.

Legend:

igstyle igytyle igstyle igytyle igytyle

✓ – Data available to make classification

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

Ingredient	Endpoint	Test Duration (hr)	Species	Value	Source
4,4'-diphenylmethane diisocyanate (MDI)	LC50	96	Fish	>0.500mg/L	6
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	LC50	96	Fish	1.203mg/L	3
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	EC50	48	Crustacea	>1.46mg/L	1
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	EC50	96	Algae or other aquatic plants	0.107mg/L	3
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	EC50	504	Crustacea	>=1.3mg/L	2
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	NOEC	504	Crustacea	0.7mg/L	2
triethyl phosphate	LC50	96	Fish	55.013mg/L	3
triethyl phosphate	EC50	96	Algae or other aquatic plants	8.471mg/L	3
triethyl phosphate	EC0	24	Crustacea	=603mg/L	4
triethyl phosphate	NOEC	504	Crustacea	31.6mg/L	2
Legend:	Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data				

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
4,4'-diphenylmethane diisocyanate (MDI)	LOW (Half-life = 1 days)	LOW (Half-life = 0.24 days)
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	HIGH	HIGH
triethyl phosphate	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
4,4'-diphenylmethane diisocyanate (MDI)	LOW (BCF = 15)
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	LOW (BCF = 1)

triethyl phosphate LOW (BCF = 1.3)

Mobility in soil

Ingredient	Mobility
4,4'-diphenylmethane diisocyanate (MDI)	LOW (KOC = 376200)
2,2,4-trimethyl- 1,3-pentanediol diisobutyrate	LOW (KOC = 607.5)
triethyl phosphate	LOW (KOC = 47.96)

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging

disposal

- ▶ Containers may still present a chemical hazard/ danger when empty.
- ▶ Return to supplier for reuse/ recycling if possible.

Otherwise:

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- ▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product.
- ► DO NOT allow wash water from cleaning or process equipment to enter drains.
- ▶ It may be necessary to collect all wash water for treatment before disposal.
- ▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- ▶ Where in doubt contact the responsible authority.
- ▶ DO NOT recycle spilled material.
- ► Consult State Land Waste Management Authority for disposal.
- ▶ Neutralise spill material carefully and decontaminate empty containers and spill residues with 10% ammonia solution plus detergent or a proprietary decontaminant prior to disposal.
- ▶ DO NOT seal or stopper drums being decontaminated as CO2 gas is generated and may pressurise containers.
- ▶ Puncture containers to prevent re-use.
- Bury or incinerate residues at an approved site.

SECTION 14 TRANSPORT INFORMATION

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

Land transport (ADG): 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

SECTION 15 REGULATORY INFORMATION

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

4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)(101-68-8) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards

Australia Hazardous Substances Information System - Consolidated Lists

Australia Hazardous Substances Information System - Consolidated Lists

Australia Work Health and Safety Regulations 2016 - Hazardous chemicals (other than lead) requiring health monitoring

2,2,4-TRIMETHYL-1,3-PENTANEDIOL DIISOBUTYRATE(6846-50-0) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

TRIETHYL PHOSPHATE(78-40-0) IS FOUND ON THE FOLLOWING REGULATORY LISTS

National Inventory	Status
Australia - AICS	Y
Canada - DSL	Y
Canada - NDSL	N (triethyl phosphate; 4,4'-diphenylmethane diisocyanate (MDI); 2,2,4-trimethyl-1,3-pentanediol diisobutyrate)

China - IECSC	Y
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	Y
Korea - KECI	Υ
New Zealand - NZIoC	Y
Philippines - PICCS	Y
USA - TSCA	Y
Legend:	Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SECTION 16 OTHER INFORMATION

Other information

Ingredients with multiple cas numbers

Name	CAS No
4,4'-diphenylmethane diisocyanate (MDI)	101-68-8, 26447-40-5

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

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

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