Hychem Hycrete PU-SL(m)A Hychem International

Chemwatch: 32-1380

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard Alert Code: 0

Issue Date: 23/12/2022 Print Date: 16/01/2023 L.GHS.AUS.EN

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

Product Identifier

Version No: 5.1

| Product name | ychem Hycrete PU-SL(m)A | |
|-------------------------------|-------------------------|--|
| 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 | Coating material. |
|--------------------------|-------------------|
|--------------------------|-------------------|

Details of the manufacturer or supplier of the safety data sheet

| Registered company name | Hychem International | |
|-------------------------|---|--|
| Address | Unit 1, 30 Bluett Drive Smeaton Grange NSW 2567 Australia | |
| Telephone | +61 2 4646 1660 | |
| Fax | +61 2 4647 3700 | |
| Website | Not Available | |
| Email | Not Available | |

Emergency telephone number

| Association / Organisat | on CHEMWATCH EMERGENCY RESPONSE |
|-----------------------------|---------------------------------|
| Emergency telephonumb | ne ers +61 1800 951 288 |
| Other emerge telephone numb | cy +61 3 9573 3188 |

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

SECTION 2 Hazards identification

Classification of the substance or mixture

| Poisons Schedule | Not Applicable |
|--------------------|----------------|
| Classification [1] | Not Applicable |

Label elements

| Hazard pictogram(s) | Not Applicable |
|---------------------|----------------|
| | |
| Signal word | Not Applicable |

Hazard statement(s)

Not Applicable

Precautionary statement(s) Prevention

Issue Date: 23/12/2022 Print Date: 16/01/2023

Precautionary statement(s) Response

Not Applicable

Precautionary statement(s) Storage

Not Applicable

Precautionary statement(s) Disposal

Not Applicable

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

| CAS No | %[weight] | Name |
|--|-----------|---|
| Not Available | 100 | ingredients, determined not to be hazardous |
| Legend: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from C&L * EU IOELVs available | | 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - awn from C&L * EU IOELVs available |

SECTION 4 First aid measures

Description of first aid measures

| Eye Contact | If this product comes in contact with eyes: • Wash out immediately with water. • If irritation continues, seek medical attention. • Removal of contact lenses after an eye injury should only be undertaken by skilled personnel. |
|--------------|--|
| Skin Contact | If skin or hair contact occurs: Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation. |
| Inhalation | If fumes, aerosols or combustion products are inhaled remove from contaminated area. Other measures are usually unnecessary. |
| Ingestion | Immediately give a glass of water. First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor. |

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

| Fire Incompatibility | None known. |
|----------------------|---------------|
| rire incompatibility | I None known. |

Advice for firefighters

| • | Alert Fire | Brigade | and tel | I them | location | and | nature o | f 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.
- Fire Fighting

 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.
 - ▶ If safe to do so, remove containers from path of fire.

Chemwatch: **32-1380** Page **3** of **9**

Version No: 5.1

Hychem Hycrete PU-SL(m)A

Print Date: 16/01/2023

Combustible.

Fire/Explosion Hazard

- ► Slight fire hazard when exposed to heat or flame.
- ▶ Heating may cause expansion or decomposition leading to violent rupture of containers.
- ▶ On combustion, may emit irritating/ toxic fumes.
- May emit acrid smoke.
- Mists containing combustible materials may be explosive.

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

| Methods and material for containment and cleaning up | | | | | |
|--|---|--|--|--|--|
| Minor Spills | 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 | 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. Stop leak if safe to do so. Contain spill with sand, earth or vermiculite. Collect recoverable product into labelled containers for recycling. Absorb remaining product with sand, earth or vermiculite. Collect solid residues and seal in labelled drums for disposal. Wash area 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

| | 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. |
| | Avoid smoking, naked lights or ignition sources. |
| | Avoid contact with incompatible materials. |
| Safe handling | 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. |
| | ▶ 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. |
| | ► Store in original containers. |
| | ► Keep containers securely sealed. |
| | ▶ No smoking, naked lights or ignition sources. |
| Other information | 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. |

Issue Date: 23/12/2022

Issue Date: 23/12/2022 Print Date: 16/01/2023

Conditions for safe storage, including any incompatibilities

| Suitable container | Metal can or drum Packaging as recommended by manufacturer. Check all containers are clearly labelled and free from leaks. |
|-------------------------|--|
| Storage incompatibility | Avoid contamination of water, foodstuffs, feed or seed. |

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 |
|--------------------------|---------------|---------------|---------------|
| Hychem Hycrete PU-SL(m)A | Not Available | Not Available | Not Available |

| Ingredient | Original IDLH | Revised IDLH |
|--------------------------|---------------|---------------|
| Hychem Hycrete PU-SL(m)A | Not Available | Not Available |

MATERIAL DATA

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.

The basic types of engineering controls are:

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.

General exhaust is adequate under normal operating conditions. If risk of overexposure exists, wear SAA approved respirator. Correct fit is essential to obtain adequate protection. Provide adequate ventilation in warehouse or closed storage areas. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Appropriate engineering controls

| Type of Contaminant: | Air Speed: |
|---|---------------------------------|
| solvent, vapours, degreasing etc., evaporating from tank (in still air) | 0.25-0.5 m/s (50-100 f/min) |
| aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation) | 0.5-1 m/s (100-200 f/min.) |
| direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion) | 1-2.5 m/s (200-500 f/min) |
| grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion). | 2.5-10 m/s (500-2000 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 fan, for example, should be a minimum of 1-2 m/s (200-400 f/min.) for extraction of solvents generated in a tank 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

Issue Date: **23/12/2022**Print Date: **16/01/2023**

installed or used

Personal protection

Eve and face 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 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

Wear general protective gloves, eg. light weight rubber gloves.

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.

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 moisturiser is recommended.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- · frequency and duration of contact,
- · chemical resistance of glove material,
- · glove thickness and
- dexterity

long-term use.

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- · When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
 Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for

Hands/feet protection

· Contaminated gloves should be replaced.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- · Excellent when breakthrough time > 480 min
- · Good when breakthrough time > 20 min
- · Fair when breakthrough time < 20 min
- · Poor when glove material degrades

For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.

Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task. Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:

- Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of
- · Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential

Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

Body protection

See Other protection below

OTHERWISE:

Other protection

Overalls.

Barrier cream.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance Yellow liquid with a characteristic odour; does not mix with water.

Physical state | Liquid | Relative density (Water = | 1.0

No special equipment needed when handling small quantities.

Continued...

Eyewash unit.

Issue Date: 23/12/2022 Print Date: 16/01/2023

| | | 1) | |
|--|----------------|--|----------------|
| Odour | Not Available | Partition coefficient n-octanol / water | Not Available |
| Odour threshold | Not Available | Auto-ignition temperature (°C) | 435 |
| pH (as supplied) | Not Available | Decomposition temperature (°C) | Not Available |
| Melting point / freezing point (°C) | Not Available | Viscosity (cSt) | Not Available |
| Initial boiling point and boiling range (°C) | Not Available | Molecular weight (g/mol) | Not Applicable |
| Flash point (°C) | 216 | Taste | Not Available |
| Evaporation rate | Not Available | Explosive properties | Not Available |
| Flammability | Not Applicable | Oxidising properties | Not Available |
| Upper Explosive Limit (%) | 3.20 | Surface Tension (dyn/cm or mN/m) | Not Available |
| Lower Explosive Limit (%) | 0.36 | Volatile Component (%vol) | Not Available |
| Vapour pressure (kPa) | Not Available | Gas group | Not Available |
| Solubility in water | Immiscible | pH as a solution (1%) | Not Available |
| Vapour density (Air = 1) | Not Available | VOC g/L | Not Available |

SECTION 10 Stability and reactivity

| Reactivity | See section 7 | |
|------------------------------------|---|--|
| Chemical stability | Product is considered stable and 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

| Information on toxicologi | ical effects | | |
|---------------------------|--|---|--|
| Inhaled | The material is not thought to produce adverse health effects or irritation of the respiratory tract (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable control measures be used in an occupational setting. | | |
| Ingestion | The material has NOT been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting. In an occupational setting however, ingestion of insignificant quantities is not thought to be cause for concern. | | |
| Skin Contact | The liquid may be miscible with fats or oils and may degrease the skin, producing a skin reaction described as non-allergic contact dermatitis. The material is unlikely to produce an irritant dermatitis as described in EC Directives. | | |
| Еуе | Although the liquid is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may produce transient discomfort characterised by tearing or conjunctival redness (as with windburn). | | |
| Chronic | Long-term exposure to the product is not thought to produce chronic effects adverse to health (as classified by EC Directives using animal models); nevertheless exposure by all routes should be minimised as a matter of course. | | |
| | | | |
| Hychem Hycrete | TOXICITY | IRRITATION | |
| PU-SL(m)A | Not Available | Not Available | |
| Legend: | Nalue obtained from Europe ECHA Registered Substances - A Unless otherwise specified data extracted from RTECS - Regist | | |
| | Offices officialists specified data extracted from KTECS - Regist | ei oi toxio Etiect di cilettiicai Substatices | |

Chemwatch: **32-1380**Version No: **5.1**

Page 7 of 9

Hychem Hycrete PU-SL(m)A

Issue Date: **23/12/2022**Print Date: **16/01/2023**

| Acute Toxicity | X | Carcinogenicity | × |
|-----------------------------------|---|--------------------------|---|
| Skin Irritation/Corrosion | × | Reproductivity | × |
| Serious Eye Damage/Irritation | × | STOT - Single Exposure | × |
| Respiratory or Skin sensitisation | × | STOT - Repeated Exposure | × |
| Mutagenicity | × | Aspiration Hazard | × |

Legend:

🗶 – Data either not available or does not fill the criteria for classification

Data available to make classification

SECTION 12 Ecological information

Toxicity

| Heat and Heaveste | Endpoint | Test Duration (hr) | Species | Value | Source |
|-----------------------------|--|--------------------|---------------|------------------|------------------|
| Hychem Hycrete PU-SL(m)A | Not Available | Not Available | Not Available | Not Available | Not Available |
| Legend: | Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 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 | |
|------------|---------------------------------------|---------------------------------------|--|
| | No Data available for all ingredients | No Data available for all ingredients | |

Bioaccumulative potential

| Ingredient | Bioaccumulation | |
|------------|---------------------------------------|--|
| | No Data available for all ingredients | |

Mobility in soil

| Ingredient | Mobility |
|------------|---------------------------------------|
| | No Data available for all ingredients |

SECTION 13 Disposal considerations

Waste treatment methods

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

- ► Reduction
- ► Reuse
- ► Recycling
- ► Disposal (if all else fails)

Product / Packaging disposal

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

- 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.
- ▶ Recycle wherever possible or consult manufacturer for recycling options.
- ▶ Consult State Land Waste Management Authority for disposal.
- ▶ Bury residue in an authorised landfill.
- Recycle containers if possible, or dispose of in an authorised landfill.

Issue Date: **23/12/2022**Print Date: **16/01/2023**

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

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

| Dradust name | Craum | |
|--------------|-------|--|

Transport in bulk in accordance with the ICG Code

| Product name | Ship Type |
|--------------|------------|
| Froduct name | Silip Type |

SECTION 15 Regulatory information

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

National Inventory Status

| National Inventory | Status |
|--|---|
| Australia - AIIC / Australia Non-Industrial Use | Not Available |
| Canada - DSL | Not Available |
| Canada - NDSL | Not Available |
| China - IECSC | Not Available |
| Europe - EINEC / ELINCS / NLP | Not Available |
| Japan - ENCS | Not Available |
| Korea - KECI | Not Available |
| New Zealand - NZIoC | Not Available |
| Philippines - PICCS | Not Available |
| USA - TSCA | Not Available |
| Taiwan - TCSI | Not Available |
| Mexico - INSQ | Not Available |
| Vietnam - NCI | Not Available |
| Russia - FBEPH | Not Available |
| 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 | 23/12/2022 |
|---------------|------------|
| Initial Date | 07/06/2012 |

SDS Version Summary

| Version | Date of Update | Sections Updated | |
|---------|----------------|--|--|
| 4.1 | 01/11/2019 | One-off system update. NOTE: This may or may not change the GHS classification | |
| 5.1 | 23/12/2022 | Classification review due to GHS Revision change. | |

Chemwatch: 32-1380 Version No: 5.1

Page 9 of 9 Hychem Hycrete PU-SL(m)A

Issue Date: 23/12/2022 Print Date: 16/01/2023

Other information

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

 $\label{eq:pc-twa} \mbox{Pc-TWA: Permissible Concentration-Time Weighted Average} \\ \mbox{PC-STEL: Permissible Concentration-Short Term Exposure Limit}$

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.

Apart from any fair dealing for the purposes of private study, research, review or criticism, as permitted under the Copyright Act, no part may be reproduced by any process without written permission from CHEMWATCH.

TEL (+61 3) 9572 4700.

Hychem Hycrete PU-SL(m)B Hychem International

Chemwatch: 32-1381

Version No: 5.1

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard Alert Code: 2

Issue Date: 23/12/2022 Print Date: 16/01/2023 L.GHS.AUS.EN

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

Product Identifier Product name Hychem Hycrete PU-SL(m)B Chemical Name Not Applicable Synonyms Not Available Chemical formula Not Applicable

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

Relevant identified uses Coating material.

Other means of

identification

Details of the manufacturer or supplier of the safety data sheet

Not Available

| Registered company name | Hychem International |
|-------------------------|---|
| Address | Unit 1, 30 Bluett Drive Smeaton Grange NSW 2567 Australia |
| Telephone | +61 2 4646 1660 |
| Fax | +61 2 4647 3700 |
| Website | Not Available |
| Email | Not Available |

Emergency telephone number

| Association / Organisation | CHEMWATCH EMERGENCY RESPONSE | |
|-----------------------------------|------------------------------|--|
| Emergency telephone numbers | +61 1800 951 288 | |
| Other emergency telephone numbers | +61 3 9573 3188 | |

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

SECTION 2 Hazards identification

Classification of the substance or mixture

| Poisons Schedule | S6 | |
|-------------------------------|---|--|
| Classification ^[1] | Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 2A, Acute Toxicity (Inhalation) Category 4, Sensitisation (Respiratory) Category 1, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Carcinogenicity Category 2, Specific Target Organ Toxicity - Repeated Exposure Category 2 | |
| Legend: | 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI | |

Label elements

Hazard pictogram(s)





Issue Date: 23/12/2022 Print Date: 16/01/2023

| Signal word | Danger |
|-------------|--------|
| | |

Hazard statement(s)

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

Precautionary statement(s) Prevention

| P201 | Obtain special instructions before use. |
|------|--|
| P260 | Do not breathe mist/vapours/spray. |
| P271 | Use only outdoors or in a well-ventilated area. |
| P280 | Wear protective gloves, protective clothing, eye protection and face protection. |
| P284 | [In case of inadequate ventilation] wear respiratory protection. |
| P264 | Wash all exposed external body areas thoroughly after handling. |
| P272 | Contaminated work clothing should not be allowed out of the workplace. |

Precautionary statement(s) Response

| P304+P340 | IF INHALED: Remove person to fresh air and keep comfortable for breathing. |
|----------------|--|
| P308+P313 | IF exposed or concerned: Get medical advice/ attention. |
| P342+P311 | If experiencing respiratory symptoms: Call a POISON CENTER/doctor/physician/first aider. |
| P302+P352 | IF ON SKIN: Wash with plenty of water and soap. |
| 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/doctor/physician/first aider/if you feel unwell. |
| P333+P313 | If skin irritation or rash occurs: Get medical advice/attention. |
| P337+P313 | If eye irritation persists: Get medical advice/attention. |
| P362+P364 | Take off contaminated clothing and wash it before reuse. |

Precautionary statement(s) Storage

| . roduitionally dialomoni(o, otologo | | |
|--------------------------------------|--|--|
| 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 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 | | |
|---|---|-----------------|--|
| 9016-87-9 | 50-65 <u>polymeric diphenylmethane diisocyanate</u> | | |
| 32055-14-4 | 25-50 | MDI, oligomeric | |
| Legend: 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L * EU IOELVs available | | | |

SECTION 4 First aid measures

Issue Date: 23/12/2022 Print Date: 16/01/2023

Description of first aid measures

If this product comes in contact with the eyes: Immediately hold evelids apart and flush the eve continuously with running water. • Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally **Eve Contact** 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. If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Skin Contact Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation. 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 device, or pocket Inhalation mask 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 several hours. Treatment is essentially symptomatic. A physician should be consulted. ► IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. For advice, contact a Poisons Information Centre or a doctor. Urgent hospital treatment is likely to be needed. 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 SDS 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 Ingestion SDS Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise: INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. NOTE: Wear a protective glove when inducing vomiting by mechanical means.

Indication of any immediate medical attention and special treatment needed

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

Chemwatch: **32-1381**Version No: **5.1**

Page 4 of 18

Hychem Hycrete PU-SL(m)B

Issue Date: 23/12/2022 Print Date: 16/01/2023

- F Small quantities of water in contact with hot liquid may react violently with generation of a large volume of rapidly expanding hot sticky semi-solid foam.
- ▶ Presents additional hazard when fire fighting in a confined space.
- Cooling with flooding quantities of water reduces this risk.
- Water spray or fog may cause frothing and should be used in large quantities.
- ► Foam.
- Dry chemical powder.
- ► BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog Large fires only.

Special hazards arising from the substrate or mixture

| F: | I | patibilit |
|------|-------|-----------|
| Fire | ıncom | patibilit |
| | | |

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

Advice for firefighters

| 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. If safe to do so, remove containers from path of fire. |
| Fire/Explosion Hazard | - Combustible 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 Due to reaction with water producing CO2-gas, a hazardous build-up of pressure could result if contaminated containers are re-sealed 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) other pyrolysis products typical of burning organic material. May emit corrosive fumes. When heated at high temperatures many isocyanates decompose rapidly generating a vapour which pressurises containers, possibly to the point of rupture. Release of toxic and/or flammable isocyanate vapours may then occur |
| HAZCHEM | Not Applicable |
| | <u> </u> |

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 | 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 | Liquid Isocyanates and high isocyanate vapour concentrations will penetrate seals on self contained breathing apparatus - SCBA should be used inside encapsulating suit where this exposure may occur. 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 |

Chemwatch: 32-1381 Page 5 of 18 Issue Date: 23/12/2022 Version No: 5.1

Hychem Hycrete PU-SL(m)B

Print Date: 16/01/2023

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.
- Absorb and decontaminate. Completely cover the spill with wet sand, wet earth, vermiculite or other similar absorbent. Add neutraliser (for suitable formulations: see below) to the adsorbent materials (equal to that of estimated spill pool volume). Intensify contact between spill, absorbent and neutraliser by carefully mixing with a rake and allow to react for 15 minutes
- ► Shovel absorbent/decontaminant solution mixture into a steel drum.
- Decontaminate surface. Pour an equal amount of neutraliser solution over contaminated surface. Scrub area with a stiff bristle brush, using moderate pressure. - Completely cover decontaminant with vermiculite or other similar absorbent. - After 5 minutes, shovel absorbent/decontamination solution mixture into the same steel drum used above.
- Monitor for residual isocyanate. If surface is decontaminated, proceed to next step. If contamination persists, repeat decontaminate procedure immediately above
- Place loosely covered drum (release of carbon dioxide) outside for at least 72 hours. Label waste-containing drum appropriately. Remove waste materials for incineration.
- Decontaminate and remove personal protective equipment.
- Return to normal operation.
- ▶ Conduct accident investigation and consider measures to prevent reoccurrence.

Decontamination:

Treat isocyanate spills with sufficient amounts of isocyanate decontaminant preparation ("neutralising fluid"). Isocyanates and polyisocyanates are generally not miscible with water. Liquid surfactants are necessary to allow better dispersion of isocyanate and neutralising fluids/ preparations. Alkaline neutralisers react faster than water/surfactant mixtures alone.

Typically, such a preparation may consist of:

Sawdust: 20 parts by weight Kieselguhr 40 parts by weight plus a mixture of {ammonia (s.g. 0.880) 8% v/v non-ionic surfactant 2% v/v water 90% v/v}.

Let stand for 24 hours

Three commonly used neutralising fluids each exhibit advantages in different situations.

Formulation A:

liquid surfactant 0.2-2% sodium carbonate 5-10% water to 100%

Formulation B

liquid surfactant 0.2-2% concentrated ammonia 3-8% water to 100%

Formulation C

ethanol, isopropanol or butanol 50% concentrated ammonia 5% water to 100%

After application of any of these formulae, let stand for 24 hours.

Formulation B reacts faster than Formulation A. However, ammonia-based neutralisers should be used only under well-ventilated conditions to avoid overexposure to ammonia or if members of the emergency team wear suitable respiratory protection. Formulation C is especially suitable for cleaning of equipment from unreacted isocyanate and neutralizing under freezing conditions. Regard has to be taken to the flammability of the alcoholic solution.

- 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.
- DO NOT touch the spill material

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.
- Stop leak if safe to do so.
- Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labelled containers for recycling.
- ▶ Absorb remaining product with sand, earth or vermiculite.
- Collect solid residues and seal in labelled drums for disposal.
- Wash area 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.

Issue Date: 23/12/2022 Print Date: 16/01/2023

Precautions for safe handling

Safe handling

- DO NOT allow clothing wet with material to stay in contact with skin
- 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.
- Avoid smoking, naked lights or ignition sources.
- 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.
- 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.

for commercial quantities of isocvanates:

- · Isocyanates should be stored in adequately bunded areas. Nothing else should be kept within the same bunding. Pre-polymers need not be segregated. Drums of isocyanates should be stored under cover, out of direct sunlight, protected from rain, protected from physical damage and well away from moisture, acids and alkalis.
- · Where isocyanates are stored at elevated temperatures to prevent solidifying, adequate controls should be installed to prevent the high temperatures and precautions against fire should be taken.
- · Where stored in tanks, the more reactive isocyanates should be blanketed with a non-reactive gas such as nitrogen and equipped with absorptive type breather valve (to prevent vapour emissions)..
- · Transfer systems for isocyanates in bulk storage should be fully enclosed and use pump or vacuum systems. Warning signs, in appropriate languages, should be posted where necessary.
- · Areas in which polyurethane foam products are stored should be supplied with good general ventilation. Residual amounts of unreacted isocyanate may be present in the finished foam, resulting in hazardous atmospheric concentrations.
- · Ideal storage temperature range is dependent on the specific polymer due to viscosity and melting point differences between the polymers. Use 25 deg C (77 deg F) to 30 deg C (86 deg F) as a guideline to most liquid isocyanates for optimum storage temperature. If some isocyanates are stored at or below a temperature of 25 deg C (77 deg F), crystallization and settling of the isocyanate may occur. Storage in a cold warehouse can cause crystals to form. These crystals can settle to the bottom of the container. If crystals do form, they can be melted easily with moderate heat. It is suggested that a container the size of a drum be warmed for 16-24 hours at sufficient temperature to melt the crystals. When the crystals are melted, the container should be agitated by rolling or stirring, until the contents are homogenous. Since heated isocyanate will generate vapors more rapidly than product stored at 25 deg C (77 deg F), be sure to follow the precautions under the Personal Protection.

Rotate all stock to prevent ageing. Use on FIFO (First In-First Out) basis

- 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

Other information

- Metal can or drum
- Packaging as recommended by manufacturer.
- Check all containers are clearly labelled and free from leaks.
- Avoid cross contamination between the two liquid parts of product (kit).
- If two part products are mixed or allowed to mix in proportions other than manufacturer's recommendation, polymerisation with gelation and evolution of heat (exotherm) may occur.
- ► This excess heat may generate toxic vapour
- Avoid any contamination of this material as it is very reactive and any contamination is potentially hazardous
- · Avoid reaction with water, alcohols and detergent solutions, Isocvanates are electrophiles, and as such they are reactive toward a variety of nucleophiles including alcohols, amines, and even water. Upon treatment with an alcohol, an isocyanate forms a urethane linkage. If a di-isocyanate is treated with a compound containing two or more hydroxyl groups, such as a diol or a polyol, polymer chains are formed, which are known as polyurethanes. Reaction between a di-isocyanate and a compound containing two or more amine groups, produces long polymer chains known as polyureas.

Storage incompatibility

- · 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 also can react with themselves. Aliphatic di-isocyanates can form trimers, which are structurally related to cyanuric acid. Isocyanates participate in Diels-Alder reactions, functioning as dienophiles
- · Isocyanates easily form adducts with carbodiimides, isothiocyanates, ketenes, or with substrates containing activated CC or CN
- · Some isocyanates react with water to form amines and liberate carbon dioxide. This reaction may also generate large volumes of foam and heat. Foaming spaces may produce pressure in confined spaces or containers. Gas generation may pressurise drums to the point of rupture.

Continued...

Version No: 5.1 Hychem Hycrete PU-SL(m)B

Issue Date: **23/12/2022**Print Date: **16/01/2023**

- · Do NOT reseal container if contamination is expected
- · Open all containers with care
- · Base-catalysed reactions of isocyanates with alcohols should be carried out in inert solvents. Such reactions in the absence of solvents often occur with explosive violence,
- · Isocyanates will attack and embrittle some plastics and rubbers.
- · The isocyanate anion is a pseudohalide (syn pseudohalogen) whose chemistry, resembling that of the true halogens, allows it to substitute for halogens in several classes of chemical compounds.. The behavior and chemical properties of the several pseudohalides are identical to that of the true halide ions.
- ▶ A range of exothermic decomposition energies for isocyanates is given as 20-30 kJ/mol.
- The relationship between energy of decomposition and processing hazards has been the subject of discussion; it is suggested that values of energy released per unit of mass, rather than on a molar basis (J/g) be used in the assessment.
- For example, in "open vessel processes" (with man-hole size openings, in an industrial setting), substances with exothermic decomposition energies below 500 J/g are unlikely to present a danger, whilst those in "closed vessel processes" (opening is a safety valve or bursting disk) present some danger where the decomposition energy exceeds 150 J/g.

BRETHERICK: Handbook of Reactive Chemical Hazards, 4th Edition

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

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

Emergency Limits

| Ingredient | TEEL-1 | TEEL-2 | TEEL-3 |
|--|------------|-----------|----------|
| polymeric diphenylmethane diisocyanate | 0.15 mg/m3 | 3.6 mg/m3 | 22 mg/m3 |

| Ingredient | Original IDLH | Revised IDLH |
|---|---------------|---------------|
| polymeric diphenylmethane diisocyanate | Not Available | Not Available |
| MDI, oligomeric | Not Available | Not Available |

Occupational Exposure Banding

| Ingredient | Occupational Exposure Band Rating | Occupational Exposure Band Limit | |
|-----------------|--|----------------------------------|--|
| MDI, oligomeric | E | ≤ 0.1 ppm | |
| Notes: | Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health. | | |

MATERIAL DATA

for isocyanates:

Some jurisdictions require that health surveillance be conducted on occupationally exposed workers. This should emphasise:

- demography, occupational and medical history and health advice
- completion of a standardised respiratory questionnaire
- physical examination of the respiratory system and skin
- standardised respiratory function tests such as FEV1, FVC and FEV1/FVC

Various portable or stationary instruments are available for the continuous measurement of isocyanates in the air. All of them function on the principle of colourimetric evaluation of an indicator paper strip. They are operating continuously and unattended. Paper tape systems are easy to use and do not require skilled analysts to operate them. They give rapid results and are therefore suitable for leak detection and in emergency situations. However,:

- they may read incorrect at very high or very low humidity,
- are unsuitable for aerosols
- and may not be accepted for purposes of regulatory compliance.

Air monitoring of isocyanates requires sound analytical knowledge. In order to obtain reliable results only laboratories with experience in that specific area should be engaged with such measurements

In the evaluation of the German MAK Commission the justification of the OEL for 4,4 - MDI/ pMDI is established based on the isocyanate (NCO) group which is common to the monomeric, oligomeric and the polymeric MDIs. This NCO group is highly reactive (see toxicokinetics and category justification for details). Due to this high reactivity of the functional NCO group towards nucleophilic biomolecules the primary health effect of MDI is irritation at the point of contact, which can be demonstrated by the numerous acute, subacute and chronic bioassays, and sensitization.

The most sensitive health effect resulting from acute inhalation exposure to respirable aerosols of MDI is irritation to predominately the bronchio-alveolar part of the respiratory tract.

Issue Date: 23/12/2022 Print Date: 16/01/2023

After inhalation exposure, MDI reacts with nucleophilic low and higher-molecular components of the liquid films that cover the airways, glutathione (GSH) represents the most important nucleophile in quantitative terms. The low-molecular adducts or conjugates of MDI are absorbed and direct transcarbamoylation results in plasma protein adducts (albumin, haemoglobin). All observed health effects resulting from exposure to respirable aerosols in acute, subchronic or chronic bioassays and human studies can be allocated to primary alveolar reactivity (respiratory irritation and/or sensitization). No systemic effect other than secondary to primary irritation has been described.

Biomonitoring for exposure to diisocyanates typically looks to assay derivatives (diamines) following hydrolysis of biological fluids and is routinely employed to measure occupational exposure to MDI and other diisocyanates. For diamine analysis, samples of urine are typically used, although blood samples can also be used. However, these markers are not specific for the diisocyanate exposure. The urine biomarkers (after acid or base hydrolysis) reflected recent exposures whereas certain haemoglobin (Hb) biomarkers did not necessarily correlate with the urine biomarkers, and were considered to reflect overall exposures over a longer term. The hydrolysis methods and conditions used release differing amounts of the diamine analyte.

Hydrolysis analytes are at low concentrations and proportionally little of the dose is in urine or blood, and that there is no standardised method for measuring biomarkers in hydrolyzed urine. Investigation of dijsocyanate specific biomarkers has focused on the conjugated molecules in blood. Typically, conjugates with Hb or albumin (Alb) have been assessed, and there has been progress in application of experiments in animals to biomonitoring of human exposures to MDI. The role for glutathione as an intermediary in transport of diisocyanates is now supported by good evidence using various model compounds. The most probable reactions of isocyanates with biological macromolecules are with the amine (mixed urea), the hydroxyl (carbamate) and the sulphydryl (thiolytic acid ester) and that latter is of a reversible nature.

The thiocarbamate bond of isocyanate-sulphydryl is reversible, and various authors have found release and transfer of MDI moieties from thiocarbamate conjugates to other nucleophiles, notably protein. The conjugates were shown to be recognised by serum IgG from MDI exposed workers, demonstrating a non-enzymatic, thiol-mediated transcarbamolyating mechanism to protein.

The methods to identify and quantify MDI-adducts to plasma proteins particularly albumin (Alb) and to haemoglobin (Hb) have now been applied to biological monitoring, particularly useful since the amount of adducts would be indicative of an integrated exposure. In addition these adducts are specific for MDI exposure. However the total amount of the analyte MDA, retrievable from Hb-adducts and urinary precursors, accounts for less than 0.5 % of the applied dose of MDI, and the lack of linearity of biomarker to exposure dose makes uncertain the extrapolation from the yield of biomarkers in urine or blood towards inhalative MDI exposure. The use of protein adducts for biomonitoring appears to overcome some of these difficulties and benefits from specificity of the analyte. To date no diisocyanate specific urinary biomarker has been identified. For blood, the MDI-specific methods developed are: Hb-conjugate derived hydantoin, Alb-lysine conjugates and peptide conjugates. On the basis of limits of detection, the Hb-hydantoin method is most sensitive compared to the Alb-lysine method which in turn is more sensitive than the signature peptide method. The Hb-hydantoin method covers a longer period of exposure than the Alb-lysine, due to the longer half life of the erythrocyte compared to serum albumin.

Exposure controls

Appropriate engineering

controls

- All processes in which isocvanates are used should be enclosed wherever possible.
- Filtration Total enclosure, accompanied by good general ventilation, should be used to keep atmospheric concentrations below the relevant exposure standards.
- If total enclosure of the process is not feasible, local exhaust ventilation may be necessary. Local exhaust ventilation is essential where lower molecular weight isocyanates (such as TDI or HDI) is used or where isocyanate or polyurethane is sprayed.
- Where other isocyanates or pre-polymers are used and aerosol formation cannot occur, local exhaust ventilation may not be necessary if the atmospheric concentration can be kept below the relevant exposure standards.
- Where local exhaust ventilation is installed, exhaust vapours should not be vented to the exterior in such a manner as to create a hazard.

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.

The basic types of engineering controls are:

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.

- Spraying of material or material in admixture with other components must be carried out in conditions conforming to local state regulations (AS/NZS 4114, UNI EN 12215:2010, ANSI/AIHA Z9.3-2007 or national equivalent).
- Local exhaust ventilation with full face positive-pressure air supplied breathing apparatus (hood or helmet type) is required.
- Spraying should be performed in a spray booth fitted with an effective exhaust system which complies with local environmental legislation.
- The spray booth area must be isolated from unprotected personnel whilst spraying is in progress and until all spraying mist has cleared.

NOTE: Isocyanate vapours will not be adequately absorbed by organic vapour respirators. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

| Type of Contaminant: | Air Speed: |
|--|----------------------------|
| direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air 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 |

Chemwatch: **32-1381**Version No: **5.1**

Page 9 of 18

Hychem Hycrete PU-SL(m)B

Issue Date: **23/12/2022**Print Date: **16/01/2023**

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 should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 4-10 m/s (800-2000 f/min.) for extraction of solvents generated by spraying at a point 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.

Personal protection











Eve and face 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 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

Hands/feet protection

See Hand protection below

NOTE:

- 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.

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 moisturiser is recommended.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- $\boldsymbol{\cdot}$ frequency and duration of contact,
- $\boldsymbol{\cdot}$ chemical resistance of glove material,
- $\boldsymbol{\cdot}$ glove thickness and
- dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- · Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.
- $\boldsymbol{\cdot}$ Contaminated gloves should be replaced.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- \cdot Excellent when breakthrough time > 480 min
- · Good when breakthrough time > 20 min
- · Fair when breakthrough time < 20 min
- · Poor when glove material degrades

For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.

Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task. Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example:

- Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of
- Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential

Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

- ▶ Do NOT wear natural rubber (latex gloves).
- 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
- ▶ DO NOT use skin cream unless necessary and then use only minimum amount.
- ▶ Isocyanate vapour may be absorbed into skin cream and this increases hazard.

Issue Date: 23/12/2022 Print Date: 16/01/2023

| | Avoid contact with moisture. |
|------------------|--|
| Body protection | See Other protection below |
| Other protection | All employees working with isocyanates must be informed of the hazards from exposure to the contaminant and the precautions necessary to prevent damage to their health. They should be made aware of the need to carry out their work so that as little contamination as possible is produced, and of the importance of the proper use of all safeguards against exposure to themselves and their fellow workers. Adequate training, both in the proper execution of the task and in the use of all associated engineering controls, as well as of any personal protective equipment, is essential. Employees exposed to contamination hazards should be educated in the need for, and proper use of, facilities, clothing and equipment and thereby maintain a high standard of personal cleanliness. Special attention should be given to ensuring that all personnel understand instructions, especially newly recruited employees and those with local-language difficulties, where they are known. • Overalls. • P.V.C apron. • Barrier cream. • Skin cleansing cream. • Skin cleansing cream. • Eye wash unit. |

Respiratory protection

Full face respirator with supplied air.

- · 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.
- Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used
- 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 | Brown fluid with a characteristic odour; does not mix with water. | | |
|--|---|---|----------------|
| | | | |
| Physical state | Liquid | Relative density (Water = 1) | 1.2363 |
| Odour | Not Available | Partition coefficient n-octanol / water | Not Available |
| Odour threshold | Not Available | Auto-ignition temperature (°C) | >450 |
| pH (as supplied) | Not Available | Decomposition temperature (°C) | Not Available |
| Melting point / freezing point (°C) | Not Available | Viscosity (cSt) | Not Available |
| Initial boiling point and boiling range (°C) | >300 | Molecular weight (g/mol) | Not Applicable |
| Flash point (°C) | 230 | 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) | 11000 @ 20C | Gas group | Not Available |
| Solubility in water | Immiscible | pH as a solution (1%) | Not Available |

Issue Date: 23/12/2022 Print Date: 16/01/2023

Vapour density (Air = 1)

Not Available

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

| SECTION IT TOXICOLOGICA | il illiottilation |
|--------------------------|--|
| Information on toxicolog | ical effects |
| Inhaled | Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful. Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system. 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 to the health of the individual; animal experiments indicate that ingestion of less than 40 gram may be fatal. |
| Skin Contact | Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. The material may accentuate any pre-existing dermatitis condition Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds 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. |
| | Fuidance evides or precised experience predicts that the material may expect up in interesting in a substantial number of individuals |

Eye

Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by a temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

On the basis, primarily, of animal experiments, concern has been expressed that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment.

Practical evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a substantial number of individuals at a greater frequency than would be expected from the response of a normal population.

Chronic

Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking. Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a substantial number of individuals, and/or of producing a positive response in experimental animals.

Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyperresponsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These

Page 12 of 18 Hychem Hycrete PU-SL(m)B

Issue Date: 23/12/2022 Print Date: 16/01/2023

symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive.

Substances than can cuase occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers

Wherever it is reasonably practicable, exposure to substances that can cuase occupational asthma should be prevented. Where this is not possible the primary aim is to apply adequate standards of control to prevent workers from becoming hyperresponsive.

Activities giving rise to short-term peak concentrations should receive particular attention when risk management is being considered. Health surveillance is appropriate for all employees exposed or liable to be exposed to a substance which may cause occupational asthma and there should be appropriate consultation with an occupational health professional over the degree of risk and level of surveillance.

Harmful: danger of serious damage to health by prolonged exposure through inhalation.

Serious damage (clear functional disturbance or morphological change which may have toxicological significance) is likely to be caused by repeated or prolonged exposure. As a rule the material produces, or contains a substance which produces severe lesions. Such damage may become apparent following direct application in subchronic (90 day) toxicity studies or following sub-acute (28 day) or chronic (two-year) toxicity tests.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

Persons with a history of asthma or other respiratory problems or are known to be sensitised, should not be engaged in any work involving the handling of isocyanates.

The chemistry of reaction of isocyanates, as evidenced by MDI, in biological milieu is such that in the event of a true exposure of small MDI doses to the mouth, reactions will commence at once with biological macromolecules in the buccal region and will continue along the digestive tract prior to reaching the stomach. Reaction products will be a variety of polyureas and macromolecular conjugates with for example mucus, proteins and cell components.

This is corroborated by the results from an MDI inhalation study. Following an inhalation exposure of rats to radiolabelled MDI, 79% of the dose was excreted in faeces. The faecal excretion in these animals was considered entirely due to ingestion of radioactivity from grooming and ingestion of deposited material from the nasopharangeal region via the mucociliary escalator, i.e. not following systemic absorption. The faecal radioactivity was tentatively identified as mixed molecular weight polyureas derived from MDI. Diamine was not present. Thus, for MDI and diisocyanates in general the oral gavage dosing route is inappropriate for toxicological studies and risk assessment.

It is expected that oral gavage dosing will result in a similar outcome to that produced by TDI or MDI, that is (1) reaction with stomach contents and (2) polymerization to solid polyureas.

- Reaction with stomach contents is very plausibly described in case reports of accidental ingestion of polymeric MDI based glue in domestic animals. Extensive polymerization and CO2 liberation resulting in an expansion of the gastric content is described in the stomach, without apparent acute chemical toxicity
- Polyurea formation in organic and aqueous phases has been described. In this generally accepted chemistry of hydrolysis of an isocyanate the initially produced carbamate decarboxylates to an amine which. The amine, as a reactive intermediate, then reacts very readily with the present isocyanate to produce a solid and inert polyurea. This urea formation acts as a pH buffer in the stomach, thus promoting transformation of the diisocyanate into polyurea, even under the acidic conditions.

At the resorbtive tissues in the small intestine, these high molecular reaction products are likely to be of very low bioavailability, which is substantiated by the absence of systemic toxicity in acute oral bioassays with rats at the OECD limit dose (LC50>2 g/kg bw).

The respiratory tract may be regarded as the main entry for systemically available isocyanates as evidenced following MDLexposures.

A detailed summary on urinary, plasma and in vitro metabolite studies is provided below. Taken together, all available studies provide convincing evidence that MDI-protein adduct and MDI-metabolite formation proceeds:

- ▶ via formation of a labile isocyanate glutathione (GSH)-adduct,
- then transfer to a more stable adduct with larger proteins, and
- without formation of free MDA. MDA reported as a metabolite is actually formed by analytical workup procedures (strong acid
 or base hydrolysis) and is not an identified metabolite in urine or blood

A 90-day inhalation study in rats with polymeric MDI (6 hours/day, 5 days/week) produced moderate to severe hyperplastic inflammatory lesions in the nasal cavities and lungs at levels of 8 mg/m3 or greater.

Rats exposed for two years to a respirable aerosol of polymeric MDI exhibited chronic pulmonary irritation at high concentrations. Only at the highest level (6 mg/m3),was there a significant incidence of a benign tumour of the lung (adenoma) and one malignant tumour (adenocarcinoma). There were no lung tumours at 1 mg/m3 and no effects at 0.2 mg/m3. Overall, the tumour incidence, both benign and malignant and the number of animals with the tumours were not different from controls. The increased incidence of lung tumours is associated with prolonged respiratory irritation and the concurrent accumulation of yellow material in the lung, which occurred throughout the study. In the absence of prolonged exposure to high concentrations leading to chronic irritation and lung damage, it is highly unlikely that tumour formation will occur.

The polymer contained in this product has a reactive group generally considered to be of high concern (US EPA).

There are health concerns for polymers containing pendant acrylates, based on the sensitisation properties of acrylates in general and the carcinogenicity of some members of the group. e.g. ethyl acrylate.

Whilst it is generally accepted that polymers with a molecular weight exceeding 1000 are unlikely to pass through biological membranes, oligomers with lower molecular weight and specifically, those with a molecular weight below 500, may. Estimations based on a "highly" dispersed polymer population suggest that a polymer of approximate molecular weight 5000 could contain no more than one reactive group of high concern for it to be regulated as a polymer of low concern (a so-called PLC).

Polymers with a molecular weight above 10000 are generally considered to be PLCs because these are not expected to be

Chemwatch: **32-1381**Version No: **5.1**

Page 13 of 18 Hychem Hycrete PU-SL(m)B

Issue Date: **23/12/2022**Print Date: **16/01/2023**

absorbed by biological systems. The choice of 10000 as a cut-off value is thought to provide a safety factor of 100, regarded as reasonable in light of limited data, duration of studies, dose levels at which effects are seen, and extrapolation from animals to humans.

Isocyanate vapours/mists are irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis with wheezing, gasping and severe distress, even sudden loss of consciousness, 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 after a period of tolerance. A respiratory response may occur following minor skin contact. Skin sensitisation is possible and may result in allergic dermatitis responses including rash, itching, hives and swelling of extremities.

Isocyanate-containing vapours/ mists may cause inflammation of eyes and nasal passages.

Onset of symptoms may be immediate or delayed for several hours after exposure. Sensitised people can react to very low levels of airborne isocyanates. Unprotected or sensitised persons should not be allowed to work in situations allowing exposure to this material.

| Hychem Hycrete | TOXICITY | IRRITATION |
|---------------------------------|--|-----------------------------|
| PU-SL(m)B | Not Available | Not Available |
| | TOXICITY | IRRITATION |
| polymeric | Dermal (rabbit) LD50: >9400 mg/kg ^[2] | Eye (rabbit): 100 mg - mild |
| diphenylmethane diisocyanate | Inhalation(Rat) LC50: 0.49 mg/L4h ^[2] | |
| · | Oral (Rat) LD50; 43000 mg/kg ^[2] | |
| | TOXICITY | IRRITATION |
| | Dermal (rabbit) LD50: >9400 mg/kg ^[2] | Not Available |
| MDI, oligomeric | Inhalation(Rat) LC50: 0.368 mg/L4h ^[1] | |
| | Oral (Rat) LD50; >2000 mg/kg ^[1] | |
| 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 | |

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

POLYMERIC DIPHENYLMETHANE DIISOCYANATE

product

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.

MDI, OLIGOMERIC

* Dow SDS

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 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 ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. 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. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.

Hychem Hycrete
PU-SL(m)B & POLYMERIC
DIPHENYLMETHANE
DIISOCYANATE & MDI,
OLIGOMERIC

Allergic reactions which develop in the respiratory passages as bronchial asthma or rhinoconjunctivitis, are mostly the result of reactions of the allergen with specific antibodies of the IgE class and belong in their reaction rates to the manifestation of the immediate type. In addition to the allergen-specific potential for causing respiratory sensitisation, the amount of the allergen, the exposure period and the genetically determined disposition of the exposed person are likely to be decisive. Factors which increase the sensitivity of the mucosa may play a role in predisposing a person to allergy. They may be genetically determined or acquired, for example, during infections or exposure to irritant substances. Immunologically the low molecular weight substances become complete allergens in the organism either by binding to peptides or proteins (haptens) or after metabolism (prohaptens). Particular attention is drawn to so-called atopic diathesis which is characterised by an increased susceptibility to allergic rhinitis, allergic bronchial asthma and atopic eczema (neurodermatitis) which is associated with increased IgE synthesis.

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.

Issue Date: 23/12/2022 Print Date: 16/01/2023

Isocyanate vapours/mists are irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis with wheezing, gasping and severe distress, even sudden loss of consciousness, 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 after a period of tolerance. A respiratory response may occur following minor skin contact. Skin sensitisation is possible and may result in allergic dermatitis responses including rash, itching, hives and swelling of extremities.

Isocyanate-containing vapours/ mists may cause inflammation of eyes and nasal passages.

Onset of symptoms may be immediate or delayed for several hours after exposure. Sensitised people can react to very low levels of airborne isocyanates. Unprotected or sensitised persons should not be allowed to work in situations allowing exposure to this material.

The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

for diisocvanates:

In general, there appears to be little or no difference between aromatic and aliphatic diisocyanates as toxicants. In addition, there are insufficient data available to make any major distinctions between polymeric (<1000 MW) and monomeric diisocyanates. Based on repeated dose studies in animals by the inhalation route, both aromatic and aliphatic diisocyanates appear to be of high concern for pulmonary toxicity at low exposure levels. Based upon a very limited data set, it appears that diisocyanate prepolymers exhibit the same respiratory tract effects as the monomers in repeated dose studies. There is also evidence that both aromatic and aliphatic diisocyanates are acutely toxic via the inhalation route. Most members of the diisocyanate category have not been tested for carcinogenic potential. Though the aromatic diisocyanates tested positive and the one aliphatic diisocyanate tested negative in one species, it is premature to make any generalizations about the carcinogenic potential of aromatic versus aliphatic diisocyanates. In the absence of more human data, it would be prudent at this time to assume that both aromatic and aliphatic diisocyanates are respiratory sensitisers. Diisocyanates are moderate to strong dermal sensitisers in animal studies. Skin irritation studies performed on rabbits and guinea pigs indicate no difference in the effects of aromatic versus aliphatic diisocyanates.

For monomers, effects on the respiratory tract (lungs and nasal cavities) were observed in animal studies at exposure concentrations of less than 0.005 mg/L. The experimental animal data available on prepolymeric diisocyanates show similar adverse effects at levels that range from 0.002 mg/L to 0.026 mg/L.

There is also evidence that both aromatic and aliphatic diisocyanates are acutely toxic via the inhalation route **Oncogenicity:** Most members of the diisocyanate category have not been tested for carcinogenic potential. Commercially available Poly-MDI was tested in a 2-year inhalation study in rats. The tested material contained 47% aromatic

4,4'-methylenediphenyl diisocyanate (MDI) and 53% higher molecular weight oligomers. Interim sacrifices at one year showed that males and females in the highest dose group (6 mg/m3) had treatment related histological changes in the nasal cavity, lungs and mediastinal lymph nodes. The incidence and severity of degeneration and basal cell hyperplasia of the olfactory epithelium and Bowman's gland hyperplasia were increased in males at the mid and high doses and in females at the high dose following the two year exposure period. Pulmonary adenomas were found in 6 males and 2 females, and pulmonary adenocarcinoma in one male in the high dose group. However, aliphatic hexamethylene diisocyanate (HDI) was found not to be carcinogenic in a two year repeated dose study in rats by the inhalation route. HDI has not been tested in mice by the inhalation route.

Though the oral route is not an expected route of exposure to humans, it should be noted that in two year repeated dose studies by the oral route, aromatic toluene diisocyanate (TDI) and 3,3'-dimethoxy-benzidine-4,4'-diisocyanate (dianisidine diisocyanate, DADI) were found to be carcinogenic in rodents. TDI induced a statistically significant increase in the incidence of liver tumors in rats and mice as well as dose-related hemangiosarcomas of the circulatory system and has been classified by the Agency as a B2 carcinogen. DADI was found to be carcinogenic in rats, but not in mice, with a statistically increase in the incidence of pancreatic tumors observed.

Respiratory and Dermal Sensitization: Based on the available toxicity data in animals and epidemiologic studies of humans, aromatic diisocyanates such as TDI and MDI are strong respiratory sensitisers. Aliphatic diisocyanates are generally not active in animal models for respiratory sensitization. However, HDI and possibly isophorone diisocyanate (IPDI), are reported to be associated with respiratory sensitization in humans. Symptoms resulting from occupational exposure to HDI include shortness of breath, increased bronchoconstriction reaction to histamine challenges, asthmatic reactions, wheezing and coughing. Two case reports of human exposure to IPDI by inhalation suggest IPDI is a respiratory sensitiser in humans. In view of the information from case reports in humans, it would be prudent at this time to assume that both aromatic and aliphatic diisocyanates are respiratory sensitisers. Studies in both human and mice using TDI, HDI, MDI and dicyclohexylmethane-4,4'-diisocyanate (HMDI) suggest cross-reactivity with the other diisocyanates, irrespective of whether the challenge compound was an aliphatic or aromatic diisocyanate. Diisocyanates are moderate to strong dermal sensitisers in animal studies. There seems to be little or no difference in the level of reactivity between aromatic and aliphatic diisocyanates.

Dermal Irritation: Skin irritation studies performed on rabbits and guinea pigs indicate no difference in the effects of aromatic versus aliphatic diisocyanates. The level of irritation ranged from slightly to severely irritating to the skin. One chemical, hydrogenated MDI (1,1-methylenebis-4-isocyanatocyclohexane), was found to be corrosive to the skin in guinea pigs.

| Acute Toxicity | ~ | Carcinogenicity | ~ |
|-----------------------------------|----------|--------------------------|----------|
| Skin Irritation/Corrosion | ✓ | Reproductivity | × |
| Serious Eye Damage/Irritation | ~ | STOT - Single Exposure | ✓ |
| Respiratory or Skin sensitisation | ~ | STOT - Repeated Exposure | ✓ |
| Mutagenicity | × | Aspiration Hazard | × |

Issue Date: 23/12/2022 Print Date: 16/01/2023

✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

| Uharbana Uharasta | Endpoint | Test Duration (hr) | Species | Value | Source |
|---------------------------------|------------------|--------------------|---|------------------|------------------|
| Hychem Hycrete PU-SL(m)B | Not Available | Not Available | Not Available | Not Available | Not Available |
| polymeric | Endpoint | Test Duration (hr) | Species | Value | Source |
| diphenylmethane diisocyanate | Not Available | Not Available | Not Available | Not Available | Not Available |
| | Endpoint | Test Duration (hr) | Species | Value | Source |
| | EC50 | 72h | Algae or other aquatic plants | >1640mg/l | 2 |
| MDI, oligomeric | LC50 | 96h | Fish | >1000mg/l | 2 |
| | EC50(ECx) | 24h | Crustacea | >1000mg/l | Not Available |
| Legend: | 4. US EPA, Ed | | pe ECHA Registered Substances - Ecotoxicologi Data 5. ECETOC Aquatic Hazard Assessment D | • | |

DO NOT discharge into sewer or waterways.

Persistence and degradability

| Ingredient | Persistence: Water/Soil | Persistence: Air |
|------------|---------------------------------------|---------------------------------------|
| | No Data available for all ingredients | No Data available for all ingredients |

Bioaccumulative potential

| Ingredient | Bioaccumulation |
|------------|---------------------------------------|
| | No Data available for all ingredients |

Mobility in soil

| Ingredient | Mobility |
|------------|---------------------------------------|
| | No Data available for all ingredients |

SECTION 13 Disposal considerations

Waste treatment methods

- 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.

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

Product / Packaging disposal

- ▶ Reduction
- ► Reuse
- ► Recycling
- Disposal (if all else fails)

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

- ▶ 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.

Issue Date: 23/12/2022 Print Date: 16/01/2023

- 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

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

| Product name | Group |
|--|---------------|
| polymeric diphenylmethane diisocyanate | Not Available |
| MDI, oligomeric | Not Available |

Transport in bulk in accordance with the ICG Code

| Product name | Ship Type |
|--|---------------|
| polymeric diphenylmethane diisocyanate | Not Available |
| MDI, oligomeric | Not Available |

SECTION 15 Regulatory information

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

polymeric diphenylmethane diisocyanate is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

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

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6

MDI, oligomeric is found on the following regulatory lists

Not Applicable

Australian Inventory of Industrial Chemicals (AIIC)

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Not Classified as Carcinogenic

National Inventory Status

| National Inventory | Status |
|--|--|
| Australia - AIIC / Australia Non-Industrial Use | No (MDI, oligomeric) |
| Canada - DSL | No (MDI, oligomeric) |
| Canada - NDSL | No (polymeric diphenylmethane diisocyanate; MDI, oligomeric) |
| China - IECSC | No (MDI, oligomeric) |
| Europe - EINEC / ELINCS / NLP | No (polymeric diphenylmethane diisocyanate) |
| Japan - ENCS | Yes |

Version No: **5.1**

Hychem Hycrete PU-SL(m)B

Issue Date: **23/12/2022**Print Date: **16/01/2023**

| National Inventory | Status |
|---------------------|---|
| Korea - KECI | No (MDI, oligomeric) |
| New Zealand - NZIoC | Yes |
| Philippines - PICCS | Yes |
| USA - TSCA | No (MDI, oligomeric) |
| Taiwan - TCSI | Yes |
| Mexico - INSQ | No (MDI, oligomeric) |
| Vietnam - NCI | Yes |
| Russia - FBEPH | Yes |
| 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 | 23/12/2022 |
|---------------|------------|
| Initial Date | 15/06/2012 |

SDS Version Summary

| Version | Date of Update | Sections Updated |
|---------|----------------|--|
| 4.1 | 01/11/2019 | One-off system update. NOTE: This may or may not change the GHS classification, Classification |
| 5.1 | 23/12/2022 | Classification review due to GHS Revision change. |

Other information

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

 ${\sf PC-STEL} : {\sf Permissible\ Concentration-Short\ Term\ Exposure\ Limit}$

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

 Chemwatch: 32-1381
 Page 18 of 18
 Issue Date: 23/12/2022

 Version No: 5.1
 Hychem Hycrete PU-SL(m)B
 Print Date: 16/01/2023

NCI: National Chemical Inventory

FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

This document is copyright.

Apart from any fair dealing for the purposes of private study, research, review or criticism, as permitted under the Copyright Act, no part may be reproduced by any process without written permission from CHEMWATCH.

TEL (+61 3) 9572 4700.

Hychem Hycrete PU-SL(m)C Hychem International

Chemwatch: 32-1382 Version No: 6.1

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard Alert Code: 4

Issue Date: **20/08/2021**Print Date: **03/02/2023**L.GHS.AUS.EN

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

Product name Hychem Hycrete PU-SL(m)C 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 Coating material.

Details of the manufacturer or supplier of the safety data sheet

| Registered company name | Hychem International |
|-------------------------|---|
| Address | Unit 1, 30 Bluett Drive Smeaton Grange NSW 2567 Australia |
| Telephone | +61 2 4646 1660 |
| Fax | +61 2 4647 3700 |
| Website | Not Available |
| Email | Not Available |

Emergency telephone number

| Association / Organisation | CHEMWATCH EMERGENCY RESPONSE |
|--------------------------------------|------------------------------|
| Emergency telephone numbers | +61 1800 951 288 |
| Other emergency telephone numbers | +61 3 9573 3188 |

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

SECTION 2 Hazards identification

Classification of the substance or mixture

| Poisons Schedule | Not Applicable |
|-------------------------------|--|
| Classification ^[1] | Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2A, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Repeated Exposure Category 2 |
| Legend: | 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI |

Label elements

Hazard pictogram(s)





Signal word

Warning

Issue Date: 20/08/2021 Print Date: 03/02/2023

Hazard statement(s)

| H315 | Causes skin irritation. |
|------|--|
| H319 | Causes serious eye irritation. |
| H335 | May cause respiratory irritation. |
| H373 | May cause damage to organs through prolonged or repeated exposure. |

Precautionary statement(s) Prevention

| P260 | Do not breathe dust/fume. |
|------|--|
| P271 | Use only outdoors or in a well-ventilated area. |
| P280 | Wear protective gloves, protective clothing, eye protection and face protection. |
| P264 | Wash all exposed external body areas thoroughly after handling. |

Precautionary statement(s) Response

| 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/doctor/physician/first aider/if you feel unwell. |
| P337+P313 | If eye irritation persists: Get medical advice/attention. |
| P302+P352 | IF ON SKIN: Wash with plenty of water and soap. |
| P304+P340 | IF INHALED: Remove person to fresh air and keep comfortable for breathing. |
| P332+P313 | If skin irritation occurs: Get medical advice/attention. |
| P362+P364 | Take off contaminated clothing and wash it before reuse. |

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 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 | | | |
|---------------|---|-----------------------------|--|--|
| 14808-60-7 | 50-65 | silica crystalline - quartz | | |
| Not Available | 25-50 | cement, as | | |
| 65997-15-1 | | portland cement | | |
| Legend: | 1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L * EU IOELVs available | | | |

SECTION 4 First aid measures

D

| escription of first aid m | easures |
|---------------------------|---|
| 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. |

Chemwatch: 32-1382 Page 3 of 14 Issue Date: 20/08/2021 Version No: 6.1 Print Date: 03/02/2023

Hychem Hycrete PU-SL(m)C

| 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 aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay. |
|------------|--|
| Ingestion | Immediately give a glass of water. First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor. |

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

SECTION 5 Firefighting measures

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

| <u> </u> | |
|-------------------------|---|
| Fire Incompatibility | None known. |
| | |
| Advice for firefighters | |
| Fire Fighting | When silica dust is dispersed in air, firefighters should wear inhalation protection as hazardous substances from the fire may be adsorbed on the silica particles. When heated to extreme temperatures, (>1700 deg.C) amorphous silica can fuse. 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

Non combustible. ▶ Not considered a significant fire risk, however containers may burn.

silicon dioxide (SiO2)

May emit poisonous fumes.

May emit corrosive fumes.

Decomposition may produce toxic fumes of:

HAZCHEM

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

| wethous and material for | containment and cleaning up |
|--------------------------|---|
| Minor Spills | Clean up all 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. Sweep up, shovel up or Vacuum up (consider explosion-proof machines designed to be grounded during storage and use). Place spilled material in clean, dry, sealable, labelled container. |
| Major Spills | Moderate hazard. CAUTION: Advise personnel in area. Alert Emergency Services and tell them location and nature of hazard. |

Chemwatch: 32-1382 Page 4 of 14 Issue Date: 20/08/2021 Version No: 6.1 Print Date: 03/02/2023

Hychem Hycrete PU-SL(m)C

- ▶ Control personal contact by wearing protective clothing. ▶ Prevent, by any means available, spillage from entering drains or water courses.
- ► Recover product wherever possible.
- F 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 hand | dling |
|---------------------------|---|
| 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. |
| Other information | Store in original containers. Keep containers securely sealed. Store in a cool, dry area protected from environmental extremes. 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. For major quantities: Consider storage in bunded areas - ensure storage areas are isolated from sources of community water (including stormwater, ground water, lakes and streams). Ensure that accidental discharge to air or water is the subject of a contingency disaster management plan; this may require |

Conditions for safe storage, including any incompatibilities

consultation with local authorities.

| Suitable container | Polyethylene or polypropylene container. Check all containers are clearly labelled and free from leaks. |
|-------------------------|---|
| Storage incompatibility | Silicas: react with hydrofluoric acid to produce silicon tetrafluoride gas react with xenon hexafluoride to produce explosive xenon trioxide reacts exothermically with oxygen difluoride, and explosively with chlorine trifluoride (these halogenated materials are not commonplace industrial materials) and other fluorine-containing compounds may react with fluorine, chlorates are incompatible with strong oxidisers, manganese trioxide, chlorine trioxide, strong alkalis, metal oxides, concentrated orthophosphoric acid, vinyl acetate may react vigorously when heated with alkali carbonates. |

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

| Source | Ingredient | Material name | TWA | STEL | Peak | Notes |
|---------------------------------|--------------------------------|--|---------------|------------------|------------------|---------------|
| Australia Exposure Standards | silica crystalline - quartz | Silica - Crystalline: Quartz (respirable dust) | 0.05 mg/m3 | Not Available | Not Available | Not Available |

Issue Date: **20/08/2021**Print Date: **03/02/2023**

| Source | Ingredient | Material name | TWA | STEL | Peak | Notes |
|---------------------------------|--------------------|-----------------|-------------|------------------|------------------|--|
| Australia Exposure Standards | portland cement | Portland cement | 10 mg/m3 | Not Available | Not Available | (a) This value is for inhalable dust containing no asbestos and < 1% crystalline silica. |

Emergency Limits

| Ingredient | TEEL-1 | TEEL-2 | TEEL-3 |
|-----------------------------|-------------|----------|-----------|
| silica crystalline - quartz | 0.075 mg/m3 | 33 mg/m3 | 200 mg/m3 |

| Ingredient | Original IDLH | Revised IDLH |
|-----------------------------|---------------------|---------------|
| silica crystalline - quartz | 25 mg/m3 / 50 mg/m3 | Not Available |
| portland cement | 5,000 mg/m3 | Not Available |

MATERIAL DATA

for calcium silicate:

containing no asbestos and <1% crystalline silica

ES TWA: 10 mg/m3 inspirable dust

TLV TWA: 10 mg/m3 total dust (synthetic nonfibrous) A4

Although in vitro studies indicate that calcium silicate is more toxic than substances described as "nuisance dusts" is thought that adverse health effects which might occur following exposure to 10-20 mg/m3 are likely to be minimal. The TLV-TWA is thought to be protective against the physical risk of eye and upper respiratory tract irritation in workers and to prevent interference with vision and deposition of particulate in the eyes, ears, nose and mouth.

WARNING: For inhalation exposure ONLY: This substance has been classified by the IARC as Group 1: CARCINOGENIC TO HUMANS

NOTE: This substance has been classified by the ACGIH as A4 NOT classifiable as causing Cancer in humans

The International Agency for Research on Cancer (IARC) has classified occupational exposures to **respirable** (<5 um) crystalline silica as being carcinogenic to humans. This classification is based on what IARC considered sufficient evidence from epidemiological studies of humans for the carcinogenicity of inhaled silica in the forms of quartz and cristobalite. Crystalline silica is also known to cause silicosis, a non-cancerous lung disease.

Intermittent exposure produces; focal fibrosis, (pneumoconiosis), cough, dyspnoea, liver tumours.

* Millions of particles per cubic foot (based on impinger samples counted by light field techniques).

NOTE: the physical nature of quartz in the product determines whether it is likely to present a chronic health problem. To be a hazard the material must enter the breathing zone as respirable particles.

The concentration of dust, for application of respirable dust limits, is to be determined from the fraction that penetrates a separator whose size collection efficiency is described by a cumulative log-normal function with a median aerodynamic diameter of 4.0 um (+-) 0.3 um and with a geometric standard deviation of 1.5 um (+-) 0.1 um, i.e..generally less than 5 um.

Because the margin of safety of the quartz TLV is not known with certainty and given the associated link between silicosis and lung cancer it is recommended that quartz concentrations be maintained as far below the TLV as prudent practices will allow.

Exposure to respirable crystalline silicas (RCS) represents a significant hazard to workers, particularly those employed in the construction industry where respirable dusts of of cement and concrete are common. Cutting, grinding and other high speed processes, involving their finished products, may further result in dusty atmospheres. Bricks are also a potential source of RCSs under such circumstances.

It is estimated that half of the occupations, involved in construction work, are exposed to levels of RCSs, higher than the current allowable limits. Beaudry et al: Journal of Occupational and Environmental Hygiene 10: 71-77; 2013

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.

The basic types of engineering controls are:

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.

Appropriate engineering controls

- Local exhaust ventilation is required where solids are handled as powders or crystals; even when particulates are relatively large, a certain proportion will be powdered by mutual friction.
- If in spite of local exhaust an adverse concentration of the substance in air could occur, respiratory protection should be considered.

Such protection might consist of:

- (a): particle dust respirators, if necessary, combined with an absorption cartridge;
- (b): filter respirators with absorption cartridge or canister of the right type;
- (c): fresh-air hoods or masks.

Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

Chemwatch: 32-1382 Page 6 of 14
Version No: 6.1

Hychem Hycrete PU-SL(m)C

Issue Date: **20/08/2021**Print Date: **03/02/2023**

| Type of Contaminant: | Air Speed: |
|--|---------------------------------|
| direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion) | 1-2.5 m/s (200-500 f/min.) |
| grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion). | 2.5-10 m/s (500-2000 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 fan, for example, should be a minimum of 4-10 m/s (800-2000 f/min) for extraction of crusher dusts generated 2 metres 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.

Personal protection











Eye and face 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 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

NOTE:

- 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.

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 moisturiser is recommended.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- · frequency and duration of contact,
- · chemical resistance of glove material,
- $\boldsymbol{\cdot}$ glove thickness and
- dexterity

Hands/feet protection

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- · When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- · Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.
- · Contaminated gloves should be replaced.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- · Excellent when breakthrough time > 480 min
- · Good when breakthrough time > 20 min
- · Fair when breakthrough time < 20 min
- · Poor when glove material degrades

For general applications, gloves with a thickness typically greater than $0.35\,\mathrm{mm}$, are recommended.

It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.

Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the

Issue Date: **20/08/2021**Print Date: **03/02/2023**

manufacturers technical data should always be taken into account to ensure selection of the most appropriate glove for the task. Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example: · Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of. · Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. 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. butvl rubber. ▶ fluorocaoutchouc. polyvinyl chloride. Gloves should be examined for wear and/ or degradation constantly. **Body protection** See Other protection below Overalls. P.V.C apron. ▶ Barrier cream. Other protection Skin cleansing cream. ▶ Eye wash unit.

Respiratory protection

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

| Required Minimum Protection Factor | Half-Face Respirator | Full-Face Respirator | Powered Air Respirator |
|------------------------------------|----------------------|----------------------|------------------------|
| up to 10 x ES | P1 Air-line* | - | PAPR-P1 - |
| up to 50 x ES | Air-line** | P2 | PAPR-P2 |
| up to 100 x ES | - | P3 | - |
| | | Air-line* | - |
| 100+ x ES | - | Air-line** | PAPR-P3 |

* - Negative pressure demand ** - Continuous flow

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)

If inhalation risk above the TLV exists, wear approved dust respirator.

Use respirators with protection factors appropriate for the exposure level.

- ▶ Up to 5 X TLV, use valveless mask type; up to 10 X TLV, use 1/2 mask dust respirator
- ▶ Up to 50 X TLV, use full face dust respirator or demand type C air supplied respirator
- Up to 500 X TLV, use powered air-purifying dust respirator or a Type C pressure demand supplied-air respirator
- Over 500 X TLV wear full-face self-contained breathing apparatus with positive pressure mode or a combination respirator with a Type C positive pressure supplied-air full-face respirator and an auxiliary self-contained breathing apparatus operated in pressure demand or other positive pressure mode
- Respirators may be necessary when engineering and administrative controls do not adequately prevent exposures.
- The decision to use respiratory protection should be based on professional judgment that takes into account toxicity information, exposure measurement data, and frequency and likelihood of the worker's exposure ensure users are not subject to high thermal loads which may result in heat stress or distress due to personal protective equipment (powered, positive flow, full face apparatus may be an option).
- · Published occupational exposure limits, where they exist, will assist in determining the adequacy of the selected respiratory protection. These may be government mandated or vendor recommended.
- · Certified respirators will be useful for protecting workers from inhalation of particulates when properly selected and fit tested as part of a complete respiratory protection program.
- · Where protection from nuisance levels of dusts are desired, use type N95 (US) or type P1 (EN143) dust masks. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU)
- · Use approved positive flow mask if significant quantities of dust becomes airborne.
- · Try to avoid creating dust conditions.

SECTION 9 Physical and chemical properties

| Information on basic physical and chemical properties | | | |
|---|---|---------------------------|-----|
| Appearance | Green powder with no odour; insoluble in water. | | |
| | | | |
| Physical state | Divided Solid | Relative density (Water = | 2.6 |

Chemwatch: **32-1382** Version No: **6.1** Page 8 of 14

Hychem Hycrete PU-SL(m)C

Issue Date: **20/08/2021**Print Date: **03/02/2023**

| | | 1) | |
|--|----------------|---|----------------|
| Odour | Not Available | Partition coefficient n-octanol / water | Not Available |
| Odour threshold | Not Available | Auto-ignition temperature (°C) | Not Applicable |
| pH (as supplied) | Not Applicable | Decomposition temperature (°C) | Not Available |
| Melting point / freezing point (°C) | Not Available | Viscosity (cSt) | Not Applicable |
| Initial boiling point and boiling range (°C) | 2230 | 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 Applicable | Surface Tension (dyn/cm or mN/m) | Not Applicable |
| Lower Explosive Limit (%) | Not Applicable | Volatile Component (%vol) | Not Applicable |
| Vapour pressure (kPa) | Not Applicable | Gas group | Not Available |
| Solubility in water | Immiscible | pH as a solution (1%) | Not Applicable |
| 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

Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system.

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.

Inhaled

Effects on lungs are significantly enhanced in the presence of respirable particles. Overexposure to respirable dust may produce wheezing, coughing and breathing difficulties leading to or symptomatic of impaired respiratory function.

Acute silicosis occurs under conditions of extremely high silica dust exposure particularly when the particle size of the dust is small. It differs greatly from classical silicosis both clinically and pathologically. The disease is rapidly progressive with diffuse pulmonary involvement developing only months after the initial exposure and causing deaths within 1 to 2 years. It is often complicated by an associated tuberculosis. The lungs of victims contain no classical silicotic nodules or only a few, microscopic abortive nodules, whereas the air spaces are diffusively filled and distended with silica-containing, lipoprotein paste in which degenerating and necrotic macrophages are sometimes discernible - the condition is sometimes described as alveolar lipoproteinosis. The uptake of silica particles by macrophages and lysosymal incorporation, is followed by rupture of the lysosomal membrane and release of lysosomal enzymes into cytoplasm of the macrophage. This causes the macrophage to be digested by its own enzymes and after lysis the free silica is released to be ingested by other macrophages thus continuing initiate collagen formation in the lung tissue producing the characteristic nodule found in classical (chronic) silicosis.

Ingestion

Not normally a hazard due to the physical form of product. The material is a physical irritant to the gastro-intestinal tract

Issue Date: **20/08/2021**Print Date: **03/02/2023**

Skin Contact

Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis.

Entry into the blood-stream through, for example, cuts, abrasions, puncture wounds 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

Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals.

Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

Harmful: danger of serious damage to health by prolonged exposure through inhalation.

The material may accentuate any pre-existing dermatitis condition

Serious damage (clear functional disturbance or morphological change which may have toxicological significance) is likely to be caused by repeated or prolonged exposure. As a rule the material produces, or contains a substance which produces severe lesions. Such damage may become apparent following direct application in subchronic (90 day) toxicity studies or following sub-acute (28 day) or chronic (two-year) toxicity tests.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

Limited evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a significant number of individuals at a greater frequency than would be expected from the response of a normal population.

Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking. There exists limited evidence that shows that skin contact with the material is capable either of inducing a sensitisation reaction in a significant number of individuals, and/or of producing positive response in experimental animals.

Red blood cells and rabbit alveolar macrophages exposed to calcium silicate insulation materials in vitro showed haemolysis in one study but not in another. Both studies showed the substance to be more cytotoxic than titanium dioxide but less toxic than asbestos.

In a small cohort mortality study of workers in a wollastonite quarry, the observed number of deaths from all cancers combined and lung cancer were lower than expected. Wollastonite is a calcium inosilicate mineral (CaSiO3). In some cases, small amounts of iron (Fe), and manganese (Mn), and lesser amounts of magnesium (Mg) substitute for calcium (Ca) in the mineral formulae (e.g., rhodonite)

In an inhalation study in rats no increase in tumour incidence was observed but the number of fibres with lengths exceeding 5 um and a diameter of less than 3 um was relatively low. Four grades of wollastonite of different fibre size were tested for carcinogenicity in one experiment in rats by intrapleural implantation. There was no information on the purity of the four samples used. A slight increase in the incidence of pleural sarcomas was observed with three grades, all of which contained fibres greater than 4 um in length and less than 0.5 um in diameter.

In two studies by intraperitoneal injection in rats using wollastonite with median fibre lengths of 8.1 um and 5.6 um respectively, no intra-abdominal tumours were found.

Chronic

Evidence from wollastonite miners suggests that occupational exposure can cause impaired respiratory function and pneumoconiosis. However animal studies have demonstrated that wollastonite fibres have low biopersistence and induce a transient inflammatory response compared to various forms of asbestos. A two-year inhalation study in rats at one dose showed no significant inflammation or fibrosis

Chronic symptoms produced by crystalline silicas included decreased vital lung capacity and chest infections. Lengthy exposure may cause silicosis a disabling form of pneumoconiosis which may lead to fibrosis, a scarring of the lining of the air sacs in the lung.

The form and severity in which silicosis manifests itself depends in part on the type and extent of exposure to silica dusts: chronic, accelerated and acute forms are all recognized. In later stages the critical condition may become disabling and potentially fatal. Restrictive and/or obstructive lung function changes may result from chronic exposure. A risk associated with silicosis is development of pulmonary tuberculosis (silico-tuberculosis). Respiratory insufficiencies due to massive fibrosis and reduced pulmonary function, possibly with accompanying heart failure, are other potential causes of death due to silicosis. Not all individuals with silicosis will exhibit symptoms (signs) of the disease. However, silicosis can be progressive, and symptoms may potentially appear years after exposures have ceased. Symptoms of silicosis may include (but are not limited to): Shortness of breath; difficulty breathing with or without exertion; coughing; diminished work capacity; diminished chest expansion; reduction of lung volume; heart enlargement and/or failure.

Respirable dust containing newly broken particles has been shown to be more hazardous to animals in laboratory tests than respirable dust containing older silica particles of similar size. Respirable silica particles which had aged for sixty days or more showed less lung injury in animals than equal exposures of respirable dust containing newly broken pieces of silica. There are reports in the literature indicating that crystalline silica exposure may be associated with adverse health effects involving the kidney, scleroderma (thickening of the skin caused by swelling and thickening of fibrous tissue) and other autoimmune and immunity-related disorders. Several studies of persons with silicosis or silica exposure also indicate or suggest increased risk of developing lung cancer, a risk that may increase with the duration of exposure. Many of these studies of silicosis do not account for lung cancer confounders, especially smoking.

Symptoms may appear 8 to 18 months after initial exposure. Smoking increases this risk. Classic silicosis is a chronic disease characterised by the formation of scattered, rounded or stellate silica-containing nodules of scar tissue in the lungs ranging from microscopic to 1.0 cm or more. The nodules isolate the inhaled silica particles and protect the surrounding normal and functioning tissue from continuing injury. Simple silicosis (in which the nodules are less than 1.0 cm in diameter) is generally

Chemwatch: **32-1382** Page **10** of **14**Version No: **6.1**

Hychem Hycrete PU-SL(m)C

Issue Date: **20/08/2021**Print Date: **03/02/2023**

asymptomatic but may be slowly progressive even in the absence of continuing exposure. Simple silicosis can develop in complicated silicoses (in which nodules are greater than 1.0 cm in diameter) and can produce disabilities including an associated tuberculous infection (which 50 years ago accounted for 75% of the deaths among silicotic workers). Crystalline silica deposited in the lungs causes epithelial and macrophage injury and activation. Crystalline silica translocates to the interstitium and the regional lymph nodes and cause the recruitment of inflammatory cells in a dose dependent manner. In humans, a large fraction of crystalline silica persists in the lungs. The question of potential carcinogenicity associated with chronic inhalation of crystalline silica remains equivocal with some studies supporting the proposition and others finding no significant association. The results of recent epidemiological studies suggest that lung cancer risk is elevated only in those patients with overt silicosis. A relatively large number of epidemiological studies have been undertaken and in some, increased risk gradients have been observed in relation to dose surrogates - cumulative exposure, duration of exposure, the presence of radiographically defined silicosis, and peak intensity exposure. Chronic inhalation in rats by single or repeated intratracheal instillation produced a significant increase in the incidences of adenocarcinomas and squamous cell carcinomas of the lung. Lifetime inhalation of crystalline silica (87% alpha-quartz) at 1 mg/m3 (74% respirable) by rats, produced an increase in animals with keratinising cystic squamous cell tumours, adenomas, adenocarcinomas, adenosquamous cell carcinomas, squamous cell carcinoma and nodular bronchiolar alveolar hyperplasia accompanied by extensive subpleural and peribronchiolar fibrosis, increased pulmonary collagen content, focal lipoproteinosis and macrophage infiltration. Thoracic and abdominal malignant lymphomas developed in rats after single intrapleural and intraperitoneal injection of suspensions of several types of quartz.

Some studies show excess numbers of cases of schleroderma, connective tissue disorders, lupus, rheumatoid arthritis chronic kidney diseases, and end-stage kidney disease in workers

NOTE: Some jurisdictions require health surveillance be conducted on workers occupationally exposed to silica, crystalline. Such surveillance should emphasise

- · demography, occupational and medical history and health advice
- standardised respiratory function tests such as FEV1, FVC and FEV1/FVC
- standardised respiratory function tests such as FV1, FVC and FEV1/FVC
- · chest X-ray, full size PA view
- · records of personal exposure

Overexposure to the breathable dust may cause coughing, wheezing, difficulty in breathing and impaired lung function. Chronic symptoms may include decreased vital lung capacity and chest infections. Repeated exposures in the workplace to high levels of fine-divided dusts may produce a condition known as pneumoconiosis, which is the lodgement of any inhaled dusts in the lung, irrespective of the effect. This is particularly true when a significant number of particles less than 0.5 microns (1/50000 inch) are present. Lung shadows are seen in the X-ray. Symptoms of pneumoconiosis may include a progressive dry cough, shortness of breath on exertion, increased chest expansion, weakness and weight loss. As the disease progresses, the cough produces stringy phlegm, vital capacity decreases further, and shortness of breath becomes more severe. Other signs or symptoms include changed breath sounds, reduced oxygen uptake during exercise, emphysema and rarely, pneumothorax (air in the lung cavity). Removing workers from the possibility of further exposure to dust generally stops the progress of lung abnormalities. When there is high potential for worker exposure, examinations at regular period with emphasis on lung function should be performed. Inhaling dust over an extended number of years may cause pneumoconiosis, which is the accumulation of dusts in the lungs and the subsequent tissue reaction. This may or may not be reversible.

| Hychem Hycrete | TOXICITY | IRRITATION | |
|-----------------------------|---|---|--|
| PU-SL(m)C | Not Available | Not Available | |
| | TOXICITY | IRRITATION | |
| silica crystalline - quartz | Oral (Rat) LD50: 500 mg/kg ^[2] | Not Available | |
| | TOXICITY | IRRITATION | |
| portland cement | Not Available | Not Available | |
| Legend: | | Substances - Acute toxicity 2. Value obtained from ma | |

WARNING: For inhalation exposure <u>ONLY</u>: This substance has been classified by the IARC as Group 1: **CARCINOGENIC TO HUMANS**

SILICA CRYSTALLINE - QUARTZ

The International Agency for Research on Cancer (IARC) has classified occupational exposures to **respirable** (<5 um) crystalline silica as being carcinogenic to humans. This classification is based on what IARC considered sufficient evidence from epidemiological studies of humans for the carcinogenicity of inhaled silica in the forms of quartz and cristobalite. Crystalline silica is also known to cause silicosis, a non-cancerous lung disease.

Intermittent exposure produces; focal fibrosis, (pneumoconiosis), cough, dyspnoea, liver tumours.

* Millions of particles per cubic foot (based on impinger samples counted by light field techniques).

NOTE: the physical nature of quartz in the product determines whether it is likely to present a chronic health problem. To be a hazard the material must enter the breathing zone as respirable particles.

PORTLAND CEMENT

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

Issue Date: 20/08/2021 Print Date: 03/02/2023

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

No significant acute toxicological data identified in literature search.

Hychem Hycrete PU-SL(m)C & PORTLAND CEMENT

Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. 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. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.

| 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 not available or does not fill the criteria for classification

✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

| Uhrahama Uhranata | Endpoint | Test Duration (hr) | Species | Value | Source |
|-----------------------------|------------------|--------------------|--|------------------|------------------|
| Hychem Hycrete PU-SL(m)C | Not Available | Not Available | Not Available | Not Available | Not Available |
| | Endpoint | Test Duration (hr) | Species | Value | Source |
| silica crystalline - quartz | Not Available | Not Available | Not Available | Not Available | Not Available |
| | Endpoint | Test Duration (hr) | Species | Value | Source |
| portland cement | Not Available | Not Available | Not Available | Not Available | Not Available |
| Legend: | 4. US EPA, E | | pe ECHA Registered Substances - Ecotoxi Data 5. ECETOC Aquatic Hazard Assessn | | |

DO NOT discharge into sewer or waterways.

Persistence and degradability

| Ingredient | Persistence: Water/Soil | Persistence: Air |
|------------|---------------------------------------|---------------------------------------|
| | No Data available for all ingredients | No Data available for all ingredients |

Bioaccumulative potential

| Ingredient | Bioaccumulation |
|------------|---------------------------------------|
| | No Data available for all ingredients |

Mobility in soil

| Ingredient | Mobility |
|------------|---------------------------------------|
| | No Data available for all ingredients |

Issue Date: **20/08/2021**Print Date: **03/02/2023**

SECTION 13 Disposal considerations

Waste treatment methods

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

- Reduction
- ► Reuse
- ▶ Recycling
- Disposal (if all else fails)

Product / Packaging disposal

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate. In most instances the supplier of the material should be consulted.

- 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.
- ▶ Recycle wherever possible or consult manufacturer for recycling options.
- Consult State Land Waste Management Authority for disposal.
- ▶ Bury residue in an authorised landfill.
- ▶ Recycle containers if possible, or dispose of in an authorised landfill.

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

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

| Product name | Group |
|-----------------------------|---------------|
| silica crystalline - quartz | Not Available |
| portland cement | Not Available |

Transport in bulk in accordance with the ICG Code

| Product name | Ship Type |
|-----------------------------|---------------|
| silica crystalline - quartz | Not Available |
| portland cement | Not Available |

SECTION 15 Regulatory information

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

silica crystalline - quartz is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

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

Australian Inventory of Industrial Chemicals (AIIC)

portland cement is found on the following regulatory lists

Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 1: Carcinogenic to humans

National Inventory Status

Issue Date: 20/08/2021 Print Date: 03/02/2023

| National Inventory | Status | | |
|--|--|--|--|
| Australia - AIIC / Australia Non-Industrial Use | Yes | | |
| Canada - DSL | Yes | | |
| Canada - NDSL | No (silica crystalline - quartz; portland cement) | | |
| China - IECSC | Yes | | |
| Europe - EINEC / ELINCS / NLP | Yes | | |
| Japan - ENCS | No (portland cement) | | |
| Korea - KECI | Yes | | |
| New Zealand - NZIoC | Yes | | |
| Philippines - PICCS | No (portland cement) | | |
| USA - TSCA | Yes | | |
| Taiwan - TCSI | Yes | | |
| Mexico - INSQ | Yes | | |
| Vietnam - NCI | Yes | | |
| Russia - FBEPH | Yes | | |
| 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 | 20/08/2021 |
|---------------|------------|
| Initial Date | 07/06/2012 |

SDS Version Summary

| Version | Date of Update | Sections Updated |
|---------|----------------|---|
| 5.1 | 15/04/2021 | Classification change due to full database hazard calculation/update. |
| 6.1 | 20/08/2021 | Classification change due to full database hazard calculation/update. |

Other information

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 $_{\circ}$

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

Chemwatch: 32-1382 Page **14** of **14** Issue Date: 20/08/2021 Version No: 6.1 Print Date: 03/02/2023

Hychem Hycrete PU-SL(m)C

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.

Apart from any fair dealing for the purposes of private study, research, review or criticism, as permitted under the Copyright Act, no part may be reproduced by any process without written permission from CHEMWATCH.

TEL (+61 3) 9572 4700.