

# **Duroseal 25 LM**

# **Durotech Industries**

Chemwatch: **5245-61** Version No: **2.1.1.1** 

Safety Data Sheet according to WHS and ADG requirements

# Chemwatch Hazard Alert Code: 2

Issue Date: **07/03/2017** Print Date: **30/03/2017** L.GHS.AUS.EN

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

#### **Product Identifier**

Product name	Duroseal 25 LM
Synonyms	Not Available
Other means of identification	Not Available

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

Relevant identified uses Use according to manufacturer's directions.

# Details of the supplier of the safety data sheet

Registered company name	Durotech Industries
Address	14 Essex Street Minto NSW 2566 Australia
Telephone	02 9603 1177
Fax	02 9475 5059
Website	www.durotechindustries.com.au
Email	accounts@durotechindustries.com.au

# Emergency telephone number

Association / Organisation	Not Available
Emergency telephone numbers	0421 670 636
Other emergency telephone numbers	Not Available

# **SECTION 2 HAZARDS IDENTIFICATION**

# Classification of the substance or mixture

# HAZARDOUS CHEMICAL. NON-DANGEROUS GOODS. According to the WHS Regulations and the ADG Code.

COMBUSTIBLE LIQUID, regulated for storage purposes only

Poisons Schedule	Not Applicable			
Classification [1]	Flammable Liquid Category 4, Respiratory Sensitizer Category 1, Skin Sensitizer Category 1, Carcinogenicity Category 2			
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS ; 3. Classification drawn from EC Directive 1272/2008 - Annex VI			

# Label elements

GHS label elements



SIGNAL WORD DANGER

### Hazard statement(s)

H227	Combustible liquid
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
H317	May cause an allergic skin reaction.
H351	Suspected of causing cancer.

# Precautionary statement(s) Prevention

Frecautionary Statement(s) Frevention			
P201	otain special instructions before use.		
P210	P210 Keep away from heat/sparks/open flames/hot surfaces No smoking.		

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P261 Avoid breathing mist/vapours/spray. P280 Wear protective gloves/protective clothing/eye protection/face protection. P281 Use personal protective equipment as required. P285 In case of inadequate ventilation wear respiratory protection. P272 Contaminated work clothing should not be allowed out of the workplace.

# Precautionary statement(s) Response

P304+P340	F INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.			
P308+P313	xposed or concerned: Get medical advice/attention.			
P342+P311	encing respiratory symptoms: Call a POISON CENTER or doctor/physician.			
P363	contaminated clothing before reuse.			
P370+P378	n case of fire: Use alcohol resistant foam or normal protein foam for extinction.			
P302+P352	IF ON SKIN: Wash with plenty of soap and water.			
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.			

#### Precautionary statement(s) Storage

P403+P235	Store in a well-ventilated place. Keep cool.		
P405	Store locked up.		

# Precautionary statement(s) Disposal

P501 Dispose of contents/container in accordance with local regulations.

# **SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS**

#### Substances

See section below for composition of Mixtures

# Mixtures

CAS No	%[weight]	Name
64742-48-9.	<10	naphtha petroleum, heavy, hydrotreated
1330-20-7	<1	<u>xylene</u>
101-68-8	0.1-1	4,4'-diphenylmethane diisocyanate (MDI)
	balance	Ingredients determined not to be hazardous

# **SECTION 4 FIRST AID MEASURES**

# Description of first aid measures

escription of first aid me	rasules				
Eye Contact	If this product comes in contact with the eyes:  Wash out immediately with fresh running water.  Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.  Seek medical attention without delay; if pain persists or recurs seek medical attention.  Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.				
Skin Contact	If skin contact occurs:  ► Immediately remove all contaminated clothing, including footwear.  ► Flush skin and hair with running water (and soap if available).  ► Seek medical attention in event of irritation.				
Inhalation	<ul> <li>If fumes or combustion products are inhaled remove from contaminated area.</li> <li>Lay patient down. Keep warm and rested.</li> <li>Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR necessary.</li> <li>Transport to hospital, or doctor.</li> <li>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.</li> </ul>				
Ingestion	<ul> <li>If swallowed do NOT induce vomiting.</li> <li>If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>Observe the patient carefully.</li> <li>Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>Seek medical advice.</li> <li>Avoid giving milk or oils.</li> <li>Avoid giving alcohol.</li> </ul>				

# Indication of any immediate medical attention and special treatment needed

Any material aspirated during vomiting may produce lung injury. Therefore emesis should not be induced mechanically or pharmacologically. Mechanical means should be used if it is considered necessary to evacuate the stomach contents; these include gastric lavage after endotracheal intubation. If spontaneous vomiting has occurred after ingestion, the patient should be monitored for difficult breathing, as adverse effects of aspiration into the lungs may be delayed up to 48 hours.

▶ If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

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For sub-chronic and chronic exposures to isocvanates:

- Fig. 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.

For acute or short term repeated exposures to xvlene:

#### [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.

- Figure 3. Gastro-intestinal absorption is significant with ingestions. For ingestions exceeding 1-2 ml (xylene)/kg, intubation and lavage with cuffed endotracheal tube is recommended. The use of charcoal and cathartics is equivocal.
- ▶ Pulmonary absorption is rapid with about 60-65% retained at rest.
- Primary threat to life from ingestion and/or inhalation, is respiratory failure.
- Patients should be quickly evaluated for signs of respiratory distress (e.g. cyanosis, tachypnoea, intercostal retraction, obtundation) and given oxygen. Patients with inadequate tidal volumes or poor arterial blood gases (pQ2 < 50 mm Hg or pCQ2 > 50 mm Hg) should be intubated.
- Arrhythmias complicate some hydrocarbon ingestion and/or inhalation and electrocardiographic evidence of myocardial injury has been reported; intravenous lines and cardiac monitors should be established in obviously symptomatic patients. The lungs excrete inhaled solvents, so that hyperventilation improves clearance.
- A chest x-ray should be taken immediately after stabilisation of breathing and circulation to document aspiration and detect the presence of pneumothorax.
- Figure (adrenalin) is not recommended for treatment of bronchospasm because of potential myocardial sensitisation to catecholamines. Inhaled cardioselective bronchodilators (e.g. Alupent, Salbutamol) are the preferred agents, with aminophylline a second choice

**BIOLOGICAL EXPOSURE INDEX - BEI** 

These represent the determinants observed in specimens collected from a healthy worker exposed at the Exposure Standard (ES or TLV):

Determinant Sampling Time Comments Index Methylhippu-ric acids in urine 1.5 gm/gm creatinine End of shift Last 4 hrs of shift 2 mg/min

# **SECTION 5 FIREFIGHTING MEASURES**

#### **Extinguishing media**

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

**HAZCHEM** 

Not Applicable

	<ul> <li>Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result</li> </ul>
for firefighters	
Fire Fighting	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear breathing apparatus plus protective gloves.</li> <li>Prevent, by any means available, spillage from entering drains or water courses.</li> <li>Use water delivered as a fine spray to control fire and cool adjacent area.</li> <li>DO NOT approach containers suspected to be hot.</li> <li>Cool fire exposed containers with water spray from a protected location.</li> <li>If safe to do so, remove containers from path of fire.</li> <li>Equipment should be thoroughly decontaminated after use.</li> </ul>
ire/Explosion Hazard	Combustible. 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 toxic fumes of carbon monoxide (CO). May emit acrid smoke. Mists containing combustible materials may be explosive. Combustion products include: , carbon dioxide (CO2) , isocyanates , and minor amounts of , hydrogen cyanide
	nitrogen oxides (NOx)

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#### **SECTION 6 ACCIDENTAL RELEASE MEASURES**

#### Personal precautions, protective equipment and emergency procedures

#### **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

For isocyanate spills of less than 40 litres (2 m2):

- Feacuate area from everybody not dealing with the emergency, keep them upwind and prevent further access, remove ignition sources and, if inside building, ventilate area as well as possible.
- Notify supervision and others as necessary.
- Put on personal protective equipment (suitable respiratory protection, face and eye protection, protective suit, gloves and impermeable boots).
- Control source of leakage (where applicable).
- Dike the spill to prevent spreading and to contain additions of decontaminating solution.
- Prevent the material from entering drains.
- Estimate spill pool volume or area.
- 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
- Place loosely covered drum (release of carbon dioxide) outside for at least 72 hours. Label waste-containing drum appropriately. Remove waste materials for
- Decontaminate and remove personal protective equipment.
- Return to normal operation
- Conduct accident investigation and consider measures to prevent reoccurrence.

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: **Major Spills**

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

Formulation B liquid surfactant

water to

concentrated ammonia 3-8% 100% water to Formulation C ethanol, isopropanol or butanol 50% concentrated ammonia 5%

100% After application of any of these formulae, let stand for 24 hours.

0.2-2%

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.

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.

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▶ 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

- Containers, even those that have been emptied, may contain explosive vapours.
  - Do NOT cut, drill, grind, weld or perform similar operations on or near containers.
  - 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. Safe handling
  - 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.

- ▶ 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,
- ▶ 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.
- 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 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.

#### Storage incompatibility

- Open all containers with care.
- Avoid reaction with oxidising agents
- ► Avoid strong acids, bases.

# **SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION**

#### **Control parameters**

# OCCUPATIONAL EXPOSURE LIMITS (OEL)

# INGREDIENT DATA

INCREDIENT DATA						
Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	naphtha petroleum, heavy, hydrotreated	Oil mist, refined mineral	5 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	xylene	Xylene (o-, m-, p- isomers)	350 mg/m3 / 80 ppm	655 mg/m3 / 150 ppm	Not Available	Not Available
Australia Exposure Standards	4,4'-diphenylmethane diisocyanate (MDI)	Isocyanates, all (as-NCO)	0.02 mg/m3	0.07 mg/m3	Not Available	Sen

# **EMERGENCY LIMITS**

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
naphtha petroleum, heavy, hydrotreated	Naphtha, hydrotreated heavy; (Isopar L-rev 2)	350 mg/m3	1,800 mg/m3	40,000 mg/m3
xylene	Xylenes	Not Available	Not Available	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	Methylene diphenyl diisocyanate; (Diphenylmethane diisocyanate; MDI)	0.45 mg/m3	Not Available	Not Available

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4,4'-diphenylmethane diisocyanate (MDI)	Methylenebis(isocyanato-benzene), 1,1'-; (Diphenyl methane diisocyanate)		29 mg/m3	40 mg/m3	240 mg/m3
Ingredient	Original IDLH Revised		Revised IDLH		
naphtha petroleum, heavy, hydrotreated	Not Available	Not Available			
xylene	1,000 ppm	900 ppm			
4,4'-diphenylmethane diisocyanate (MDI)	100 mg/m3	75 mg/m3			

#### MATERIAL DATA

NOTE M: The classification as a carcinogen need not apply if it can be shown that the substance contains less than 0.005% w/w benzo[a]pyrene (EINECS No 200-028-5). This note applies only to certain complex oil-derived substances in Annex IV.

European Union (EU) List of harmonised classification and labelling hazardous substances, Table 3.1, Annex VI, Regulation (EC) No 1272/2008 (CLP) - up to

NOTE P: The classification as a carcinogen need not apply if it can be shown that the substance contains less than 0.01% w/w benzene (EINECS No 200-753-7). Note E shall also apply when the substance is classified as a carcinogen. This note applies only to certain complex oil-derived substances in Annex VI.

European Union (EU) List of harmonised classification and labelling hazardous substances, Table 3.1, Annex VI, Regulation (EC) No 1272/2008 (CLP) - up to the latest ATP

#### **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.

Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection.

An approved self contained breathing apparatus (SCBA) may be required in some situations.

Provide adequate ventilation in warehouse or closed storage area. 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 installed or used.

# Personal protection











- Safety glasses with side shields
- Chemical goggles.

# Eye and face protection

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 chemical protective gloves, e.g. PVC.

# Hands/feet protection

Wear safety footwear or safety gumboots, e.g. Rubber

#### 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.

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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 moisturizer 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

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.

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

	1000/11/10/1000
Body protection	See Other protection below
Other protection	<ul> <li>Overalls.</li> <li>P.V.C. apron.</li> <li>Barrier cream.</li> <li>Skin cleansing cream.</li> <li>Eye wash unit.</li> </ul>
Thermal hazards	Not Available

#### Recommended material(s)

# GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the computergenerated selection:

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Material	СРІ
##4,4-diphenylmethane diisocyanate	(MDI)
BUTYL	С
BUTYL/NEOPRENE	С
HYPALON	С
NAT+NEOPR+NITRILE	С
NATURAL+NEOPRENE	С
NEOPRENE	С
NEOPRENE/NATURAL	С
NITRILE	С
NITRILE+PVC	С
PE/EVAL/PE	С
PVA	С
PVC	С
PVDC/PE/PVDC	С
TEFLON	С
VITON	С

\* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

C: Poor to Dangerous Choice for other than short term immersion

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

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

#### Respiratory protection

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

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

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

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A-AUS / Class 1	-	A-PAPR-AUS / Class 1
up to 50 x ES	Air-line*	-	-
up to 100 x ES	-	A-3	-
100+ x ES	-	Air-line**	-

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

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

- In certain circumstances, personal protection of the individual employee is necessary. Personal protective devices should be regarded as being supplementary to substitution and engineering control and should not be used in preference to them as they do nothing to eliminate the hazard.
- However, in some situations, minimising exposure to isocyanates by enclosure and ventilation is not possible, and occupational exposure standards may be exceeded, particularly during on-site mixing of paints, spray-painting, foaming and maintenance of machine and ventilation systems. In these situations, air-line respirators or self-contained breathing apparatus complying with the appropriate nationals standard must be used.
- Organic vapour respirators with particulate pre- filters and powered, air-purifying respirators are NOT suitable.
- ▶ Personal protective equipment must be appropriately selected, individually fitted and workers trained in their correct use and maintenance. Personal protective equipment must be regularly checked and maintained to ensure that the worker is being protected.

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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	Grey or white liquid with a characteristic of	odour.	
Physical state	Liquid	Relative density (Water = 1)	1.3-1.5
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Available	Decomposition temperature	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)	>61	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Combustible.	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)	Not Available	Gas group	Not Available
Solubility in water (g/L)	Not Available	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	<ul> <li>Unstable in the presence of incompatible materials.</li> <li>Product is considered stable.</li> <li>Hazardous polymerisation will not occur.</li> </ul>
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

Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.

Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual.

Central nervous system (CNS) depression may include nonspecific discomfort, symptoms of giddiness, headache, dizziness, nausea, anaesthetic effects, slowed reaction time, slurred speech and may progress to unconsciousness. Serious poisonings may result in respiratory depression and may be fatal. Some aliphatic hydrocarbons produce axonal neuropathies. Isoparaffinic hydrocarbons produce injury to the kidneys of male rats. When albino rats were exposed to isoparaffins at 21.4 mg/l for 4 hours, all animals experienced weakness, tremors, salivation, mild to moderate convulsions, chromodacryorrhoea and ataxia within the first 24 hours. Symptoms disappeared after 24 hours.

Inhaled

Several studies have evaluated sensory irritation in laboratory animals or odor or sensory response in humans. When evaluated by a standard procedure to assess upper airway irritation, isoparaffins did not produce sensory irritation in mice exposed to up to 400 ppm isoparaffin in air. Human volunteers were exposed for six hours to 100 ppm isoparaffin. The subjects were given a self-administered questionnaire to evaluate symptoms, which included dryness of the mucous membranes, loss of appetite, nausea, vomiting, diarrhea, fatigue, headache, dizziness, feeling of inebriation, visual disturbances, tremor, muscular weakness, impairment of coordination or paresthesia. No symptoms associated with solvent exposure were observed. With a human expert panel, odour from liquid imaging copier emissions became weakly discernible at approximately 50 ppm.

Numerous long-term exposures have been conducted in animals with only one major finding observed. Renal tubular damage has been found in kidneys of male rats upon repeated exposures to isoparaffins. It does not occur in mice or in female rats. This male rat nephropathy has been observed with a number of hydrocarbons, including wholly vaporized unleaded gasoline. The phenomenon has been attributed to reversible binding of hydrocarbon to alpha2-globulin. Since humans do not synthesize alpha2-globulin or a similar protein, the finding is not considered to be of biological significance to man. No clinically significant renal abnormalities have been found in refinery workers exposed to hydrocarbons.

When evaluated for developmental toxicity in rats, isoparaffins were neither embryotoxic nor teratogenic. Isoparaffins were consistently negative on standard bacterial genotoxicity assays. They were also non-genotoxic in *in vivo* mammalian testing for somatic or germ cell mutations (mouse micronucleus test and rat dominant lethal assay, respectively).

Mullin et al: Jnl Applied Toxicology 10, pp 136-142, 2006

Acute effects from inhalation of high vapour concentrations may be chest and nasal irritation with coughing, sneezing, headache and even nausea.

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Swallowing of the liquid may cause aspiration of vomit into the lungs with the risk of haemorrhaging, pulmonary oedema, progressing to chemical pneumonitis; serious consequences may result.

Signs and symptoms of chemical (aspiration) pneumonitis may include coughing, gasping, choking, burning of the mouth, difficult breathing, and bluish coloured skin (cyanosis).

Accidental ingestion of the material may be damaging to the health of the individual.

Many aliphatic hydrocarbons create a burning sensation because they are irritating to the GI mucosa. Vomiting has been reported in up to one third of all hydrocarbon exposures. While most aliphatic hydrocarbons have little GI absorption, aspiration frequently occurs, either initially or in a semi-delayed fashion as the patient coughs or vomits, thereby resulting in pulmonary effects. Once aspirated, the hydrocarbons can create a severe pneumonitis.

Rats given isoparaffinic hydrocarbons (after 18-24 hours fasting) showed lethargy and/or general weakness, ataxia and diarrhoea. Symptoms disappeared within 24-28 hours.

# Skin Contact

Dermally, isoparaffins have produced slight to moderate irritation in animals and humans under occluded patch conditions where evaporation cannot freely occur. However, they are not irritating in non-occluded tests, which are a more realistic simulation of human exposure. They have not been found to be sensitisers in guinea pig or human patch testing. However, occasional rare idiosyncratic sensitisation reactions in humans have been reported.

Open cuts, abraded or irritated skin should not be exposed to this material

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.

The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

Eye

Instillation of isoparaffins into rabbit eyes produces only slight irritation.

The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

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.

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.

Chronic

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.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems. There is some evidence that human exposure to the material may result in developmental toxicity. This evidence is based on animal studies where effects have been observed in the absence of marked maternal toxicity, or at around the same dose levels as other toxic effects but which are not secondary non-specific consequences of the other toxic effects.

Repeated application of mildly hydrotreated oils (principally paraffinic), to mouse skin, induced skin tumours; no tumours were induced with severely hydrotreated oils.

Steam-cracked residues produced an increased incidence of skin tumours after repeated applications to the skin of mice.

Exposure to the material for prolonged periods may cause physical defects in the developing embryo (teratogenesis).

	TOXICITY	IRRITATION
Duroseal 25 LM	Not Available	Not Available
	TOXICITY	IRRITATION
naphtha petroleum, heavy, hydrotreated	Dermal (rabbit) LD50: >1900 mg/kg <sup>[1]</sup>	Not Available
,	Oral (rat) LD50: >4500 mg/kg <sup>[1]</sup>	
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >1700 mg/kg <sup>[2]</sup>	Eye (human): 200 ppm irritant
xylene	Inhalation (rat) LC50: 5000 ppm/4hr <sup>[2]</sup>	Eye (rabbit): 5 mg/24h SEVERE
	Oral (rat) LD50: 4300 mg/kg <sup>[2]</sup>	Eye (rabbit): 87 mg mild
		Skin (rabbit):500 mg/24h moderate
	TOXICITY	IRRITATION
4,4'-diphenylmethane	Dermal (rabbit) LD50: >6200 mg/kg <sup>[2]</sup>	Dermal Sensitiser *
diisocyanate (MDI)	Inhalation (rat) LC50: 0.49 mg/l/4hr <sup>[1]</sup>	Skin (rabbit): 500 mg /24 hours
	Oral (rat) LD50: >2000 mg/kg <sup>[1]</sup>	
l amandi	5 5000 5 1000	As the topicity 2 * Value abtained from manufactured CDC. Unless althorous anesified data

Legend:

1. Value obtained from Europe ECHA Registered Substances - Acute toxicity 2.\* Value obtained from manufacturer's SDS. Unless otherwise specified data extracted from RTECS - Register of Toxic Effect of chemical Substances

#### for petroleum:

This product contains benzene which is known to cause acute myeloid leukaemia and n-hexane which has been shown to metabolize to compounds which are neuropathic.

This product contains toluene. There are indications from animal studies that prolonged exposure to high concentrations of toluene may lead to hearing loss. This product contains ethyl benzene and naphthalene from which there is evidence of tumours in rodents

Carcinogenicity: Inhalation exposure to mice causes liver tumours, which are not considered relevant to humans. Inhalation exposure to rats causes kidney tumours which are not considered relevant to humans.

# NAPHTHA PETROLEUM, HEAVY, HYDROTREATED

**Mutagenicity:** There is a large database of mutagenicity studies on gasoline and gasoline blending streams, which use a wide variety of endpoints and give predominantly negative results. All in vivo studies in animals and recent studies in exposed humans (e.g. petrol service station attendants) have shown negative results in mutagenicity assays.

Reproductive Toxicity: Repeated exposure of pregnant rats to high concentrations of toluene (around or exceeding 1000 ppm) can cause developmental effects, such as lower birth weight and developmental neurotoxicity, on the foetus. However, in a two-generation reproductive study in rats exposed to gasoline vapour condensate, no adverse effects on the foetus were observed.

Human Effects: Prolonged/ repeated contact may cause defatting of the skin which can lead to dermatitis and may make the skin more susceptible to irritation and penetration by other materials.

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Lifetime exposure of rodents to gasoline produces carcinogenicity although the relevance to humans has been questioned. Gasoline induces kidney cancer in male rats as a consequence of accumulation of the alpha2-microglobulin protein in hyaline droplets in the male (but not female) rat kidney. Such abnormal accumulation represents lysosomal overload and leads to chronic renal tubular cell degeneration, accumulation of cell debris, mineralisation of renal medullary tubules and necrosis. A sustained regenerative proliferation occurs in epithelial cells with subsequent neoplastic transformation with continued exposure. The alpha2-microglobulin is produced under the influence of hormonal controls in male rats but not in females and, more importantly, not in humans.

#### XYLENE

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

The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

Reproductive effector in rats

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

Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.

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

Allergic reactions 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 exposure period and the genetically determined disposition of the exposure 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. Immunolo

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.

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

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 appears 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 objected at levels that repose from 0.002 mg/l. to 0.003 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.

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.

# 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)

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	Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate			
XYLENE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	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.			
Acute Toxicity	Carcinoge	nicity	<b>~</b>	
Skin Irritation/Corrosion		tivity	0	
Serious Eye Damage/Irritation	STOT - Single Expo	sure	0	
Respiratory or Skin sensitisation	STOT - Repeated Expo	sure	0	
Mutagenicity	○ Aspiration Ha	zard	0	
	Legend		- Data available but does not fill the criteria for classification	

Data available to make classification
 Data Not Available to make classification

### **SECTION 12 ECOLOGICAL INFORMATION**

#### Toxicity

Ingredient	Endpoint	Test Duration (hr)	Species	Value	Source
xylene	LC50	96	Fish	2.6mg/L	2
xylene	EC50	48	Crustacea	>3.4mg/L	2
xylene	EC50	72	Algae or other aquatic plants	4.6mg/L	2
xylene	EC50	24	Crustacea	0.711mg/L	4
xylene	NOEC	73	Algae or other aquatic plants	0.44mg/L	2
4,4'-diphenylmethane diisocyanate (MDI)	LC50	96	Fish	>0.500mg/L	6
Legend:	(QSAR) - Aquatic Toxic	Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data			

Within an aromatic series, acute toxicity increases with increasing alkyl substitution on the aromatic nucleus. For example, there is an increase in toxicity as alkylation of the naphthalene structure increases. The order of most toxic to least in a study using grass shrimp (Palaemonetes pugio) and brown shrimp (Penaeus aztecus) was dimethylnaphthalenes > methylnaphthalenes > naphthalenes

Studies conclude that the toxicity of an oil appears to be a function of its di-aromatic and tri-aromatic hydrocarbons, which includes three-ring hydrocarbons such as phenanthrene.

The heavier (4-, 5-, and 6-ring) PAHs are more persistent than the lighter (2- and 3-ring) PAHs and tend to have greater carcinogenic and other chronic impact potential. PAHs in general are more frequently associated with chronic risks. These risks include cancer and often are the result of exposures to complex mixtures of chronic-risk aromatics (such as PAHs, alkyl PAHs, benzenes, and alkyl benzenes), rather than exposures to low levels of a single compound.

Anthreene is a phototoxic PAH. UV light greatly increases the toxicity of anthracene to bluegill sunfish. Benchmarks developed in the absence of UV light may be under-protective, and biological resources in strong sunlight are at more risk than those that are not.

For xylenes : log Koc : 2.05-3.08 Koc : 25.4-204 Half-life (hr) air : 0.24-42

Half-life (hr) H2O surface water : 24-672 Half-life (hr) H2O ground : 336-8640 Half-life (hr) soil : 52-672 Henry's Pa m3 /moi: 637-879 Henry's atm m3 /moi: 7.68E-03 BOD 5 if unstated: 1.4,1%

COD: 2.56,13% ThOD: 3.125 BCF: 23 log BCF: 1.17-2.41 Environmental Fate

Terrestrial fate:: Measured Koc values of 166 and 182, indicate that 3-xylene is expected to have moderate mobility in soil. Volatilisation of p-xylene is expected to be important from moist soil surfaces given a measured Henry's Law constant of 7.18x10-3 atm-cu m/mole. The potential for volatilisation of 3-xylene from dry soil surfaces may exist based on a measured vapor pressure of 8.29 mm Hg. p-Xylene may be degraded during its passage through soil). The extent of the degradation is expected to depend on its concentration, residence time in the soil, the nature of the soil, and whether resident microbial populations have been acclimated. p-Xylene, present in soil samples contaminated with jet fuel, was completely degraded aerobically within 5 days. In aquifer studies under anaerobic conditions, p-xylene was degraded, usually within several weeks, with the production of 3-methylbenzylfumaric acid, 3-methylbenzylsuccinic acid, 3-methylbenzoate, and 3-methylbenzaldehyde as metabolites.

Aquatic fate: Koc values indicate that p-xylene may adsorb to suspended solids and sediment in water. p-Xylene is expected to volatilise from water surfaces based on the measured Henry's Law constant. Estimated volatilisation half-lives for a model river and model lake are 3 hours and 4 days, respectively. BCF values of 14.8, 23.4, and 6, measured in goldfish, eels, and clams, respectively, indicate that bioconcentration in aquatic organisms is low. p-Xylene in water with added humic substances was 50% degraded following 3 hours irradiation suggesting that indirect photooxidation in the presence of humic acids may play an important role in the abiotic degradation of p-xylene. Although p-xylene is biodegradable and has been observed to degrade in pond water, there are insufficient data to assess the rate of this process in surface waters. p-Xylene has been observed to degrade in anaerobic and aerobic groundwater in several studies; however, it is known to persist for many years in groundwater, at least at sites where the concentration might have been quite high.

#### Atmospheric fate:

Most xylenes released to the environment will occur in the atmosphere and volatilisation is the dominant environmental fate process. In the ambient atmosphere, xylenes are expected to exist solely in the vapour phase. Xylenes are degraded in the atmosphere primarily by reaction with photochemically-produced hydroxyl radicals, with an estimated atmospheric lifetime of about 0.5 to 2 days. Xylenes' susceptibility to photochemical oxidation in the troposphere is to the extent that they may contribute to photochemical smog formation.

According to a model of gas/particle partitioning of semivolatile organic compounds in the atmosphere and from its vapour pressure, p-xylene, is expected to exist solely as a vapour in the ambient atmosphere. Vapour-phase p-xylene is degraded in the atmosphere by reaction with photochemically-produced hydroxyl radicals; the half-life for this reaction in air is estimated to be about 16 hours. A half-life of 1.0 hr in summer and 10 hr in winter was measured for the reaction of p-xylene with photochemically-produced hydroxyl radicals. p-Xylene has a moderately high photochemical reactivity under smog conditions, higher than the other xylene isomers, with loss rates varying from 9-42% per hr. The photooxidation of p-xylene results in the production of carbon monoxide, formaldehyde, glyoxal, methylghoxal, 3-methylghenzylnitrate, m-tolualdehyde, 4-nitro-3-xylene, 5-nitro-3-xylene, 2,6-dimethylphenol, 6-nitro-2,4-dimethylphenol, 2,6-dimethylphenol.

#### Ecotoxicity:

for xylenes

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**Duroseal 25 LM** 

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Fish LC50 (96 h) Pimephales promelas 13.4 mg/l: Oncorhyncus mykiss 8.05 mg/l: Lepomis macrochirus 16.1 mg/l (all flow through values); Pimephales promelas 26.7 (static)

Daphnia EC50 948 h): 3.83 mg/l

Photobacterium phosphoreum EC50 (24 h): 0.0084 mg/l

Gammarus lacustris LC50 (48 h): 0.6 mg/l

DO NOT discharge into sewer or waterways.

#### Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
xylene	HIGH (Half-life = 360 days)	LOW (Half-life = 1.83 days)
4,4'-diphenylmethane diisocyanate (MDI)	LOW (Half-life = 1 days)	LOW (Half-life = 0.24 days)

#### Bioaccumulative potential

Ingredient	Bioaccumulation
xylene	MEDIUM (BCF = 740)
4,4'-diphenylmethane diisocyanate (MDI)	LOW (BCF = 15)

#### Mobility in soil

Ingredient	Mobility
4,4'-diphenylmethane diisocyanate (MDI)	LOW (KOC = 376200)

# **SECTION 13 DISPOSAL CONSIDERATIONS**

#### Waste treatment methods

Product / Packaging

disposal

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

# Otherwise:

- Fig. ontainer 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:

- ► 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 dra
- ▶ It may be necessary to collect all wash water for treatment before disposal.
- ▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- ▶ Where in doubt contact the responsible authority.
- DO NOT recycle spilled mat
- 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

COMBUSTIBLE LIQUID	COMBUSTIBLE LIQUID, regulated for storage purposes only
Marine Pollutant	NO
HAZCHEM	Not Applicable

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

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

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

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

Not Applicable

# **SECTION 15 REGULATORY INFORMATION**

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

#### NAPHTHA PETROLEUM, HEAVY, HYDROTREATED(64742-48-9.) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards Australia Inventory of Chemical Substances (AICS)

Australia Hazardous Substances Information System - Consolidated Lists

#### XYLENE(1330-20-7) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards Australia Inventory of Chemical Substances (AICS)

Australia Hazardous Substances Information System - Consolidated Lists

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

Australia Exposure Standards
Australia Inventory of Chemical Substances (AICS)
Australia Hazardous Substances Information System - Consolidated Lists
Australia Work Health and Safety Regulations 2016 - Hazardous chemicals (other than lead) requiring health monitoring

National Inventory	Status
Australia - AICS	Υ
Canada - DSL	Υ
Canada - NDSL	N (xylene; 4,4'-diphenylmethane diisocyanate (MDI); naphtha petroleum, heavy, hydrotreated)
China - IECSC	Υ
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	N (naphtha petroleum, heavy, hydrotreated)
Korea - KECI	Υ
New Zealand - NZIoC	Υ
Philippines - PICCS	Υ
USA - TSCA	Υ
Legend:	Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

#### **SECTION 16 OTHER INFORMATION**

#### Other information

# Ingredients with multiple cas numbers

Name	CAS No
naphtha petroleum, heavy, hydrotreated	64742-48-9., 101795-02-2.
4,4'-diphenylmethane diisocyanate (MDI)	101-68-8, 26447-40-5

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

The SDS is a Hazard Communication tool and should be used to assist in the Risk Assessment. Many factors determine whether the reported Hazards are Risks in the workplace or other settings. Risks may be determined by reference to Exposures Scenarios. Scale of use, frequency of use and current or available engineering controls must be considered.

# **Definitions and abbreviations**

PC-TWA: Permissible Concentration-Time Weighted Average

PC-STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit。

IDLH: Immediately Dangerous to Life or Health Concentrations

OSF: Odour Safety Factor

NOAEL :No Observed Adverse Effect Level

LOAEL: Lowest Observed Adverse Effect Level

TLV: Threshold Limit Value

LOD: Limit Of Detection

OTV: Odour Threshold Value

BCF: BioConcentration Factors

BEI: Biological Exposure Index

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TEL (+61 3) 9572 4700.