

POLYTHANE 2043 TWO PACK PART B

Mirotone

Chemwatch: 5414-03

Version No: 3.1

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

Issue Date: 26/11/2020

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L.GHS.AUS.EN.RISK.E

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

Product Identifier

Product name	POLYTHANE 2043 TWO PACK PART B
Chemical Name	Not Applicable
Synonyms	5740-B; 2043B
Proper shipping name	PAINT (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base) or PAINT RELATED MATERIAL (including paint thinning or reducing compound)
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	Part B hardener for 2 component polyurethane floor coating.
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Details of the supplier of the safety data sheet

Registered company name	Mirotone
Address	21 Marigold Street Revesby NSW 2212 Australia
Telephone	+61 2 9795 3700
Fax	+61 2 9771 3601
Website	www.mirotone.com, www.polycure.com.au
Email	Not Available

Emergency telephone number

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

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

Poisons Schedule	Not Applicable
Classification ^[1]	Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2A, Acute Toxicity (Inhalation) Category 4, Specific Target Organ Toxicity - Single Exposure (Narcotic Effects) Category 3, Carcinogenicity Category 2, Hazardous to the Aquatic Environment Long-Term Hazard Category 3, Flammable Liquids Category 3 *LIMITED EVIDENCE
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

Hazard statement(s)

H315	Causes skin irritation.
H319	Causes serious eye irritation.
H332	Harmful if inhaled.
H336	May cause drowsiness or dizziness.
H351	Suspected of causing cancer.
H412	Harmful to aquatic life with long lasting effects.
H226	Flammable liquid and vapour.

*LIMITED EVIDENCE

Precautionary statement(s) General

P101	If medical advice is needed, have product container or label at hand.
P102	Keep out of reach of children.
P103	Read carefully and follow all instructions.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P210	Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P240	Ground and bond container and receiving equipment.

Precautionary statement(s) Response

P308+P313	IF exposed or concerned: Get medical advice/ attention.
P370+P378	In case of fire: Use alcohol resistant foam or normal protein foam to extinguish.
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.

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 to authorised hazardous or special waste collection point in accordance with any local regulation.
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SECTION 3 Composition / information on ingredients**Substances**

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
123-86-4	10-30	<u>n-butyl acetate</u>
64742-95-6.	10-30	<u>naphtha petroleum, light aromatic solvent</u>
1330-20-7	10-30	<u>xylene</u>
100-41-4	1-10	<u>ethylbenzene</u>
26471-62-5	<1	<u>toluene diisocyanate</u>
Not Available	balance	Ingredients determined not to be hazardous

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

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ 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	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> ▶ 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 style="list-style-type: none"> ▶ 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. <p>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.</p>
Ingestion	<ul style="list-style-type: none"> ▶ If swallowed do NOT induce vomiting. ▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. ▶ Observe the patient carefully. ▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. ▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▶ Seek medical advice. ▶ Avoid giving milk or oils. ▶ Avoid giving alcohol.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

For petroleum distillates

- In case of ingestion, gastric lavage with activated charcoal can be used promptly to prevent absorption - decontamination (induced emesis or lavage) is controversial and should be considered on the merits of each individual case; of course the usual precautions of an endotracheal tube should be considered prior to lavage, to prevent aspiration.
- Individuals intoxicated by petroleum distillates should be hospitalized immediately, with acute and continuing attention to neurologic and cardiopulmonary function.
- Positive pressure ventilation may be necessary.
- Acute central nervous system signs and symptoms may result from large ingestions of aspiration-induced hypoxia.
- After the initial episode, individuals should be followed for changes in blood variables and the delayed appearance of pulmonary oedema and chemical pneumonitis. Such patients should be followed for several days or weeks for delayed effects, including bone marrow toxicity, hepatic and renal impairment. Individuals with chronic pulmonary disease will be more seriously impaired, and recovery from inhalation exposure may be complicated.
- Gastrointestinal symptoms are usually minor and pathological changes of the liver and kidneys are reported to be uncommon in acute intoxications.
- Chlorinated and non-chlorinated hydrocarbons may sensitize the heart to epinephrine and other circulating catecholamines so that arrhythmias may occur. Careful consideration of this potential adverse effect should precede administration of epinephrine or other cardiac stimulants and the selection of bronchodilators.

BP America Product Safety & Toxicology Department

for simple esters:

BASIC TREATMENT

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

ADVANCED TREATMENT

- ▶ Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- ▶ Positive-pressure ventilation using a bag-valve mask might be of use.

- Monitor and treat, where necessary, for arrhythmias.
- Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- Drug therapy should be considered for pulmonary oedema.
- Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- Treat seizures with diazepam.
- Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

- Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- Positive end-expiratory pressure (PEEP)-assisted ventilation may be required for acute parenchymal injury or adult respiratory distress syndrome.
- Consult a toxicologist as necessary.

BRONSTEIN, A.C. and CURRANCE, P.L. *EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed.* 1994

Toluene diisocyanate is a known pulmonary sensitizer. Annual medical surveillance should be conducted including pulmonary history, examination of the heart and lungs, 14 x 17 inch (35 x 47 cm) x-ray and pulmonary function testing (FCV, FEV1).

In normal commercial preparations of toluene diisocyanate, the 2,4-isomer dominates in the ratio 4:1. However it is also hydrolysed, in air, more rapidly than the 2,6-isomer. Airway sensitivities may result from the appearance of immunoglobulins in the blood. Frequent inability to detect antibodies to TDI in clinical cases may result from the routine use of diagnostic antigens containing predominantly 2,4-TDI, whereas individuals may have been exposed to atmospheres in which 2,6-TDI was the predominant isomer. [Karol & Jin, *Frontiers of Molecular Toxicology*, pp 55-61, 1992]

For acute or short term repeated exposures to xylene:

- 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 (pO₂ < 50 mm Hg or pCO₂ > 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.
- Epinephrine (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	Index	Sampling Time	Comments
Methylhippu-ric acids in urine	1.5 gm/gm creatinine 2 mg/min	End of shift Last 4 hrs of shift	

SECTION 5 Firefighting measures

Extinguishing media

- Alcohol stable 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	▸ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
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Advice for firefighters

Fire Fighting	<ul style="list-style-type: none"> ▸ Alert Fire Brigade and tell them location and nature of hazard. ▸ May be violently or explosively reactive. ▸ Wear breathing apparatus plus protective gloves. ▸ Prevent, by any means available, spillage from entering drains or water course. ▸ If safe, switch off electrical equipment until vapour fire hazard removed.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▸ Liquid and vapour are flammable. ▸ Moderate fire hazard when exposed to heat or flame. ▸ Vapour forms an explosive mixture with air. ▸ Moderate explosion hazard when exposed to heat or flame. ▸ Vapour may travel a considerable distance to source of ignition. <p>Combustion products include:</p>

	carbon dioxide (CO ₂) isocyanates and minor amounts of hydrogen cyanide nitrogen oxides (NO _x) other pyrolysis products typical of burning organic material.
HAZCHEM	•3Y

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	<ul style="list-style-type: none"> 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 small quantities with vermiculite or other absorbent material.
Major Spills	<ul style="list-style-type: none"> Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. May be violently or explosively reactive. Wear breathing apparatus plus protective gloves. Prevent, by any means available, spillage from entering drains or water course.

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

SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	<p>The conductivity of this material may make it a static accumulator., A liquid is typically considered nonconductive if its conductivity is below 100 pS/m and is considered semi-conductive if its conductivity is below 10 000 pS/m., Whether a liquid is nonconductive or semi-conductive, the precautions are the same., A number of factors, for example liquid temperature, presence of contaminants, and anti-static additives can greatly influence the conductivity of a liquid.</p> <ul style="list-style-type: none"> 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 Electrostatic discharge may be generated during pumping - this may result in fire. Ensure electrical continuity by bonding and grounding (earthing) all equipment. Restrict line velocity during pumping in order to avoid generation of electrostatic discharge (<=1 m/sec until fill pipe submerged to twice its diameter, then <= 7 m/sec). Avoid splash filling. Do NOT use compressed air for filling discharging or handling operations. Avoid all personal contact, including inhalation. Wear protective clothing when risk of overexposure occurs. Use in a well-ventilated area. Prevent concentration in hollows and sumps. DO NOT enter confined spaces until atmosphere has been checked.
Other information	<ul style="list-style-type: none"> Store in original containers in approved flammable liquid storage area. Store away from incompatible materials in a cool, dry, well-ventilated area. DO NOT store in pits, depressions, basements or areas where vapours may be trapped. No smoking, naked lights, heat or ignition sources. Storage areas should be clearly identified, well illuminated, clear of obstruction and accessible only to trained and authorised personnel - adequate security must be provided so that unauthorised personnel do not have access.

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> Packing as supplied by manufacturer. Plastic containers may only be used if approved for flammable liquid. Check that containers are clearly labelled and free from leaks. For low viscosity materials (i) : Drums and jerry cans must be of the non-removable head type. (ii) : Where a can is to be used as an inner package, the can must have a screwed enclosure. For materials with a viscosity of at least 2680 cSt. (23 deg. C) For manufactured product having a viscosity of at least 250 cSt. (23 deg. C)
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	<ul style="list-style-type: none"> Manufactured product that requires stirring before use and having a viscosity of at least 20 cSt (25 deg. C): (i) Removable head packaging; (ii) Cans with friction closures and (iii) low pressure tubes and cartridges may be used.
Storage incompatibility	<ul style="list-style-type: none"> Avoid reaction with oxidising agents

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	n-butyl acetate	n-Butyl acetate	150 ppm / 713 mg/m ³	950 mg/m ³ / 200 ppm	Not Available	Not Available
Australia Exposure Standards	xylene	Xylene (o-, m-, p- isomers)	80 ppm / 350 mg/m ³	655 mg/m ³ / 150 ppm	Not Available	Not Available
Australia Exposure Standards	ethylbenzene	Ethyl benzene	100 ppm / 434 mg/m ³	543 mg/m ³ / 125 ppm	Not Available	Not Available
Australia Exposure Standards	toluene diisocyanate	Toluene-2,4-diisocyanate (TDI)	0.02 mg/m ³	0.07 mg/m ³	Not Available	Not Available

Emergency Limits


Ingredient	TEEL-1	TEEL-2	TEEL-3
n-butyl acetate	Not Available	Not Available	Not Available
naphtha petroleum, light aromatic solvent	1,200 mg/m ³	6,700 mg/m ³	40,000 mg/m ³
xylene	Not Available	Not Available	Not Available
ethylbenzene	Not Available	Not Available	Not Available
toluene diisocyanate	0.02 ppm	0.083 ppm	0.51 ppm
toluene diisocyanate	Not Available	Not Available	Not Available
toluene diisocyanate	Not Available	Not Available	Not Available

Ingredient	Original IDLH	Revised IDLH
n-butyl acetate	1,700 ppm	Not Available
naphtha petroleum, light aromatic solvent	Not Available	Not Available
xylene	900 ppm	Not Available
ethylbenzene	800 ppm	Not Available
toluene diisocyanate	2.5 ppm	Not Available

MATERIAL DATA

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

Appropriate engineering controls	<p>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.</p> <p>The basic types of engineering controls are:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>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.</p>
Personal protection	

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Eye and face protection	<ul style="list-style-type: none"> ▸ 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.
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▸ Wear chemical protective gloves, e.g. PVC. ▸ Wear safety footwear or safety gumboots, e.g. Rubber <p>NOTE:</p> <ul style="list-style-type: none"> ▸ 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. <p>For esters:</p> <ul style="list-style-type: none"> ▸ Do NOT use natural rubber, butyl rubber, EPDM or polystyrene-containing materials. <p>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.</p> <p>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.</p> <p>Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands.</p>
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▸ Overalls. ▸ PVC Apron. ▸ PVC protective suit may be required if exposure severe. ▸ Eyewash unit. ▸ Ensure there is ready access to a safety shower. ▸ Some plastic personal protective equipment (PPE) (e.g. gloves, aprons, overshoes) are not recommended as they may produce static electricity. ▸ For large scale or continuous use wear tight-weave non-static clothing (no metallic fasteners, cuffs or pockets). ▸ Non sparking safety or conductive footwear should be considered. Conductive footwear describes a boot or shoe with a sole made from a conductive compound chemically bound to the bottom components, for permanent control to electrically ground the foot and shall dissipate static electricity from the body to reduce the possibility of ignition of volatile compounds. Electrical resistance must range between 0 to 500,000 ohms.

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

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

computer-generated selection:

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Material	CPI
TEFLON	A
BUTYL	C
BUTYL/NEOPRENE	C
HYPALON	C
NAT+NEOPR+NITRILE	C
NATURAL RUBBER	C
NATURAL+NEOPRENE	C
NEOPRENE	C
NEOPRENE/NATURAL	C
NITRILE	C
NITRILE+PVC	C
PE	C
PE/EVAL/PE	C
PVA	C
PVC	C
PVDC/PE/PVDC	C
SARANEX-23	C
VITON	C
VITON/BUTYL	C

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	-	A-PAPR-AUS / Class 1
up to 50 x ES	-	A-AUS / Class 1	-
up to 100 x ES	-	A-2	A-PAPR-2 ^

^ - Full-face

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

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

* CPI - Chemwatch Performance Index

used

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.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Clear colourless to pale yellow flammable liquid with a solvent odour; not miscible with water. Will react slowly with water to produce carbon dioxide.		
Physical state	Liquid	Relative density (Water = 1)	0.93-1.02
Odour	Not Available	Partition coefficient n-octanol / water	1.4
Odour threshold	Not Available	Auto-ignition temperature (°C)	>420
pH (as supplied)	Not Applicable	Decomposition temperature	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	100-200
Initial boiling point and boiling range (°C)	137	Molecular weight (g/mol)	Not Applicable
Flash point (°C)	26	Taste	Not Available
Evaporation rate	0.75 BuAC = 1	Explosive properties	Not Available
Flammability	Flammable.	Oxidising properties	Not Available
Upper Explosive Limit (%)	7.2	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	1.2	Volatile Component (%vol)	60-67
Vapour pressure (kPa)	0.9	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (Not Available%)	Not Applicable
Vapour density (Air = 1)	4	VOC g/L	467-516

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> ▶ 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

Inhaled	<p>Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful.</p> <p>Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by narcosis, reduced alertness, loss of reflexes, lack of coordination and vertigo.</p>
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	<p>Limited evidence or practical experience suggests that the material may produce irritation of the respiratory system, in a significant 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.</p> <p>The main effects of simple aliphatic esters are narcosis and irritation and anaesthesia at higher concentrations. These effects become greater as the molecular weights and boiling points increase. Central nervous system depression, headache, drowsiness, dizziness, coma and neurobehavioral changes may also be symptomatic of overexposure. Respiratory tract involvement may produce mucous membrane irritation, dyspnea, and tachypnea, pharyngitis, bronchitis, pneumonitis and, in massive exposures, pulmonary oedema (which may be delayed). Gastrointestinal effects include nausea, vomiting, diarrhoea and abdominal cramps.</p> <p>Inhalation hazard is increased at higher temperatures.</p> <p>High inhaled concentrations of mixed hydrocarbons may produce narcosis characterised by nausea, vomiting and lightheadedness. Inhalation of aerosols may produce severe pulmonary oedema, pneumonitis and pulmonary haemorrhage. Inhalation of petroleum hydrocarbons consisting substantially of low molecular weight species (typically C2-C12) may produce irritation of mucous membranes, incoordination, giddiness, nausea, vertigo, confusion, headache, appetite loss, drowsiness, tremors and anaesthetic stupor. Massive exposures may produce central nervous system depression with sudden collapse and deep coma; fatalities have been recorded. Irritation of the brain and/or apnoeic anoxia may produce convulsions. 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.</p> <p>A significant number of individuals exposed to mixed trimethylbenzenes complained of nervousness, tension, anxiety and asthmatic bronchitis. Peripheral blood showed a tendency to hypochromic anaemia and a deviation from normal in coagulability of the blood. Hydrocarbon concentrations ranged from 10 to 60 ppm. Contamination of the mixture with benzene may have been responsible for the blood dyscrasias.</p> <p>High concentrations of mesitylene vapour (5000 to 9000 ppm) caused central nervous system depression in mice.</p> <p>Acute effects from inhalation of high concentrations of vapour are pulmonary irritation, including coughing, with nausea; central nervous system depression - characterised by headache and dizziness, increased reaction time, fatigue and loss of co-ordination</p> <p>Headache, fatigue, lassitude, irritability and gastrointestinal disturbances (e.g., nausea, anorexia and flatulence) are the most common symptoms of xylene overexposure. Injury to the heart, liver, kidneys and nervous system has also been noted amongst workers. Transient memory loss, renal impairment, temporary confusion and some evidence of disturbance of liver function was reported in three workers overcome by gross exposure to xylene (10000 ppm). One worker died and autopsy revealed pulmonary congestion, oedema and focal alveolar haemorrhage. Volunteers inhaling xylene at 100 ppm for 5 to 6 hours showed changes in manual coordination reaction time and slight ataxia.</p> <p>Xylene is a central nervous system depressant. 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.</p> <p>The acute toxicity of inhaled alkylbenzenes is best described by central nervous system depression. As a rule, these compounds may also act as general anaesthetics.</p> <p>Systemic poisoning produced by general anaesthesia is characterised by lightheadedness, nervousness, apprehension, euphoria, confusion, dizziness, drowsiness, tinnitus, blurred or double vision, vomiting and sensations of heat, cold or numbness, twitching, tremors, convulsions, unconsciousness and respiratory depression and arrest. Cardiac arrest may result from cardiovascular collapse. Bradycardia, and hypotension may also be produced.</p>
Ingestion	<p>Accidental ingestion of the material may be damaging to the health of the individual.</p> <p>Ingestion of petroleum hydrocarbons may produce irritation of the pharynx, oesophagus, stomach and small intestine with oedema and mucosal ulceration resulting; symptoms include a burning sensation in the mouth and throat. Large amounts may produce narcosis with nausea and vomiting, weakness or dizziness, slow and shallow respiration, swelling of the abdomen, unconsciousness and convulsions. Myocardial injury may produce arrhythmias, ventricular fibrillation and electrocardiographic changes. Central nervous system depression may also occur. Light aromatic hydrocarbons produce a warm, sharp, tingling sensation on contact with taste buds and may anaesthetise the tongue.</p>
Skin Contact	<p>The material produces moderate skin irritation; evidence exists, or practical experience predicts, that the material either</p> <ul style="list-style-type: none"> ▸ produces moderate inflammation of the skin in a substantial number of individuals following direct contact, and/or ▸ produces significant, but moderate, 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. <p>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.</p> <p>Repeated exposure may cause skin cracking, flaking or drying following normal handling and use.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Toxic effects may result from skin absorption</p> <p>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.</p>
Eye	<p>Evidence exists, or practical experience predicts, that the material may cause severe 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. Eye contact may cause significant inflammation with pain. Corneal injury may occur; permanent impairment of vision may result unless treatment is prompt and adequate. Repeated or prolonged exposure to irritants 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.</p>

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	Petroleum hydrocarbons may produce pain after direct contact with the eyes. Slight, but transient disturbances of the corneal epithelium may also result. The aromatic fraction may produce irritation and lachrymation.
Chronic	<p>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.</p> <p>Prolonged or repeated skin contact may cause drying with cracking, irritation and possible dermatitis following.</p> <p>Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.</p> <p>Repeated or prolonged exposure to mixed hydrocarbons may produce narcosis with dizziness, weakness, irritability, concentration and/or memory loss, tremor in the fingers and tongue, vertigo, olfactory disorders, constriction of visual field, paraesthesias of the extremities, weight loss and anaemia and degenerative changes in the liver and kidney. Chronic exposure by petroleum workers, to the lighter hydrocarbons, has been associated with visual disturbances, damage to the central nervous system, peripheral neuropathies (including numbness and paraesthesias), psychological and neurophysiological deficits, bone marrow toxicities (including hypoplasia possibly due to benzene) and hepatic and renal involvement. Chronic dermal exposure to petroleum hydrocarbons may result in defatting which produces localised dermatoses. Surface cracking and erosion may also increase susceptibility to infection by microorganisms. One epidemiological study of petroleum refinery workers has reported elevations in standard mortality ratios for skin cancer along with a dose-response relationship indicating an association between routine workplace exposure to petroleum or one of its constituents and skin cancer, particularly melanoma.</p> <p>Prolonged or repeated contact with xylenes may cause defatting dermatitis with drying and cracking. Chronic inhalation of xylenes has been associated with central nervous system effects, loss of appetite, nausea, ringing in the ears, irritability, thirst anaemia, mucosal bleeding, enlarged liver and hyperplasia. Exposure may produce kidney and liver damage. In chronic occupational exposure, xylene (usually mixed with other solvents) has produced irreversible damage to the central nervous system and ototoxicity (damages hearing and increases sensitivity to noise), probably due to neurotoxic mechanisms. Industrial workers exposed to xylene with a maximum level of ethyl benzene of 0.06 mg/l (14 ppm) reported headaches and irritability and tired quickly.</p> <p>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.</p>

POLYTHANE 2043 TWO PACK PART B	TOXICITY	IRRITATION
	Not Available	Not Available
n-butyl acetate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 3200 mg/kg ^[2]	Eye (human): 300 mg
	Inhalation(Rat) LC50; 0.74 mg/L4h ^[2]	Eye (rabbit): 20 mg (open)-SEVERE
	Oral (Rabbit) LD50; 3200 mg/kg ^[2]	Eye (rabbit): 20 mg/24h - moderate
		Eye: no adverse effect observed (not irritating) ^[1]
		Skin (rabbit): 500 mg/24h-moderate
naphtha petroleum, light aromatic solvent	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >1900 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
	Inhalation(Rat) LC50; >4.42 mg/L4h ^[1]	Skin: adverse effect observed (irritating) ^[1]
	Oral (Rat) LD50; >4500 mg/kg ^[1]	
xylene	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >1700 mg/kg ^[2]	Eye (human): 200 ppm irritant
	Inhalation(Rat) LC50; 5000 ppm4h ^[2]	Eye (rabbit): 5 mg/24h SEVERE
	Oral (Mouse) LD50; 2119 mg/kg ^[2]	Eye (rabbit): 87 mg mild
		Eye: adverse effect observed (irritating) ^[1]
		Skin (rabbit):500 mg/24h moderate
ethylbenzene	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 17800 mg/kg ^[2]	Eye (rabbit): 500 mg - SEVERE
	Inhalation(Rat) LC50; 17.2 mg/L4h ^[2]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (Rat) LD50; 3500 mg/kg ^[2]	Skin (rabbit): 15 mg/24h mild
		Skin: no adverse effect observed (not irritating) ^[1]

toluene diisocyanate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >9400 mg/kg ^[1]	Eye: adverse effect observed (irritating) ^[1]
	Inhalation(Mouse) LC50: 0.069 mg/L4h ^[2]	Skin: adverse effect observed (irritating) ^[1]
	Oral (Rat) LD50: >2000 mg/kg ^[1]	

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

N-BUTYL ACETATE	<p>Generally, linear and branched-chain alkyl esters are hydrolysed to their component alcohols and carboxylic acids in the intestinal tract, blood and most tissues throughout the body. Following hydrolysis the component alcohols and carboxylic acids are metabolized</p> <p>Oral acute toxicity studies have been reported for 51 of the 67 esters of aliphatic acyclic primary alcohols and aliphatic linear saturated carboxylic acids. The very low oral acute toxicity of this group of esters is demonstrated by oral LD50 values greater than 1850 mg/kg bw</p> <p>Genotoxicity studies have been performed in vitro using the following esters of aliphatic acyclic primary alcohols and aliphatic linear saturated carboxylic acids: methyl acetate, butyl acetate, butyl stearate and the structurally related isoamyl formate and demonstrates that these substances are not genotoxic.</p> <p>The JEFCA Committee concluded that the substances in this group would not present safety concerns at the current levels of intake the esters of aliphatic acyclic primary alcohols and aliphatic linear saturated carboxylic acids are generally used as flavouring substances up to average maximum levels of 200 mg/kg. Higher levels of use (up to 3000 mg/kg) are permitted in food categories such as chewing gum and hard candy. In Europe the upper use levels for these flavouring substances are generally 1 to 30 mg/kg foods and in special food categories like candy and alcoholic beverages up to 300 mg/kg foods</p> <p>International Program on Chemical Safety: the Joint FAO/WHO Expert Committee on Food Additives (JECFA)</p> <p>Esters of Aliphatic acyclic primary alcohols with aliphatic linear saturated carboxylic acids.; 1998</p>
	<p>Inhalation (rat) TClO: 1320 ppm/6h/90D-I * [Devoe]</p> <p>For Low Boiling Point Naphthas (LBPNs):</p> <p>Acute toxicity:</p> <p>LBPNs generally have low acute toxicity by the oral (median lethal dose [LD50] in rats > 2000 mg/kg-bw), inhalation (LD50 in rats > 5000 mg/m3) and dermal (LD50 in rabbits > 2000 mg/kg-bw) routes of exposure</p> <p>Most LBPNs are mild to moderate eye and skin irritants in rabbits, with the exception of heavy catalytic cracked and heavy catalytic reformed naphthas, which have higher primary skin irritation indices.</p> <p>Sensitisation:</p> <p>LBPNs do not appear to be skin sensitizers, but a poor response in the positive control was also noted in these studies</p> <p>Repeat dose toxicity:</p> <p>The lowest-observed-adverse-effect concentration (LOAEC) and lowest-observed-adverse-effect level (LOAEL) values identified following short-term (2-89 days) and subchronic (greater than 90 days) exposure to the LBPN substances. These values were determined for a variety of endpoints after considering the toxicity data for all LBPNs in the group. Most of the studies were carried out by the inhalation route of exposure. Renal effects, including increased kidney weight, renal lesions (renal tubule dilation, necrosis) and hyaline droplet formation, observed in male rats exposed orally or by inhalation to most LBPNs, were considered species- and sex-specific. These effects were determined to be due to a mechanism of action not relevant to humans -specifically, the interaction between hydrocarbon metabolites and alpha-2-microglobulin, an enzyme not produced in substantial amounts in female rats, mice and other species, including humans. The resulting nephrotoxicity and subsequent carcinogenesis in male rats were therefore not considered in deriving LOAEC/LOAEL values.</p> <p>Only a limited number of studies of short-term and subchronic duration were identified for site-restricted LBPNs.</p> <p>Studies indicate that normal, branched and cyclic paraffins are absorbed from the mammalian gastrointestinal tract and that the absorption of n-paraffins is inversely proportional to the carbon chain length, with little absorption above C30. With respect to the carbon chain lengths likely to be present in mineral oil, n-paraffins may be absorbed to a greater extent than iso- or cyclo-paraffins.</p> <p>The major classes of hydrocarbons have been shown to be well absorbed by the gastrointestinal tract in various species. In many cases, the hydrophobic hydrocarbons are ingested in association with dietary lipids. The dependence of hydrocarbon absorption on concomitant triglyceride digestion and absorption, is known as the "hydrocarbon continuum hypothesis", and asserts that a series of solubilising phases in the intestinal lumen, created by dietary triglycerides and their digestion products, afford hydrocarbons a route to the lipid phase of the intestinal absorptive cell (enterocyte) membrane. While some hydrocarbons may traverse the mucosal epithelium unmetabolised and appear as solutes in lipoprotein particles in intestinal lymph, there is evidence that most hydrocarbons partially separate from nutrient lipids and undergo metabolic transformation in the enterocyte.</p> <p>For trimethylbenzenes:</p> <p>Absorption of 1,2,4-trimethylbenzene occurs after oral, inhalation, or dermal exposure. Occupationally, inhalation and dermal exposures are the most important routes of absorption although systemic intoxication from dermal absorption is not likely to occur due to the dermal irritation caused by the chemical prompting quick removal. Following oral administration of the chemical to rats, 62.6% of the dose was recovered as urinary metabolites indicating substantial absorption. 1,2,4-Trimethylbenzene is lipophilic and may accumulate in fat and fatty tissues. In the blood stream, approximately 85% of the chemical is bound to red blood cells. Metabolism occurs by side-chain oxidation to form alcohols and carboxylic acids which are then conjugated with glucuronic acid, glycine, or sulfates for urinary excretion.</p> <p>For C9 aromatics (typically trimethylbenzenes - TMBs)</p> <p>Acute Toxicity</p> <p>Acute toxicity studies (oral, dermal and inhalation routes of exposure) have been conducted in rats using various solvent products containing predominantly mixed C9 aromatic hydrocarbons (CAS RN 64742-95-6). Inhalation LC50 s range from 6,000 to 10,000 mg/m³ for C9 aromatic naphtha and 18,000 to 24,000 mg/m³ for 1,2,4 and 1,3,5-TMB, respectively. A rat oral LD50 reported for 1,2,4-TMB is 5 grams/kg bw and a rat dermal LD50 for the C9 aromatic naphtha is >4 ml/kg bw. These data indicate</p>

**NAPHTHA PETROLEUM,
LIGHT AROMATIC
SOLVENT**

	<p>that C9 aromatic solvents show that LD50/LC50 values are greater than limit doses for acute toxicity studies established under OECD test guidelines.</p> <p>Irritation and Sensitization</p> <p>Several irritation studies, including skin, eye, and lung/respiratory system, have been conducted on members of the category. The results indicate that C9 aromatic hydrocarbon solvents are mildly to moderately irritating to the skin, minimally irritating to the eye, and have the potential to irritate the respiratory tract and cause depression of respiratory rates in mice.</p> <p>for petroleum:</p> <p>Altered mental state, drowsiness, peripheral motor neuropathy, irreversible brain damage (so-called Petrol Sniffer's Encephalopathy), delirium, seizures, and sudden death have been reported from repeated overexposure to some hydrocarbon solvents, naphthas, and gasoline</p> <p>This product may contain benzene which is known to cause acute myeloid leukaemia and n-hexane which has been shown to metabolize to compounds which are neuropathic.</p> <p>This product contains toluene. There are indications from animal studies that prolonged exposure to high concentrations of toluene may lead to hearing loss.</p> <p>This product contains ethyl benzene and naphthalene from which there is evidence of tumours in rodents</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>Lifetime exposure of rodents to gasoline produces carcinogenicity although the relevance to humans has been questioned.</p>
XYLENE	<p>Reproductive effector in rats</p> <p>The substance is classified by IARC as Group 3:</p> <p>NOT classifiable as to its carcinogenicity to humans.</p> <p>Evidence of carcinogenicity may be inadequate or limited in animal testing.</p>
ETHYLBENZENE	<p>Liver changes, uterine tract, effects on fertility, foetotoxicity, specific developmental abnormalities (musculoskeletal system) recorded.</p> <p>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.</p> <p>Ethylbenzene is readily absorbed following inhalation, oral, and dermal exposures, distributed throughout the body, and excreted primarily through urine. There are two different metabolic pathways for ethylbenzene with the primary pathway being the alpha-oxidation of ethylbenzene to 1-phenylethanol, mostly as the R-enantiomer. The pattern of urinary metabolite excretion varies with different mammalian species. In humans, ethylbenzene is excreted in the urine as mandelic acid and phenylglyoxylic acids; whereas rats and rabbits excrete hippuric acid and phenacetic acid as the main metabolites. Ethylbenzene can induce liver enzymes and hence its own metabolism as well as the metabolism of other substances.</p> <p>NOTE: Substance has been shown to be mutagenic in at least one assay, or belongs to a family of chemicals producing damage or change to cellular DNA.</p> <p>WARNING: This substance has been classified by the IARC as Group 2B: Possibly Carcinogenic to Humans.</p>
TOLUENE DIISOCYANATE	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>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.</p> <p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergic 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.</p> <p>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.</p> <p>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.</p>

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	<p>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.</p> <p>The material may produce severe 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) thickening of the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.</p> <p>for diisocyanates:</p> <p>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.</p>
N-BUTYL ACETATE & XYLENE & ETHYLBENZENE & TOLUENE DIISOCYANATE	The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.
N-BUTYL ACETATE & XYLENE	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.

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: ✗ – Data either not available or does not fill the criteria for classification
 ✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

POLYTHANE 2043 TWO PACK PART B	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
n-butyl acetate	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50(ECx)	96h	Fish	18mg/l	2
	LC50	96h	Fish	18mg/l	2
	EC50	72h	Algae or other aquatic plants	246mg/l	2
	EC50	48h	Crustacea	32mg/l	1
naphtha petroleum, light aromatic solvent	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	72h	Algae or other aquatic plants	1mg/l	1
	EC50	72h	Algae or other aquatic plants	19mg/l	1
	EC50	48h	Crustacea	6.14mg/l	1
	EC50	96h	Algae or other aquatic plants	64mg/l	2
xylene	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	73h	Algae or other aquatic plants	0.44mg/l	2
	LC50	96h	Fish	2.6mg/l	2
	EC50	72h	Algae or other aquatic plants	4.6mg/l	2
	EC50	48h	Crustacea	1.8mg/l	2

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ethylbenzene	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	720h	Fish	0.381mg/L	4
	LC50	96h	Fish	3.381-4.075mg/L	4
	EC50	72h	Algae or other aquatic plants	4.6mg/l	1
	EC50	48h	Crustacea	1.37-4.4mg/l	4
	EC50	96h	Algae or other aquatic plants	3.6mg/l	2
toluene diisocyanate	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	96h	Algae or other aquatic plants	3230mg/l	1
	LC50	96h	Fish	~0.4mg/l	2
	EC50	48h	Crustacea	12.5mg/l	1
	NOEC(ECx)	504h	Crustacea	>=0.5mg/l	1
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					

Harmful to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
n-butyl acetate	LOW	LOW
xylene	HIGH (Half-life = 360 days)	LOW (Half-life = 1.83 days)
ethylbenzene	HIGH (Half-life = 228 days)	LOW (Half-life = 3.57 days)
toluene diisocyanate	LOW (Half-life = 1 days)	LOW (Half-life = 0.13 days)

Bioaccumulative potential

Ingredient	Bioaccumulation
n-butyl acetate	LOW (BCF = 14)
xylene	MEDIUM (BCF = 740)
ethylbenzene	LOW (BCF = 79.43)
toluene diisocyanate	LOW (BCF = 5)

Mobility in soil

Ingredient	Mobility
n-butyl acetate	LOW (KOC = 20.86)
ethylbenzene	LOW (KOC = 517.8)
toluene diisocyanate	LOW (KOC = 9114)

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ 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. ▶ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified. ▶ Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or Incineration in a licensed apparatus (after admixture with suitable combustible material). ▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.
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SECTION 14 Transport information

Labels Required

	
Marine Pollutant	NO
HAZCHEM	•3Y

Land transport (ADG)

UN number	1263				
UN proper shipping name	PAINT (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base) or PAINT RELATED MATERIAL (including paint thinning or reducing compound)				
Transport hazard class(es)	<table> <tr> <td>Class</td><td>3</td></tr> <tr> <td>Subrisk</td><td>Not Applicable</td></tr> </table>	Class	3	Subrisk	Not Applicable
Class	3				
Subrisk	Not Applicable				
Packing group	III				
Environmental hazard	Not Applicable				
Special precautions for user	<table> <tr> <td>Special provisions</td><td>163 223 367</td></tr> <tr> <td>Limited quantity</td><td>5 L</td></tr> </table>	Special provisions	163 223 367	Limited quantity	5 L
Special provisions	163 223 367				
Limited quantity	5 L				

Air transport (ICAO-IATA / DGR)

UN number	1263														
UN proper shipping name	Paint (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base)														
Transport hazard class(es)	<table> <tr> <td>ICAO/IATA Class</td><td>3</td></tr> <tr> <td>ICAO / IATA Subrisk</td><td>Not Applicable</td></tr> <tr> <td>ERG Code</td><td>3L</td></tr> </table>	ICAO/IATA Class	3	ICAO / IATA Subrisk	Not Applicable	ERG Code	3L								
ICAO/IATA Class	3														
ICAO / IATA Subrisk	Not Applicable														
ERG Code	3L														
Packing group	III														
Environmental hazard	Not Applicable														
Special precautions for user	<table> <tr> <td>Special provisions</td><td>A3 A72 A192</td></tr> <tr> <td>Cargo Only Packing Instructions</td><td>366</td></tr> <tr> <td>Cargo Only Maximum Qty / Pack</td><td>220 L</td></tr> <tr> <td>Passenger and Cargo Packing Instructions</td><td>355</td></tr> <tr> <td>Passenger and Cargo Maximum Qty / Pack</td><td>60 L</td></tr> <tr> <td>Passenger and Cargo Limited Quantity Packing Instructions</td><td>Y344</td></tr> <tr> <td>Passenger and Cargo Limited Maximum Qty / Pack</td><td>10 L</td></tr> </table>	Special provisions	A3 A72 A192	Cargo Only Packing Instructions	366	Cargo Only Maximum Qty / Pack	220 L	Passenger and Cargo Packing Instructions	355	Passenger and Cargo Maximum Qty / Pack	60 L	Passenger and Cargo Limited Quantity Packing Instructions	Y344	Passenger and Cargo Limited Maximum Qty / Pack	10 L
Special provisions	A3 A72 A192														
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Passenger and Cargo Maximum Qty / Pack	60 L														
Passenger and Cargo Limited Quantity Packing Instructions	Y344														
Passenger and Cargo Limited Maximum Qty / Pack	10 L														

Sea transport (IMDG-Code / GGVSee)

UN number	1263						
UN proper shipping name	PAINT (including paint, lacquer, enamel, stain, shellac, varnish, polish, liquid filler and liquid lacquer base) or PAINT RELATED MATERIAL (including paint thinning or reducing compound)						
Transport hazard class(es)	<table> <tr> <td>IMDG Class</td><td>3</td></tr> <tr> <td>IMDG Subrisk</td><td>Not Applicable</td></tr> </table>	IMDG Class	3	IMDG Subrisk	Not Applicable		
IMDG Class	3						
IMDG Subrisk	Not Applicable						
Packing group	III						
Environmental hazard	Not Applicable						
Special precautions for user	<table> <tr> <td>EMS Number</td><td>F-E , S-E</td></tr> <tr> <td>Special provisions</td><td>163 223 367 955</td></tr> <tr> <td>Limited Quantities</td><td>5 L</td></tr> </table>	EMS Number	F-E , S-E	Special provisions	163 223 367 955	Limited Quantities	5 L
EMS Number	F-E , S-E						
Special provisions	163 223 367 955						
Limited Quantities	5 L						

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
n-butyl acetate	Not Available
naphtha petroleum, light aromatic solvent	Not Available
xylene	Not Available
ethylbenzene	Not Available
toluene diisocyanate	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
n-butyl acetate	Not Available
naphtha petroleum, light aromatic solvent	Not Available
xylene	Not Available
ethylbenzene	Not Available
toluene diisocyanate	Not Available

SECTION 15 Regulatory information**Safety, health and environmental regulations / legislation specific for the substance or mixture****n-butyl acetate is found on the following regulatory lists**

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

naphtha petroleum, light aromatic solvent is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

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

xylene is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

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

Australian Inventory of Industrial Chemicals (AIIC)

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

ethylbenzene is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

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 2B: Possibly carcinogenic to humans

toluene 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

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 2B: Possibly carcinogenic to humans

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes

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National Inventory	Status
Canada - NDSL	No (n-butyl acetate; naphtha petroleum, light aromatic solvent; xylene; ethylbenzene; toluene diisocyanate)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes
Legend:	<i>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.</i>

SECTION 16 Other information

Revision Date	26/11/2020
Initial Date	07/07/2020

SDS Version Summary

Version	Date of Update	Sections Updated
2.1	07/07/2020	Classification, Fire Fighter (fire/explosion hazard)
3.1	26/11/2020	Acute Health (inhaled), Classification, First Aid (eye), First Aid (skin)

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.

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