

# 832FX Black Flexible Epoxy Encapsulating and Potting Compound (Part B)

## Mektronics

Version No: 3.7 Safety Data Sheet according to WHS and ADG requirements

Issue Date: **04/03/2020** Print Date: **12/05/2020** L.GHS.AUS.EN

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

#### **Product Identifier**

Product name	aduct name 832FX Black Flexible Epoxy Encapsulating and Potting Compound (Part B)	
Synonyms	832FX-Part B, 832FX-25ML, 832FX-50ML, 832FX-400ML; SDS Code: 832FX	
Other means of identification	Not applicable	

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

Relevant identified uses	Epoxy hardener for use with resins

## Details of the supplier of the safety data sheet

Registered company name	Mektronics	MG Chemicals (Head office)
Address	Address Unit 3 8 Bonz Place, Seven Hills NSW 2147 Australia 9347 - 193 Street Surrey V4N 4E7 British Columbia Canad	
<b>Telephone</b> 1300 788 701 +(1) 800-201-8822		+(1) 800-201-8822
Fax	Fax 1300 722 004 +(1) 800-708-9888	
Website www.mektronics.com.au www.mgchemicals.com		www.mgchemicals.com
Email sales@mektronics.com.au Info@mgchemicals.com		Info@mgchemicals.com

# Emergency telephone number

Association / Organisation	Verisk 3E (Access Code: 335388)	
Emergency telephone numbers	+61 1 800 686 951	
Other emergency telephone numbers	+61 280363166	

## **SECTION 2 HAZARDS IDENTIFICATION**

## Classification of the substance or mixture

Poisons Schedule	Poisons Schedule Not Applicable	
Classification [1] Specific target organ toxicity - repeated exposure Category 2, Acute Toxicity (Oral) Category 4, Skin Sensitizer Category 1, Chronic Aquatic Hazard Category 1, Skin Corrosion/Irritation Category 1A		
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 DANGE

### Hazard statement(s)

` '		
H373	H373 May cause damage to organs through prolonged or repeated exposure. (Liver, Nervous system) (Oral, Inhalation)	
H302	Harmful if swallowed.	
H317	May cause an allergic skin reaction.	
H410	Very toxic to aquatic life with long lasting effects.	
H314	Causes severe skin burns and eye damage.	

# Precautionary statement(s) Prevention

P260	Do not breathe mist/vapours/spray.
P280	Wear protective gloves/protective clothing/eye protection/face protection.

P270	Do not eat, drink or smoke when using this product.
P273	Avoid release to the environment.
P272	Contaminated work clothing should not be allowed out of the workplace.

#### Precautionary statement(s) Response

P301+P330+P331	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.	
P303+P361+P353	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.	
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.	
P310	P310 Immediately call a POISON CENTER or doctor/physician.	
P321	Specific treatment (see advice on this label).	
P363	P363 Wash contaminated clothing before reuse.	
P302+P352	P302+P352 IF ON SKIN: Wash with plenty of water and soap.	
P333+P313	P333+P313 If skin irritation or rash occurs: Get medical advice/attention.	
P391	Collect spillage.	
P301+P312	IF SWALLOWED: Call a POISON CENTER or doctor/physician if you feel unwell.	
P304+P340 IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.		

#### Precautionary statement(s) Storage

ocked up.

## Precautionary statement(s) Disposal

P501 Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.

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

#### Substances

See section below for composition of Mixtures

#### Mixtures

CAS No	%[weight]	Name
9046-10-0	59	bis(2-aminopropyl ether) propoxylated
61788-44-1	20	phenol, styrenated
61788-46-3	9	cocoamine
25620-58-0	9	trimethylhexamethylene diamine
90-72-2	2	2.4.6-tris[(dimethylamino)methyl]phenol

# **SECTION 4 FIRST AID MEASURES**

#### Description of first aid measures

If this product comes in contact with the eyes:

- Immediately hold eyelids apart and flush the eye continuously with running water.
- Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids.
  - ▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.
- Eye Contact

  Transport to hospital or doctor without delay.

  Pamoual of contact lenses after an eye injure.
  - ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.

#### For amines:

- If liquid amines come in contact with the eyes, irrigate immediately and continuously with low pressure flowing water, preferably from an eye
  wash fountain, for 15 to 30 minutes.
- For more effective flushing of the eyes, use the fingers to spread apart and hold open the eyelids. The eyes should then be "rolled" or moved in all directions.
- Seek immediate medical attention, preferably from an ophthalmologist.

#### If skin or hair contact occurs:

- Immediately flush body and clothes with large amounts of water, using safety shower if available.
- Quickly remove all contaminated clothing, including footwear.
- ▶ Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.
- ► Transport to hospital, or doctor.

# Skin Contact

- For amines:

   In case of major exposure to liquid amine, promptly remove any contaminated clothing, including rings, watches, and shoe, preferably under a safety shower.
  - Wash skin for 15 to 30 minutes with plenty of water and soap. Call a physician immediately.
- Remove and dry-clean or launder clothing soaked or soiled with this material before reuse. Dry cleaning of contaminated clothing may be more effective than normal laundering.
- ▶ Inform individuals responsible for cleaning of potential hazards associated with handling contaminated clothing.
- Discard contaminated leather articles such as shoes, belts, and watchbands.
- ▶ Note to Physician: Treat any skin burns as thermal burns. After decontamination, consider the use of cold packs and topical antibiotics.

- ▶ 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.
- Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema.
- ▶ Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs).
- As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested.
- ▶ Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered.

#### This must definitely be left to a doctor or person authorised by him/her.

#### (ICSC13719)

#### For amines:

- ▶ All employees working in areas where contact with amine catalysts is possible should be thoroughly trained in the administration of appropriate first aid procedures.
- Experience has demonstrated that prompt administration of such aid can minimize the effects of accidental exposure.
- ▶ Promptly move the affected person away from the contaminated area to an area of fresh air.
- Keep the affected person calm and warm, but not hot.
- If breathing is difficult, oxygen may be administered by a qualified person.
- If breathing stops, give artificial respiration. Call a physician at once.

## ▶ For advice, contact a Poisons Information Centre or a doctor at once.

- Urgent hospital treatment is likely to be needed.
- ed 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
- ► Transport to hospital or doctor without delay.

# Ingestion

Inhalation

#### For amines:

- ▶ If liquid amine are ingested, have the affected person drink several glasses of water or milk.
- ▶ Do not induce vomiting.
- Immediately transport to a medical facility and inform medical personnel about the nature of the exposure. The decision of whether to induce vomiting should be made by an attending physician.

### Indication of any immediate medical attention and special treatment needed

For acute or short term repeated exposures to phenols/ cresols:

- ▶ Phenol is absorbed rapidly through lungs and skin. [Massive skin contact may result in collapse and death]\*
- Figure 1. [Ingestion may result in ulceration of upper respiratory tract; perforation of oesophagus and/or stomach, with attendant complications, may occur. Oesophageal stricture may occur.13
- An initial excitatory phase may present. Convulsions may appear as long as 18 hours after ingestion. Hypotension and ventricular tachycardia that require vasopressor and antiarrhythmic therapy, respectively, can occur.
- Respiratory arrest, ventricular dysrhythmias, seizures and metabolic acidosis may complicate severe phenol exposures so the initial attention should be directed towards stabilisation of breathing and circulation with ventilation, intubation, intravenous lines, fluids and cardiac monitoring as indicated.
- [Vegetable oils retard absorption; do NOT use paraffin oils or alcohols. Gastric lavage, with endotracheal intubation, should be repeated until phenol odour is no longer detectable; follow with vegetable oil. A saline cathartic should then be given.]\* ALTERNATIVELY: Activated charcoal (1g/kg) may be given. A cathartic should be given after oral activated charcoal.
- ▶ Severe poisoning may require slow intravenous injection of methylene blue to treat methaemoglobinaemia.
- [Renal failure may require haemodialysis.]\*
- Most absorbed phenol is biotransformed by the liver to ethereal and glucuronide sulfates and is eliminated almost completely after 24 hours. [Ellenhorn and Barceloux: Medical Toxicology | \*[Union Carbide]

#### **BIOLOGICAL EXPOSURE INDEX - BEI**

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

Determinant Index Sampling Time Comments 1. Total phenol in blood 250 mg/gm creatinine End of shift B. NS

B: Background levels occur in specimens collected from subjects NOT exposed

NS: Non-specific determinant; also seen in exposure to other materials

For acute or short-term repeated exposures to highly alkaline materials:

- ▶ Respiratory stress is uncommon but present occasionally because of soft tissue edema
- Unless endotracheal intubation can be accomplished under direct vision, cricothyroidotomy or tracheotomy may be necessary.
- Oxygen is given as indicated.
- ▶ The presence of shock suggests perforation and mandates an intravenous line and fluid administration.
- ▶ Damage due to alkaline corrosives occurs by liquefaction necrosis whereby the saponification of fats and solubilisation of proteins allow deep penetration into the tissue. Alkalis continue to cause damage after exposure

## INGESTION:

► Milk and water are the preferred diluents

No more than 2 glasses of water should be given to an adult.

- Neutralising agents should never be given since exothermic heat reaction may compound injury.
- \* Catharsis and emesis are absolutely contra-indicated.
- \* Activated charcoal does not absorb alkali.
- \* Gastric lavage should not be used.

Supportive care involves the following:

- Withhold oral feedings initially.
- If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

#### SKIN AND FYE

► Injury should be irrigated for 20-30 minutes.

Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

#### For amines

- ▶ Certain amines may cause injury to the respiratory tract and lungs if aspirated. Also, such products may cause tissue destruction leading to stricture. If lavage is performed, endotracheal and/or esophagoscopic control is suggested.
- No specific antidote is known
- ▶ Care should be supportive and treatment based on the judgment of the physician in response to the reaction of the patient.

Laboratory animal studies have shown that a few amines are suspected of causing depletion of certain white blood cells and their precursors in lymphoid tissue. These effects may be due to an immunosuppressive mechanism.

Some persons with hyperreactive airways (e.g., asthmatic persons) may experience wheezing attacks (bronchospasm) when exposed to airway irritants.

Lung injury may result following a single massive overexposure to high vapour concentrations or multiple exposures to lower concentrations of any pulmonary irritant material. Health effects of amines, such as skin irritation and transient corneal edema ("blue haze," "halo effect," "glaucopsia"), are best prevented by means of formal worker education, industrial hygiene monitoring, and exposure control methods. Persons who are highly sensitive to the triggering effect of non-specific irritants should not be assigned to jobs in which such agents are used, handled, or manufactured.

Medical surveillance programs should consist of a pre-placement evaluation to determine if workers or applicants have any impairments (e.g., hyperreactive airways or bronchial asthma) that would limit their fitness for work in jobs with potential for exposure to amines. A clinical baseline can be established at the time of this evaluation.

Periodic medical evaluations can have significant value in the early detection of disease and in providing an opportunity for health counseling. Medical personnel conducting medical surveillance of individuals potentially exposed to polyurethane amine catalysts should consider the following:

- ▶ Health history, with emphasis on the respiratory system and history of infections
- Physical examination, with emphasis on the respiratory system and the lymphoreticular organs (lymph nodes, spleen, etc.)
- ▶ Lung function tests, pre- and post-bronchodilator if indicated
- Total and differential white blood cell count
- Serum protein electrophoresis

Persons who are concurrently exposed to isocyanates also should be kept under medical surveillance.

Pre-existing medical conditions generally aggravated by exposure include skin disorders and allergies, chronic respiratory disease (e.g. bronchitis, asthma, emphysema), liver disorders, kidney disease, and eve disease,

Broadly speaking, exposure to amines, as characterised by amine catalysts, may cause effects similar to those caused by exposure to ammonia. As such, amines should be considered potentially injurious to any tissue that is directly contacted.

Inhalation of aerosol mists or vapors, especially of heated product, can result in chemical pneumonitis, pulmonary edema, laryngeal edema, and delayed scarring of the airway or other affected organs. There is no specific treatment.

Clinical management is based upon supportive treatment, similar to that for thermal burns,

Persons with major skin contact should be maintained under medical observation for at least 24 hours due to the possibility of delayed reactions.

Polyurethene Amine Catalysts: Guidelines for Safe Handling and Disposal Technical Bulletin June 2000

Alliance for Polyurethanes Industry

#### **SECTION 5 FIREFIGHTING MEASURES**

#### Extinguishing media

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

Special hazards arising from the substrate or mixture		
Fire Incompatibility	Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result	
Advice for firefighters		
Fire Fighting	<ul> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear full body protective clothing with breathing apparatus.</li> <li>Prevent, by any means available, spillage from entering drains or water course.</li> <li>Use fire fighting procedures suitable for surrounding 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> <li>For amines:</li> <li>For firefighting, cleaning up large spills, and other emergency operations, workers must wear a self-contained breathing apparatus with full face-piece, operated in a pressure-demand mode.</li> <li>Airline and air purifying respirators should not be worn for firefighting or other emergency or upset conditions.</li> <li>Respirators should be used in conjunction with a respiratory protection program, which would include suitable fit testing and medical evaluation of the user.</li> </ul>	
Fire/Explosion Hazard	<ul> <li>▶ Combustible.</li> <li>▶ Slight fire hazard when exposed to heat or flame.</li> <li>▶ Heating may cause expansion or decomposition leading to violent rupture of containers.</li> <li>▶ On combustion, may emit toxic fumes of carbon monoxide (CO).</li> <li>▶ May emit acrid smoke.</li> <li>▶ Mists containing combustible materials may be explosive.</li> <li>Combustion products include:</li> <li>carbon dioxide (CO2)</li> </ul>	

## **SECTION 6 ACCIDENTAL RELEASE MEASURES**

**HAZCHEM** 

# Personal precautions, protective equipment and emergency procedures

2X

nitrogen oxides (NOx)

May emit corrosive fumes

other pyrolysis products typical of burning organic material

See section 8

#### **Environmental precautions**

See section 12

#### Methods and material for containment and cleaning up

- Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material.
- ▶ Check regularly for spills and leaks.
- ► 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.

#### Minor Spills

- for amines:

   If possible (i.e., without risk of contact or exposure), stop the leak.
  - Contain the spilled material by diking, then neutralize.
- ▶ Next, absorb the neutralized product with clay, sawdust, vermiculite, or other inert absorbent and shovel into containers.
- Store the containers outdoors.
- Brooms and mops should be disposed of, along with any remaining absorbent, in accordance with all applicable federal, state, and local regulations and requirements.
- Decontamination of floors and other hard surfaces after the spilled material has been removed may be accomplished by using a 5% solution of acetic acid, followed by very hot water
- ▶ Dispose of the material in full accordance with all federal, state, and local laws and regulations governing the disposal of chemical wastes.
- ▶ Waste materials from an amine catalyst spill or leak may be "hazardous wastes" that are regulated under various laws.

#### Chemical Class: amines, alkyl

For release onto land: recommended sorbents listed in order of priority.

SORBENT TYPE	RANK	APPLICATION	COLLECTION	LIMITATIONS
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#### LAND SPILL - SMALL

cross-linked polymer - particulate	1	shovel	shovel	R, W, SS
cross-linked polymer - pillow	1	throw	pitchfork	R,DGC, RT
sorbent clay - particulate	2	shovel	shovel	R, I, P
wood fiber - pillow	3	throw	pitchfork	R, P, DGC, RT,
treated wood fibre - pillow	3	throw	pitchfork	DGC, RT
foamed glass - pillow	4	throw	pitchfork	R, P, DGC, RT

#### LAND SPILL - MEDIUM

cross-linked polymer -particulate	1	blower	skiploader	R, W, SS
cross-linked polymer - pillow	2	throw	skiploader	R, DGC, RT
sorbent clay - particulate	3	blower	skiploader	R, I, P
polypropylene - particulate	3	blower	skiploader	W, SS, DGC
expanded mineral - particulate	4	blower	skiploader	R, I, W, P, DGC
polypropylene - mat	4	throw	skiploader	DGC, RT

#### Major Spills

#### Legend

DGC: Not effective where ground cover is dense

R; Not reusable

I: Not incinerable

P: Effectiveness reduced when rainy

RT:Not effective where terrain is rugged

SS: Not for use within environmentally sensitive sites

W: Effectiveness reduced when windy

Reference: Sorbents for Liquid Hazardous Substance Cleanup and Control;

R.W Melvold et al: Pollution Technology Review No. 150: Noyes Data Corporation 1988

#### NOTE:

Organic absorbents have been known to ignite when contaminated with amines in closed containers. Certain cellulosic materials used for spill cleanup such as wood chips or sawdust have shown reactivity with ethyleneamines and should be avoided.

Chemical Class: phenols and cresols

For release onto land: recommended sorbents listed in order of priority.

SORBENT TYPE	RANK	APPLICATION	COLLECTION	LIMITATIONS	

#### LAND SPILL - SMALL

cross-linked polymer - particulate	1	shovel	shovel	R, W, SS
cross-linked polymer - pillow	1	throw	pitchfork	R, DGC, RT
wood fiber - pillow	1	throw	pitchfork	R, P, DGC, RT
foamed glass - pillow	2	shovel	shovel	R, W, P, DGC
sorbent clay - particulate	2	shovel	shovel	R, I, P
wood fibre - particulate	3	shovel	shovel	R, W, P, DGC

#### LAND SPILL - MEDIUM

cross-linked polymer - particulate	1	blower	skiploader	R,W, SS
cross-linked polymer - pillow	2	throw	skiploader	R, DGC, RT
sorbent clay - particulate	3	blower	skiploader	R, I, P
polypropylene - particulate	3	blower	skiploader	R, SS, DGC
wood fiber - particulate	4	blower	skiploader	R, W, P, DGC
expanded moneral - particulate	4	blower	skiploader	R, I, W, P, DGC

#### Legend

DGC: Not effective where ground cover is dense

R; Not reusable

I: Not incinerable

P: Effectiveness reduced when rainy

RT:Not effective where terrain is rugged

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W: Effectiveness reduced when windy

Reference: Sorbents for Liquid Hazardous Substance Cleanup and Control;

R.W Melvold et al: Pollution Technology Review No. 150: Noyes Data Corporation 1988

- ▶ Clear area of personnel and move upwind.
- Alert Fire Brigade and tell them location and nature of hazard.
- Wear full body protective clothing with breathing apparatus.
- ▶ Prevent, by any means available, spillage from entering drains or water course.
- ▶ Consider evacuation (or protect in place).
- ► Stop leak if safe to do so.
- ▶ Contain spill with sand, earth or vermiculite.
- ▶ Collect recoverable product into labelled containers for recycling.
- ▶ Neutralise/decontaminate residue (see Section 13 for specific agent).
- ▶ Collect solid residues and seal in labelled drums for disposal.
- Wash area and prevent runoff into drains.
- ▶ After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- If contamination of drains or waterways occurs, advise emergency services.

#### For amines:

- ▶ First remove all ignition sources from the spill area.
- Have firefighting equipment nearby, and have firefighting personnel fully trained in the proper use of the equipment and in the procedures used in fighting a chemical fire.
- Spills and leaks of polyurethane amine catalysts should be contained by diking, if necessary, and cleaned up only by properly trained and equipped personnel. All others should promptly leave the contaminated area and stay upwind.
- Protective equipment for cleanup crews should include appropriate respiratory protective devices and impervious clothing, footwear, and gloves.
- ▶ All work areas should be equipped with safety showers and eyewash fountains in good working order.
- Any material spilled or splashed onto the skin should be quickly washed off.
- Spills or releases may need to be reported to federal, state, and local authorities. This reporting contingency should be a part of a site's emergency response plan.
- Protective equipment should be used during emergency situations whenever there is a likelihood of exposure to liquid amines or to excessive concentrations of amine vapor. "Emergency" may be defined as any occurrence, such as, but not limited to, equipment failure, rupture of containers, or failure of control equipment that results in an uncontrolled release of amine liquid or vapor.
- ► Emergency protective equipment should include:
- • Self-contained breathing apparatus, with full face-piece, operated in positive pressure or pressure-demand mode.
- ▶ Rubber gloves
- ▶ Long-sleeve coveralls or impervious full body suit
- ▶ Head protection, such as a hood, made of material(s) providing protection against amine catalysts
- Firefighting personnel and other on-site Emergency Responders should be fully trained in Chemical Emergency Procedures. However back-up from local authorities should be sought

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

### **SECTION 7 HANDLING AND STORAGE**

Safe handling

Other information

## Precautions for safe handling

- ► Avoid all personal contact, including inhalation.
- ► Wear protective clothing when risk of exposure occurs.
- ► Use in a well-ventilated area.
- ▶ WARNING: To avoid violent reaction, ALWAYS add material to water and NEVER water to material.
- Avoid smoking, naked lights or ignition sources.
- Avoid contact with incompatible materials.
- ▶ When handling, DO NOT eat, drink or smoke
- ▶ Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- ▶ Work clothes should be laundered separately. Launder contaminated clothing before re-use.
- ▶ Use good occupational work practice.
- ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.
- ▶ Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.
- ► DO NOT allow clothing wet with material to stay in contact with skin

# Store in original containers.

- Keep containers securely sealed.
- ▶ 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.

- DO NOT store near acids, or oxidising agents
- ▶ No smoking, naked lights, heat or ignition sources.

#### Conditions for safe storage, including any incompatibilities

- ▶ Lined metal can, lined metal pail/ can.
- ► Plastic pail.
- ▶ Polyliner drum.
- ▶ Packing as recommended by manufacturer.
- ► Check all containers are clearly labelled and free from leaks.

#### For low viscosity materials

- ▶ Drums and jerricans must be of the non-removable head type.
- ▶ Where a can is to be used as an inner package, the can must have a screwed enclosure. For materials with a viscosity of at least 2680 cSt. (23 deg. C) and solids (between 15 C deg. and 40 deg C.):
- ► Removable head packaging;
- Cans with friction closures and
- low pressure tubes and cartridges
- may be used.

Where combination packages are used, and the inner packages are of glass, porcelain or stoneware, there must be sufficient inert cushioning material in contact with inner and outer packages unless the outer packaging is a close fitting moulded plastic box and the substances are not

# Storage incompatibility

Suitable container

- Amines are incompatible with isocyanates, halogenated organics, peroxides, phenols (acidic), epoxides, anhydrides, and acid halides.
- ▶ Incompatible with strong reducing agents such as hydrides, due to the liberation of flammable gas.
- Phenols are incompatible with strong reducing substances such as hydrides, nitrides, alkali metals, and sulfides.
- ▶ Avoid use of aluminium, copper and brass alloys in storage and process equipment.
- ▶ Heat is generated by the acid-base reaction between phenols and bases.
- Phenols are sulfonated very readily (for example, by concentrated sulfuric acid at room temperature), these reactions generate heat. ▶ Phenols are nitrated very rapidly, even by dilute nitric acid.
- ▶ Nitrated phenols often explode when heated. Many of them form metal salts that tend toward detonation by rather mild shock.
- Avoid contact with copper, aluminium and their alloys.
- Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.
- Avoid reaction with oxidising agents

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

Material

#### Control parameters

## OCCUPATIONAL EXPOSURE LIMITS (OEL)

### INGREDIENT DATA

Not Available

## **EMERGENCY LIMITS**

Ingredient	Material name		TEEL-1	TEEL-2	TEEL-3
bis(2-aminopropyl ether) propoxylated	Polyoxyalkyleneamine; (Poly(oxypropylene)diamine)	4.8 mg/m3	53 mg/m3	320 mg/m3	
2,4,6- tris[(dimethylamino)methyl]phenol	Tris(dimethylaminomethyl)phenol, 2,4,6-		6.5 mg/m3	72 mg/m3	430 mg/m3
Ingredient	Original IDLH	Revis	sed IDLH		
bis(2-aminopropyl ether) propoxylated	Not Available	Not Available			
phenol, styrenated	Not Available	Not Available			

#### Not Available Not Available cocoamine trimethylhexamethylene diamine Not Available Not Available Not Available Not Available tris[(dimethylamino)methyl]phenol

# OCCUPATIONAL EXPOSURE BANDING

Ingredient	ent Occupational Exposure Band Rating Occupational Exposure Band Limit			
bis(2-aminopropyl ether) propoxylated	С	> 1 to ≤ 10 parts per million (ppm)		
phenol, styrenated	E	≤ 0.1 ppm		
cocoamine	Е	≤ 0.1 ppm		
trimethylhexamethylene diamine	E	≤ 0.1 ppm		
2,4,6- tris[(dimethylamino)methyl]phenol	С	> 1 to ≤ 10 parts per million (ppm)		
Notes:	Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.			

#### MATERIAL DATA

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for

this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL): this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- ▶ cause inflammation
- cause increased susceptibility to other irritants and infectious agents
- ▶ lead to permanent injury or dysfunction
- permit greater absorption of hazardous substances and
- ▶ acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

#### **Exposure controls**

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

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

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

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

General exhaust is adequate under normal operating conditions. Local exhaust ventilation may be required in special circumstances. If risk of overexposure exists, wear approved respirator. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection. Provide adequate ventilation in warehouses and enclosed storage areas. Air contaminants generated in the workplace possess varying 'escape' velocities which, in turn, determine the 'capture velocities' of fresh circulating air required to effectively remove the contaminant.

# Appropriate engineering controls

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

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only.	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood-local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

#### Personal protection











- Safety glasses with unperforated side shields may be used where continuous eye protection is desirable, as in laboratories; spectacles are not sufficient where complete eye protection is needed such as when handling bulk-quantities, where there is a danger of splashing, or if the material may be under pressure.
- ▶ Chemical goggles.whenever there is a danger of the material coming in contact with the eyes; goggles must be properly fitted.
- Full face shield (20 cm, 8 in minimum) may be required for supplementary but never for primary protection of eyes; these afford face protection.
- Alternatively a gas mask may replace splash goggles and face shields.
- 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]

## Eye and face protection

#### na

# For amines: SPECIAL PRECAUTION:

- Because amines are alkaline materials that can cause rapid and severe tissue damage, wearing of contact lenses while working with amines is strongly discouraged. Wearing such lenses can prolong contact of the eye tissue with the amine, thereby causing more severe damage.
- Appropriate eye protection should be worn whenever amines are handled or whenever there is any possibility of direct contact with liquid products, vapors, or aerosol mists.

#### CAUTION:

- ▶ Ordinary safety glasses or face-shields will not prevent eye irritation from high concentrations of vapour.
- In operations where positive-pressure, air-supplied breathing apparatus is not required, all persons handling liquid amine catalysts or other polyurethane components in open containers should wear chemical workers safety goggles.

Eyewash fountains should be installed, and kept in good working order, wherever amines are used. Skin protection See Hand protection below ▶ Elbow length PVC gloves ▶ When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots. NOTE: ▶ The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact ► Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed. The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application. The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice. Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include: frequency and duration of contact, chemical resistance of glove material, 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 Hands/feet protection long-term use. Contaminated gloves should be replaced. As defined in ASTM F-739-96 in any application, gloves are rated as: Excellent when breakthrough time > 480 min Good when breakthrough time > 20 min Fair when breakthrough time < 20 min Poor when glove material degrades For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended. It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times. Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers' technical data should always be taken into account to ensure selection of the most appropriate glove for the task Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example: Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of. Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended For amines: ▶ Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. ▶ Application of a non-perfumed moisturiser is recommended ▶ Where there is a possibility of exposure to liquid amines skin protection should include: rubber gloves, (neoprene, nitrile, or butyl). ▶ DO NOT USE latex. Body protection See Other protection below

# Other protection

- Overalls.
- ► PVC Apron
- PVC protective suit may be required if exposure severe
  - ► Eyewash unit
  - ► Ensure there is ready access to a safety shower.

## Respiratory protection

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

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	AK-AUS / Class1 P2	-
up to 50	1000	-	AK-AUS / Class 1 P2
up to 50	5000	Airline *	_
up to 100	5000	-	AK-2 P2
up to 100	10000	-	AK-3 P2
100+			Airline**

\* - 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.
- For the wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

Where engineering controls are not feasible and work practices do not reduce airborne amine concentrations below recommended exposure limits, appropriate respiratory protection should be used. In such cases, air-purifying respirators equipped with cartridges designed to protect against amines are recommended.

#### **SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES**

#### Information on basic physical and chemical properties

Appearance	clear, amber		
Physical state	Liquid	Relative density (Water = 1)	0.98
Odour	Ammonia-like	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)	165
Initial boiling point and boiling range (°C)	>230	Molecular weight (g/mol)	Not Available
Flash point (°C)	>104	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	0.002	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

#### **SECTION 10 STABILITY AND REACTIVITY**

Reactivity	See section 7
Chemical stability	<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 alkaline corrosives may produce irritation of the respiratory tract with coughing, choking, pain and mucous membrane damage. Pulmonary oedema may develop in more severe cases; this may be immediate or in most cases following a latent period of 5-72 hours. Symptoms may include a tightness in the chest, dyspnoea, frothy sputum, cyanosis and dizziness. Findings may include hypotension, a weak and rapid pulse and moist rales.

Inhaled

Inhalation of amine vapours may cause irritation of the mucous membranes of the nose and throat and lung irritation with respiratory distress and cough. Single exposures to near lethal concentrations and repeated exposures to sublethal concentrations produces tracheitis, bronchitis, pneumonitis and pulmonary oedema. Aliphatic and alicyclic amines are generally well absorbed from the respiratory tract. Systemic effects include headache, nausea, faintness and anxiety. These effects are thought to be transient and are probably related to the pharmacodynamic action of the amines. Histamine release by aliphatic amines may produce bronchoconstriction and wheezing.

Inhalation of epoxy resin amine hardener vapours (including polyamines and amine adducts) may produce bronchospasm and coughing episodes lasting days after cessation of the exposure. Even faint traces of these vapours may trigger an intense reaction in individuals showing 'amine asthma'. The literature records several instances of systemic intoxications following the use of amines in epoxy resin systems. Excessive exposure to the vapours of epoxy amine curing agents may cause both respiratory irritation and central nervous system depression. Signs and symptoms of central nervous system depression, in order of increasing exposure, are headache, dizziness, drowsiness, and incoordination. In short, a single prolonged (measured in hours) or excessive inhalation exposure may cause serious adverse effects, including death.

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

Toxic effects may result from the accidental ingestion of the material; animal experiments indicate that ingestion of less than 40 gram may be fatal or may produce serious damage to the health of the individual. Ingestion of alkaline corrosives may produce immediate pain, and circumoral burns. Mucous membrane corrosive damage is characterised by a

Ingestion of alkaline corrosives may produce immediate pain, and circumoral burns. Mucous membrane corrosive damage is characterised by a white appearance and soapy feel; this may then become brown, oedematous and ulcerated. Profuse salivation with an inability to swallow or speak may also result. Even where there is limited or no evidence of chemical burns, both the oesophagus and stomach may experience a burning pain; vomiting and diarrhoea may follow. The vomitus may be thick and may be slimy (mucous) and may eventually contain blood and shreds of mucosa. Epiglottal oedema may result in respiratory distress and asphyxia. Marked hypotension is symptomatic of shock; a weak and rapid pulse, shallow respiration and clammy skin may also be evident. Circulatory collapse may occur and, if uncorrected, may produce renal failure. Severe exposures may result in oesophageal or gastric perforation accompanied by mediastinitis, substernal pain, peritonitis, abdominal rigidity and fever. Although oesophageal, gastric or pyloric stricture may be evident initially, these may occur after weeks or even months and years. Death may be quick and results from asphyxia, circulatory collapse or aspiration of even minute amounts. Death may also be delayed as a result of perforation, pneumonia or the

result of perforation, pneumo

Ingestion of amine epoxy-curing agents (hardeners) may cause severe abdominal pain, nausea, vomiting or diarrhoea. The vomitus may contain blood and mucous. If death does not occur within 24 hours there may be an improvement in the patients condition for 2-4 days only to be followed by the sudden onset of abdominal pain, board-like abdominal rigidity or hypo-tension; this indicates that delayed gastric or oesophageal corrosive damage has occurred.

Aliphatic and alicyclic amines are generally well absorbed from the gut. Corrosive action may cause tissue damage throughout the gastrointestinal tract. Detoxification is thought to occur in the liver, kidney and intestinal mucosa with the enzymes, monoamine oxidase and diamine oxidase (histaminase) having a significant role.

Skin contact is not thought to produce harmful health effects (as classified under EC Directives using animal models). Systemic harm, however, has been identified following exposure of animals by at least one other route and the material may still produce health damage following entry through wounds, lesions or abrasions. Good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting.

Volatile amine vapours produce primary skin irritation and dermatitis. Direct local contact, with the lower molecular weight liquids, may produce skin burns. Percutaneous absorption of simple aliphatic amines is known to produce lethal effects often the same as that for oral administration. Cutaneous sensitisation has been recorded chiefly due to ethyleneamines. Histamine release following exposure to many aliphatic amines may result in 'triple response' (white vasoconstriction, red flare and wheal) in human skin.

Amine epoxy-curing agents (hardeners) may produce primary skin irritation and sensitisation dermatitis in predisposed individuals. Cutaneous reactions include erythema, intolerable itching and severe facial swelling. Blistering, with weeping of serious fluid, and crusting and scaling may also occur.

#### Skin Contact

Ingestion

Virtually all of the liquid amine curing agents can cause sensitisation or allergic skin reactions.

Individuals exhibiting 'amine dermatitis' may experience a dramatic reaction upon re-exposure to minute quantities. Highly sensitive persons may even react to cured resins containing trace amounts of unreacted amine hardener. Minute quantities of air-borne amine may precipitate intense dermatological symptoms in sensitive individuals. Prolonged or repeated exposure may produce tissue necrosis.

NOTE: Susceptibility to this sensitisation will vary from person to person. Also, allergic dermatitis may not appear until after several days or weeks of contact. However, once sensitisation has occurred, exposure of the skin to even very small amounts of the material may cause erythema (redness) and oedema (swelling) at the site. Thus, all skin contact with any epoxy curing agent should be avoided.

Skin contact with alkaline corrosives may produce severe pain and burns; brownish stains may develop. The corroded area may be soft, gelatinous and necrotic; tissue destruction may be deep.

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 can produce severe chemical burns following direct contact with the skin.

When applied to the eye(s) of animals, the material produces severe ocular lesions which are present twenty-four hours or more after instillation. Direct contact with alkaline corrosives may produce pain and burns. Oedema, destruction of the epithelium, corneal opacification and iritis may occur. In less severe cases these symptoms tend to resolve. In severe injuries the full extent of the damage may not be immediately apparent with late complications comprising a persistent oedema, vascularisation and corneal scarring, permanent opacity, staphyloma, cataract, symblepharon and loss of sight.

Vapours of volatile amines cause eye irritation with lachrymation, conjunctivitis and minor transient corneal oedema which results in 'halos' around lights (glaucopsia, 'blue haze', or 'blue-grey haze'). Vision may become misty and halos may appear several hours after workers are exposed to the substance

This effect generally disappears spontaneously within a few hours of the end of exposure, and does not produce physiological after-effects. However oedema of the corneal epithelium, which is primarily responsible for vision disturbances, may take more than one or more days to clear, depending on the severity of exposure. Photophobia and discomfort from the roughness of the corneal surface also may occur after greater exposures.

Although no detriment to the eye occurs as such, glaucopsia predisposes an affected individual to physical accidents and reduces the ability to undertake skilled tasks such as driving a vehicle.

Direct local contact with the liquid may produce eye damage which may be permanent in the case of the lower molecular weight species.

Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Gastrointestinal disturbances may also occur. Chronic exposures may result in dermatitis and/or conjunctivitis.

Repeated or long-term occupational exposure is likely to produce cumulative health effects involving organs or biochemical systems. 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.

On the basis, primarily, of animal experiments, concern has been expressed by at least one classification body 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.

#### Chronic

Eve

Prolonged exposure to some derivatives of phenol may produce dermatitis, anorexia, weight loss, weakness, muscle aches and pain, liver damage, dark urine, ochronosis, skin eruptions, diarrhoea, nervous disorders with headache, salivation, fainting, increased skin and scleral pigmentation, vertigo and mental disorders. Liver and kidney damage may also ensue. Chronic phenol toxicity was first noted in medical personnel in the late 1800s when 5 and 10% phenol was used as a skin disinfectant. The term carbolic (phenol) marasmus was given to this syndrome.

Addition of structurally related phenolic compounds to the diet of Syrian golden hamsters induced forestomach hyperplasia and tumours. These compounds included 2(3)-tert-butyl-4-methoxphenol (BHA) (CAS RN: 25013-16-5), 2-tert-butyl-4-methylphenol (TBMP) (29759-28-2) and p-tert-butylphenol (PTBP) (98-54-4); less active were catechol (154-23-4), p-methylphenol (331-39-5), methylhydroquinone (MHQ) (95-71-6) and pyrogallol (87-66-1), whilst no activity was seen with resorcinol (108-46-3), hydroquinone (123-31-9), propylparaben (94-13-3) and tert-butylhydroquinone (TBHQ) (1948-33-0).

In autoradiographic studies, intake of BHA, TBMP, catechol, PMOP, PTBP and MHQ resulted in a significant increase in the labelling index of the forestomach epithelium, whilst PMOP induced epithelial damage and pyloric regenerative hyperplasia. Catechol, CA and PYMP induced similar but less marked alterations. Both catechol and PMOP increased the labelling index in the glandular stomach. The urinary bladder was free from histo-pathological lesions, but propylparabene, catechol, TBHQ and MHQ increased the labelling index. The authors of this study concluded that

# Continued...

long term administration of PTBP and TBMP may be carcinogenic for hamster forestomach and that both 1-hydroxy and tert-butyl substituents may play a role in the induction of forestomach tumours. Hiros, M., et al: Carcinogenesis, Vol 7, pp 1285-1289; 1986

<u>'</u>					
832FX BLACK FLEXIBLE EPOXY	TOXICITY		IRRITATION	N	
ENCAPSULATING AND POTTING COMPOUND (Part B)	Not Available Not Avail		Not Availab	ble	
	TOXICITY	XICITY IRRITATION			
	Dermal (rabbit) LD50: 250 mg/kg <sup>[2]</sup> Eye (rabbit): 100 mg - SEVE		ERE		
bis(2-aminopropyl ether)	Oral (rat) LD50: 242 mg/kg <sup>[2]</sup>	Eye (rabbit): SEVERE ***		,	
propoxylated		Eye: adver	se effect obser	rved (irreversible damage) <sup>[1]</sup>	
		Skin (rabbi	:): SEVERE ***	*	
		Skin: adver	se effect obse	erved (corrosive) <sup>[1]</sup>	
	TOXICITY		IRRITATION		
	dermal (rat) LD50: >2000 mg/kg <sup>[1]</sup>			Eye (rabbit): not irritating *	
phenol, styrenated	Inhalation (rat) LC50: >0.315 mg/l//6h* <sup>[2]</sup>			Skin (rabbit): slight *	
	Oral (rat) LD50: >2000 mg/kg <sup>[1]</sup>				
	TOXICITY			IRRITATION	
cocoamine	dermal (rat) LD50: >2000 mg/kg <sup>[2]</sup>			Corrosive (Eye)	
	Oral (rat) LD50: 1300 mg/kg <sup>[2]</sup>			Corrosive (Skin) [ICI]	
	TOXICITY		IRRIT	ATION	
trimethylhexamethylene diamine	Oral (rat) LD50: 910 mg/kg <sup>[2]</sup>	10 mg/kg <sup>[2]</sup> Eye (r		rabbit): Corrosive *	
	Stat (tal) 220010 to highly		Skin (ı	Skin (rabbit): Corrosive *	
	TOXICITY	IRRIT	ATION		
	dermal (rat) LD50: >973 mg/kg <sup>[1]</sup>			it): 0.05 mg/24h - SEVERE	
2,4,6-	Inhalation (rat) LC50: >0.125 mg/l/1hr.] <sup>[2]</sup>	- ' '		observed (irreversible damage) <sup>[1]</sup>	
tris[(dimethylamino)methyl]phenol	Oral (rat) LD50: 1200 mg/kg <sup>[2]</sup>	-		` ,	
	Oral (rat) LD50: 1200 mg/kg $^{[2]}$ Skin (rabbit): 2 mg/24h - SEVERE				

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

Convulsions, stomach ulceration, haemorrhage, respiratory tract changes, dermatitis after systemic administration recorded. \* Reichard \*\* Bayer Inc. Canada \*\*\* Texaco \*\*\*\*Epoxylite

Skin: adverse effect observed (corrosive)[1]

Polyethers, for example, ethoxylated surfactants and polyethylene glycols, are highly susceptible towards air oxidation as the ether oxygens will stabilize intermediary radicals involved. Investigations of a chemically well-defined alcohol (pentaethylene glycol mono-n-dodecyl ether) ethoxylate, showed that polyethers form complex mixtures of oxidation products when exposed to air. Sensitization studies in guinea pigs revealed that the pure nonoxidized surfactant itself is nonsensitizing but that many of the investigated oxidation products are sensitizers. Two hydroperoxides were identified in the oxidation mixture, but only one (16-hydroperoxy-3,6,9,12,15-pentaoxaheptacosan-1-ol) was stable enough to be isolated. It was found to be a strong sensitizer in LLNA (local lymph node assay for detection of sensitization capacity). The formation of other hydroperoxides was indicated by the detection of their corresponding aldehydes in the oxidation mixture.

On the basis of the lower irritancy, nonionic surfactants are often preferred to ionic surfactants in topical products. However, their susceptibility towards autoxidation also increases the irritation. Because of their irritating effect, it is difficult to diagnose ACD to these compounds by patch testing.

Allergic Contact Dermatitis—Formation, Structural Requirements, and Reactivity of Skin Sensitizers.

Ann-Therese Karlberg et al; Chem. Res. Toxicol.2008,21,53-69

Polyethylene glycols (PEGs) have a wide variety of PEG-derived mixtures due to their readily linkable terminal primary hydroxyl groups in combination with many possible compounds and complexes such as ethers, fatty acids, castor oils, amines, propylene glycols, among other derivatives. PEGs and their derivatives are broadly utilized in cosmetic products as surfactants, emulsifiers, cleansing agents, humectants, and skin conditioners.

PEGs and PEG derivatives were generally regulated as safe for use in cosmetics, with the conditions that impurities and by-products, such as ethylene oxides and 1,4-dioxane, which are known carcinogenic materials, should be removed before they are mixed in cosmetic formulations.

Most PEGs are commonly available commercially as mixtures of different oligomer sizes in broadly- or narrowly-defined molecular weight (MW) ranges. For instance, PEG-10,000 typically designates a mixture of PEG molecules (n = 195 to 265) having an average MW of 10,000. PEG is also known as polyethylene oxide (PEO) or polyoxyethylene (POE), with the three names being chemical synonyms. However, PEGs mainly refer to oligomers and polymers with molecular masses below 20,000 g/mol, while PEOs are polymers with molecular masses above 20,000 g/mol, and POEs are polymers of any molecular mass. Relatively small molecular weight PEGs are produced by the chemical reaction between ethylene oxide and water or ethylene glycol (or other ethylene glycol oligomers), as catalyzed by acidic or basic catalysts. To produce PEO or high-molecular weight PEGs, synthesis is performed by suspension polymerization. It is necessary to hold the growing polymer chain in solution during the course of the poly-condensation process. The reaction is catalyzed by magnesium-, aluminum-, or calcium-organoelement compounds. To

# BIS(2-AMINOPROPYL ETHER) PROPOXYLATED

prevent coagulation of polymer chains in the solution, chelating additives such as dimethylglyoxime are used Safety Evaluation of Polyethyene Glycol (PEG) Compounds for Cosmetic Use: Toxicol Res 2015; 31:105-136 The Korean Society of Toxicology http://doi.org/10.5487/TR.2015.31.2.105 for styrenated phenols Acute toxicity: Available acute oral and dermal toxicity data indicated members of this category are not acutely toxic. Repeated Dose Toxicity: A 12-week feeding study has been conducted with styrenated phenol. In the study the thyroid was identified as a target organ and a NOAEL (50 mg/kg/day) and LOAEL (158 mg/kg/day) established. **Genotoxicity.** Genotoxicity test indicate that the styrenated phenols do not have potential to cause mutations. Bacterial Gene Mutation Assays. Bacterial gene mutations assays have been conducted with both substances in the category. Assays were done with and without metabolic activation and were negative. Chromosome Aberration Studies. A chromosome aberration study in vivo has been conducted with isobutylenated methylstyrenated phenol and was negative. It would not be expected that styrenated phenol would give different results than isobutylenated methylstyrenated phenol. Other mutagenicity tests. An in vitro gene mutation assay with Mouse Lymphoma cells is available for isobutylenated methylstyrenated phenol and was negative. The only positive genotoxicity test was a bacterial DNA damage test with styrenated phenol. For hindered phenols: Available data shows that acute toxicity of these substances is low. Mutagenicity. Data from bacterial reverse mutation assays and in vitro and in vivo chromosome aberration studies were reviewed. PHENOL, STYRENATED All assays, with and without metabolic activation, were negative. The weight of evidence for mutagenic potential for this category indicates these substances are not mutagenic. In Vitro Chromosome Aberration Studies. In vitro chromosome aberration studies are available for several members. All except 2.6-di-tert-butvl-p-cresol were negative In Vivo Chromosome Aberration Studies. In vivo studies evaluating chromosome damage are available for six of the hindered phenols. All in vivo evaluations were negative. Repeated Dose Toxicity. Repeated dose toxicity data of approximately three months (90-day, 12- and 13-week) are available for some of the substances in this group. The liver was the target organ in rats for almost all of the substances with subchronic toxicity data in that species. Other target organs included thyroid and kidney and mesenteric lymph nodes. NOAELs in rats ranged from 100 ppm (approximately 5 mg/kg/day) to 10,000 ppm (500 mg/kg/day Carcinogenicity: Data is available for 2,6-di-tert-butyl-p-cresol (128-37-0); and 4,4-thiobis-6-(t-butyl-m-cresol) (96-69-5). Liver adenomas were reported for 2,6-di-tert-butyl-p-cresol (128-37-0) and a NOAEL was established for the study at 25 mg/kg/day. 4,4'-Thiobis-6-(t-butyl-m-cresol) (96-69-5) was not carcinogenic in rats or mice, but the kidney was identified as a target organ in female rats 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. NOAEL 50 mg/kg \* LOAEL 158 mg/kg\* \* IUCLID Database For Fatty Nitrogen-Derived ether amines and FND amines): FND ether amines and FND amines are very similar in structure and function. The minimal difference among the alkyl substituents and the large database for the FND categories indicates that the structural differences in these large alkyl chains do not result in differences in toxicity or mutagenicity. The differences in chain length, degree of saturation of the carbon chains, source of the natural oils, or addition of an amino group in the chain would not be expected to have an impact on the toxicity profile. This conclusion is supported by a number of studies in the FND family of chemicals (amines, cationics, and amides as separate categories) that show no differences in the length or degree of saturation of the alkyl substituents and is also supported by the limited toxicity of these long-chain substituted chemicals The available acute oral LD50 study for the propanamine derivative with the extensive data for the other supporting chemicals provides adequate evidence that the FND ether amines are only moderately to slightly toxic via this route and exposure period. Acute dermal studies for the supporting chemicals indicate these chemicals can be classified as minimally toxic. Acute inhalation studies did not result in deaths under normal exposure conditions for two chemicals. Repeated dose toxicity studies had similar NOAELs (12.5 to 50 mg/kg/day for rats and 3 or 13 mg/kg/day for dogs). Importantly because the highest exposure potential for some of the FND ether amines is via skin contact, a number of repeat dose dermal studies indicate the chemicals are highly irritating. COCOAMINE No clear organ-specific toxicity occurred in any of the repeat dose studies with the supporting chemicals in the FND ether amines category. In addition, available data indicate that the FND ether amines are unlikely to be mutagenic and that they are not reproductive or developmental toxins In evaluating potential toxicity of the FND Amines chemicals, it is also useful to review the available data for the related FND Cationic and FND Amides Category chemicals. Acute oral toxicity studies (approximately 80 studies for 40 chemicals in the three categories) provide LD50 values from approximately 400 to 10,000 mg/kg with no apparent organ specific toxicity. Similarly, repeated dose toxicity studies (approximately 35 studies for 15 chemicals) provide NOAELs between 10 and 100 mg/kg/day for rats and slightly lower for dogs. More than 60 genetic toxicity studies (in vitro bacterial and mammalian cells as well as in vivo studies) indicated no mutagenic activity among more than 30 chemicals tested. For reproductive evaluations, 14 studies evaluated reproductive endpoints and/or reproductive organs for 11 chemicals, and 15 studies evaluated developmental toxicity for 13 chemicals indicating no reproductive or developmental effects for the FND group as a whole. The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce TRIMETHYLHEXAMETHYLENE DIAMINE conjunctivitis No significant acute toxicological data identified in literature search. 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. TRIS[(DIMETHYLAMINO)METHYL]PHENOL 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. 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 832FX BLACK FLEXIBLE EPOXY of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. **ENCAPSULATING AND POTTING** contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by COMPOUND (Part B) & COCOAMINE & its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly TRIMETHYLHEXAMETHYLENE DIAMINE 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.

While it is difficult to generalise about the full range of potential health effects posed by exposure to the many different amine compounds, characterised by those used in the manufacture of polyurethane and polyisocyanurate foams, it is agreed that overexposure to the majority of these materials may cause adverse health effects

- Many amine-based compounds can induce histamine liberation, which, in turn, can trigger allergic and other physiological effects, including bronchoconstriction or bronchial asthma and rhinitis.
- Systemic symptoms include headache, nausea, faintness, anxiety, a decrease in blood pressure, tachycardia (rapid heartbeat), itching, erythema (reddening of the skin), urticaria (hives), and facial edema (swelling). Systemic effects (those affecting the body) that are related to the pharmacological action of amines are usually transient.

Typically, there are four routes of possible or potential exposure: inhalation, skin contact, eye contact, and ingestion.

#### Inhalation:

Inhalation of vapors may, depending upon the physical and chemical properties of the specific product and the degree and length of exposure, result in moderate to severe irritation of the tissues of the nose and throat and can irritate the lungs

Products with higher vapour pressures have a greater potential for higher airborne concentrations. This increases the probability of worker exposure.

Higher concentrations of certain amines can produce severe respiratory irritation, characterised by nasal discharge, coughing, difficulty in breathing, and chest pains.

Chronic exposure via inhalation may cause headache, nausea, vomiting, drowsiness, sore throat, bronchopneumonia, and possible lung damage. Also, repeated and/or prolonged exposure to some amines may result in liver disorders, jaundice, and liver enlargement. Some amines have been shown to cause kidney, blood, and central nervous system disorders in laboratory animal

While most polyurethane amine catalysts are not sensitisers, some certain individuals may also become sensitized to amines and may experience respiratory distress, including asthma-like attacks, whenever they are subsequently exposed to even very small amounts of vapor. Once sensitised, these individuals must avoid any further exposure to amines. Although chronic or repeated inhalation of vapor concentrations below hazardous or recommended exposure limits should not ordinarily affect healthy individuals, chronic overexposure may lead to permanent pulmonary injury, including a reduction in lung function, breathlessness, chronic bronchitis, and immunologic lung disease.

Inhalation hazards are increased when exposure to amine catalysts occurs in situations that produce aerosols, mists, or heated vapors. Such situations include leaks in fitting or transfer lines. Medical conditions generally aggravated by inhalation exposure include asthma, bronchitis, and emphysema.

#### **Skin Contact:**

Skin contact with amine catalysts poses a number of concerns. Direct skin contact can cause moderate to severe irritation and injury-i.e., from simple redness and swelling to painful blistering, ulceration, and chemical burns. Repeated or prolonged exposure may also result in severe cumulative dermatitis.

Skin contact with some amines may result in allergic sensitisation. Sensitised persons should avoid all contact with amine catalysts. Systemic effects resulting from the absorption of the amines through skin exposure may include headaches, nausea, faintness, anxiety, decrease in blood pressure, reddening of the skin, hives, and facial swelling. These symptoms may be related to the pharmacological action of the amines, and they are usually transient

### **Eye Contact:**

Amine catalysts are alkaline in nature and their vapours are irritating to the eyes, even at low concentrations.

Direct contact with the liquid amine may cause severe irritation and tissue injury, and the "burning" may lead to blindness. (Contact with solid products may result in mechanical irritation, pain, and corneal injury.)

Exposed persons may experience excessive tearing, burning, conjunctivitis, and corneal swelling.

The corneal swelling may manifest itself in visual disturbances such as blurred or "foggy" vision with a blue tint ("blue haze") and sometimes a halo phenomenon around lights. These symptoms are transient and usually disappear when exposure ceases Some individuals may experience this effect even when exposed to concentrations below doses that ordinarily cause respiratory irritation

#### Ingestion:

The oral toxicity of amine catalysts varies from moderately to very toxic.

Some amines can cause severe irritation, ulceration, or burns of the mouth, throat, esophagus, and gastrointestinal tract. Material aspirated (due to vomiting) can damage the bronchial tubes and the lungs

Affected persons also may experience pain in the chest or abdomen, nausea, bleeding of the throat and the gastrointestinal tract, diarrhea, dizziness, drowsiness, thirst, circulatory collapse, coma, and even death

Polyurethane Amine Catalysts: Guidelines for Safe Handling and Disposal; Technical Bulletin June 2000 Alliance for Polyurethanes Industry

#### **BIS(2-AMINOPROPYL ETHER)** PROPOXYLATED & 2,4,6-TRIS[(DIMETHYLAMINO)METHYL]PHENOL

832FX BI ACK FI FXIBI F FPOXY

**ENCAPSULATING AND POTTING** COMPOUND (Part B) & BIS(2-

& COCOAMINE &

2.4.6-

AMINOPROPYL ETHER) PROPOXYLATED

TRIMETHYLHEXAMETHYLENE DIAMINE &

TRIS[(DIMETHYLAMINO)METHYL]PHENOL

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

The material may produce respiratory tract irritation. Symptoms of pulmonary irritation may include coughing, wheezing, laryngitis, shortness of breath, headache, nausea, and a burning sensation.

Unlike most organs, the lung can respond to a chemical insult or a chemical agent, by first removing or neutralising the irritant and then repairing the damage (inflammation of the lungs may be a consequence).

#### **COCOAMINE &** TRIMETHYLHEXAMETHYLENE DIAMINE

The repair process (which initially developed to protect mammalian lungs from foreign matter and antigens) may, however, cause further damage to the lungs (fibrosis for example) when activated by hazardous chemicals. Often, this results in an impairment of gas exchange, the primary function of the lungs. Therefore prolonged exposure to respiratory irritants may cause sustained breathing difficulties

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.

Acute Toxicity	<b>✓</b>	Carcinogenicity	×
Skin Irritation/Corrosion	✓	Reproductivity	×
Serious Eye Damage/Irritation	×	STOT - Single Exposure	×

Respiratory or Skin sensitisation	•	STOT - Repeated Exposure	<b>✓</b>
Mutagenicity	×	Aspiration Hazard	×

Legend: X – Data eiti

X − Data either not available or does not fill the criteria for classification
 ✓ − Data available to make classification

#### **SECTION 12 ECOLOGICAL INFORMATION**

#### Toxicity

832FX BLACK FLEXIBLE EPOXY ENCAPSULATING AND POTTING	ENDPOINT	TEST DURATION (HR)		SPECIES	VALUE		SOURCE	
COMPOUND (Part B)	Not Available	lot Available Not Available		Not Available Not Available		able	le Not Available	
	ENDPOINT	TEST DURATION (HR)	SPE	TIES		VALUE	SOURCE	
	LC50	96	Fish				2	
bis(2-aminopropyl ether)	EC50	48		acea		772.14mg/L 80mg/L	2	
propoxylated	EC50	72	Algae or other aquatic plants		2.1mg/L	2		
		72					2	
	NOEC	12	Alga	e or other aquatic plant	ıs	0.32mg/L	Z	
	ENDPOINT	TEST DURATION (HR)	SPE	CIES		VALUE	SOURCE	
	LC50	96	Fish			0.003mg/L	3	
phenol, styrenated	EC50	48	Crus	stacea		1.44mg/L	2	
	EC50	96	Algae or other aquatic plants		0.004mg/L	3		
	NOEC	504	Crustacea			0.115mg/L	2	
	ENDPOINT	TEST DURATION (HR)	SPEC	IES		VALUE	SOURCE	
	LC50	96	Fish			=0.1mg/L	1	
cocoamine	EC50	48	Crust	acea		=0.045mg/L	1	
Cocoamine	EC50	96	Algae	Algae or other aquatic plants		=0.0008mg/L	1	
	EC0	24	Crust	Crustacea		=0.032mg/L	1	
	NOEC	96	Algae	or other aquatic plants	3	=0.0002mg/L	1	
	ENDPOINT	TEST DURATION (HR)	SPE	CIES		VALUE	SOURCE	
dend all considerations Province	LC50	96	Fish	Fish		78.605mg/L	3	
trimethylhexamethylene diamine	EC50	96	Alga	e or other aquatic plant	ts	9.058mg/L	3	
	EC10	72	Alga	Algae or other aquatic plants		=16.3mg/L	1	
	ENDPOINT	TEST DURATION (HR)	SP	SPECIES		VALUE	SOURCE	
2,4,6- s[(dimethylamino)methyl]phenol	LC50	96	Fis	h		175mg/L	2	
, , , , , , , , , , , , , , , , , , , ,	EC50	72	Alg	ae or other aquatic pla	ants	2.8mg/L	2	

Legend:

Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 4. US EPA, Ecotox database - Aquatic Toxicity Data 5. ECETOC Aquatic Hazard Assessment Data 6. NITE (Japan) - Bioconcentration Data 7. METI (Japan) - Bioconcentration Data 8. Vendor Data

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

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

Environmental toxicity is a function of the n-octanol/ water partition coefficient (log Pow, log Kow). Phenols with log Pow >7.4 are expected to exhibit low toxicity to aquatic organisms. However the toxicity of phenols with a lower log Pow is variable, ranging from low toxicity (LC50 values >100 mg/l) to highly toxic (LC50 values <1 mg/l) dependent on log Pow, molecular weight and substitutions on the aromatic ring. Dinitrophenols are more toxic than predicted from QSAR estimates. Hazard information for these groups is not generally available.

Prevent, by any means available, spillage from entering drains or water courses.

DO NOT discharge into sewer or waterways

# Persistence and degradability

In one diam	Paraistanas Water/Cail	Develotoment Air
Ingredient	Persistence: Water/Soil	Persistence: Air
phenol, styrenated	HIGH	HIGH
cocoamine	LOW	LOW
trimethylhexamethylene diamine	HIGH	HIGH
2,4,6- tris[(dimethylamino)methyl]phenol	HIGH	HIGH

#### Bioaccumulative potential

Ingredient	Bioaccumulation
phenol, styrenated	LOW (LogKOW = 7.0554)
cocoamine	HIGH (LogKOW = 5.7458)
trimethylhexamethylene diamine	LOW (LogKOW = 1.6347)
2,4,6- tris[(dimethylamino)methyl]phenol	LOW (LogKOW = 0.773)

#### Mobility in soil

Ingredient	Mobility
phenol, styrenated	LOW (KOC = 2622000)
cocoamine	LOW (KOC = 27640)
trimethylhexamethylene diamine	LOW (KOC = 1101)
2,4,6- tris[(dimethylamino)methyl]phenol	LOW (KOC = 15130)

#### **SECTION 13 DISPOSAL CONSIDERATIONS**

#### Waste treatment methods

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

#### Otherwise:

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- ▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product.

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

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

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

#### Product / Packaging disposal

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

- ▶ DO NOT allow wash water from cleaning or process equipment to enter drains.
- It may be necessary to collect all wash water for treatment before disposal.
- ▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- ▶ Where in doubt contact the responsible authority.
- ► Recycle wherever possible.
- 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.
- ▶ Treat and neutralise at an approved treatment plant.
- Treatment should involve: Neutralisation with suitable dilute acid followed 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.

## **SECTION 14 TRANSPORT INFORMATION**

#### **Labels Required**



Limited quantity: 832FX-450ML, 832FX-1.7L

### Land transport (ADG)

UN number	2735
ON Humber	2700
UN proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S. (contains bis(2-aminopropyl ether) propoxylated and trimethylhexamethylene diamine)
Transport hazard class(es)	Class 8 Subrisk Not Applicable
Packing group	II .
Environmental hazard	Environmentally hazardous
Special precautions for user	Special provisions 274 Limited quantity 1 L

## Air transport (ICAO-IATA / DGR)

UN number	2735			
UN proper shipping name	Amines, liquid, corrosive, n.o.s. * (contains bis(2-aminopropyl ether) propoxylated and trimethylhexamethylene diamine); Polyamines, liquid, corrosive, n.o.s. * (contains bis(2-aminopropyl ether) propoxylated and trimethylhexamethylene diamine)			
	ICAO/IATA Class	8		
Transport hazard class(es)	ICAO / IATA Subrisk	Not Applicable		
	ERG Code	8L		
Packing group	II			
Environmental hazard	Environmentally hazardous			
	Special provisions		A3 A803	
	Cargo Only Packing Instructions		855	
	Cargo Only Maximum Qty / Pack		30 L	
Special precautions for user	Passenger and Cargo Packing Instructions		851	
	Passenger and Cargo Maximum Qty / Pack		1 L	
	Passenger and Cargo	Limited Quantity Packing Instructions	Y840	
	Passenger and Cargo Limited Maximum Qty / Pack		0.5 L	

#### Sea transport (IMDG-Code / GGVSee)

UN number	2735
UN proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S. (contains bis(2-aminopropyl ether) propoxylated and trimethylhexamethylene diamine)
Transport hazard class(es)	IMDG Class 8 IMDG Subrisk Not Applicable
Packing group	П
Environmental hazard	Marine Pollutant
Special precautions for user	EMS Number F-A , S-B Special provisions 274 Limited Quantities 1 L

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

Not Applicable

## **SECTION 15 REGULATORY INFORMATION**

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

### BIS(2-AMINOPROPYL ETHER) PROPOXYLATED IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Inventory of Chemical Substances (AICS)

### PHENOL, STYRENATED IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

# COCOAMINE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 10 / Appendix C

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

#### TRIMETHYLHEXAMETHYLENE DIAMINE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Inventory of Chemical Substances (AICS)

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

### 2,4,6-TRIS[(DIMETHYLAMINO)METHYL]PHENOL IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 2

## **National Inventory Status**

National Inventory	Status
Australia - AICS	Yes
Canada - DSL	Yes
Canada - NDSL	No (phenol, styrenated; bis(2-aminopropyl ether) propoxylated; 2,4,6-tris[(dimethylamino)methyl]phenol; trimethylhexamethylene diamine)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	No (bis(2-aminopropyl ether) propoxylated)

Japan - ENCS	Yes		
Korea - KECI	Yes		
New Zealand - NZIoC	Yes		
Philippines - PICCS	Yes		
USA - TSCA	Yes		
Taiwan - TCSI	Yes		
Mexico - INSQ	No (phenol, styrenated; cocoamine)		
Vietnam - NCI	Yes		
Russia - ARIPS	No (phenol, styrenated)		
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)		

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

Revision Date	12/05/2020
Initial Date	30/03/2016

#### **SDS Version Summary**

Version	Issue Date	Sections Updated
2.6.1.1.1	04/03/2020	Classification, Physical Properties

#### Other information

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

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

#### **Definitions and abbreviations**

PC-TWA: Permissible Concentration-Time Weighted Average

PC-STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists

STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit。

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