



## ERAPOL CCM75A PART A

Era Polymers Pty Ltd

Chemwatch Hazard Alert Code: 2

Version No: 1.1

Safety Data Sheet according to WHS and ADG requirements

Issue Date: 03/11/2014

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S.GHS.AUS.EN

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

#### Product Identifier

Product name	ERAPOL CCM75A PART A
Synonyms	Not Available
Other means of identification	Not Available

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

Relevant identified uses	Polyurethane prepolymer
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#### Details of the supplier of the safety data sheet

Registered company name	Era Polymers Pty Ltd
Address	25-27 Green Street 2019 NSW Australia
Telephone	+61 (0)2 9666 3788
Fax	+61 (0)2 9666 4805
Website	www.erapol.com.au
Email	erapol@erapol.com.au

#### Emergency telephone number

Association / Organisation	CHEMWATCH
Emergency telephone numbers	Not Available
Other emergency telephone numbers	Not Available

#### CHEMWATCH EMERGENCY RESPONSE

Primary Number	Alternative Number 1	Alternative Number 2
1800 039 008	+612 9186 1132	Not Available

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

### SECTION 2 HAZARDS IDENTIFICATION

#### Classification of the substance or mixture

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

Poisons Schedule	S6
GHS Classification <sup>[1]</sup>	Acute Toxicity (Inhalation) Category 4, Respiratory Sensitizer Category 1B
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

#### Label elements

GHS label elements	
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SIGNAL WORD **DANGER**

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## ERAPOL CCM75A PART A

## Hazard statement(s)

H332	Harmful if inhaled
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled

## Precautionary statement(s) Prevention

P101	If medical advice is needed, have product container or label at hand.
P102	Keep out of reach of children.
P103	Read label before use.
P261	Avoid breathing dust/fume/gas/mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.

## Precautionary statement(s) Response

P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER or doctor/physician.
P312	Call a POISON CENTER or doctor/physician if you feel unwell.

## Precautionary statement(s) Storage

Not Applicable

## Precautionary statement(s) Disposal

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

## Substances

See section below for composition of Mixtures

## Mixtures

CAS No	%[weight]	Name
Not Available	>99	Polyurethane prepolymer
584-84-9	<1	<u>toluene-2,4-diisocyanate</u>
26471-62-5	<1	<u>toluene diisocyanate</u>

## SECTION 4 FIRST AID MEASURES

## Description of first aid measures

Eye Contact	<p>If this product comes in contact with eyes:</p> <ul style="list-style-type: none"> <li>▶ Wash out immediately with water.</li> <li>▶ If irritation continues, seek medical attention.</li> <li>▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
Skin Contact	<p>If skin or hair contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Flush skin and hair with running water (and soap if available).</li> <li>▶ Seek medical attention in event of irritation.</li> </ul>
Inhalation	<ul style="list-style-type: none"> <li>▶ If fumes or combustion products are inhaled remove from contaminated area.</li> <li>▶ Lay patient down. Keep warm and rested.</li> <li>▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>▶ Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary.</li> <li>▶ Transport to hospital, or doctor.</li> </ul> <p>Following uptake by inhalation, move person to an area free from risk of further exposure. Oxygen or artificial respiration should be administered as needed. Asthmatic-type symptoms may develop and may be immediate or delayed up to several hours. Treatment is essentially symptomatic. A physician should be consulted.</p>
Ingestion	<ul style="list-style-type: none"> <li>▶ Immediately give a glass of water.</li> <li>▶ First aid is not generally required. If in doubt, contact a Poisons Information Centre or a doctor.</li> </ul>

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

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

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

## SECTION 5 FIREFIGHTING MEASURES

## Extinguishing media

- ▶ Foam.
- ▶ Dry chemical powder.
- ▶ BCF (where regulations permit).
- ▶ Carbon dioxide.

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- ▶ Water spray or fog - Large fires only.

## Special hazards arising from the substrate or mixture

<b>Fire Incompatibility</b>	None known.
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## Advice for firefighters

<b>Fire Fighting</b>	<ul style="list-style-type: none"> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear breathing apparatus plus protective gloves in the event of a fire.</li> <li>▶ Prevent, by any means available, spillage from entering drains or water courses.</li> <li>▶ Use fire fighting procedures suitable for surrounding area.</li> <li>▶ <b>DO NOT</b> approach containers suspected to be hot.</li> </ul>
<b>Fire/Explosion Hazard</b>	<ul style="list-style-type: none"> <li>▶ Non combustible.</li> <li>▶ Not considered a significant fire risk, however containers may burn. May emit poisonous fumes.</li> </ul>

## SECTION 6 ACCIDENTAL RELEASE MEASURES

## Personal precautions, protective equipment and emergency procedures

<b>Minor Spills</b>	<ul style="list-style-type: none"> <li>▶ Clean up all spills immediately.</li> <li>▶ Avoid breathing vapours and contact with skin and eyes.</li> <li>▶ Control personal contact with the substance, by using protective equipment.</li> <li>▶ Contain and absorb spill with sand, earth, inert material or vermiculite.</li> <li>▶ Wipe up.</li> </ul>
<b>Major Spills</b>	<p>Moderate hazard.</p> <ul style="list-style-type: none"> <li>▶ Clear area of personnel and move upwind.</li> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear breathing apparatus plus protective gloves.</li> <li>▶ Prevent, by any means available, spillage from entering drains or water course.</li> </ul>

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

## SECTION 7 HANDLING AND STORAGE

## Precautions for safe handling

<b>Safe handling</b>	<ul style="list-style-type: none"> <li>▶ Avoid all personal contact, including inhalation.</li> <li>▶ Wear protective clothing when risk of exposure occurs.</li> <li>▶ Use in a well-ventilated area.</li> <li>▶ Prevent concentration in hollows and sumps.</li> <li>▶ <b>DO NOT enter confined spaces until atmosphere has been checked.</b></li> </ul>
<b>Other information</b>	

## Conditions for safe storage, including any incompatibilities

<b>Suitable container</b>	<ul style="list-style-type: none"> <li>▶ Polyethylene or polypropylene container.</li> <li>▶ Packing as recommended by manufacturer.</li> <li>▶ Check all containers are clearly labelled and free from leaks.</li> </ul>
<b>Storage incompatibility</b>	<p>None known</p> <ul style="list-style-type: none"> <li>▶ <b>NOTE:</b> May develop pressure in containers; open carefully. Vent periodically.</li> <li>▶ Segregate from alcohol, water.</li> </ul>

## SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

## Control parameters

## OCCUPATIONAL EXPOSURE LIMITS (OEL)

## INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	toluene-2,4-diisocyanate	Toluene-2,4-diisocyanate (TDI)	Not Available	Not Available	Not Available	Not Available
Australia Exposure Standards	toluene diisocyanate	Toluene-2,4-diisocyanate (TDI)	Not Available	Not Available	Not Available	Not Available

## EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
toluene-2,4-diisocyanate	Toluene diisocyanate (mixed isomers)	0.045 ppm	0.43 ppm	0.43 ppm
toluene-2,4-diisocyanate	Toluene-2,4-diisocyanate; (TDI)	Not Available	Not Available	Not Available
toluene diisocyanate	Toluene diisocyanate (mixed isomers)	0.045 ppm	0.43 ppm	0.43 ppm
toluene diisocyanate	Toluene-2,4-diisocyanate; (TDI)	Not Available	Not Available	Not Available
toluene diisocyanate	Toluene-2,6-diisocyanate	Not Available	Not Available	Not Available


Ingredient	Original IDLH	Revised IDLH
Polyurethane prepolymer	Not Available	Not Available
toluene-2,4-diisocyanate	Not Available	Not Available

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toluene diisocyanate	Not Available	Not Available
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## Exposure controls

<b>Appropriate engineering controls</b>	<p>Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.</p> <p>The basic types of engineering controls are:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly.</p>
<b>Personal protection</b>	
<b>Eye and face protection</b>	<ul style="list-style-type: none"> <li>▶ Safety glasses with side shields</li> <li>▶ Chemical goggles.</li> <li>▶ 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.</li> </ul>
<b>Skin protection</b>	See Hand protection below
<b>Hands/feet protection</b>	<p>The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.</p> <p>The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.</p> <p>Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:</p> <ul style="list-style-type: none"> <li>▶ frequency and duration of contact,</li> <li>▶ chemical resistance of glove material,</li> <li>▶ glove thickness and</li> <li>▶ dexterity</li> </ul> <p>Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).</p> <ul style="list-style-type: none"> <li>▶ Wear chemical protective gloves, e.g. PVC.</li> <li>▶ Wear safety footwear or safety gumboots, e.g. Rubber</li> </ul>
<b>Body protection</b>	See Other protection below
<b>Other protection</b>	<ul style="list-style-type: none"> <li>▶ Overalls.</li> <li>▶ P.V.C. apron.</li> <li>▶ Barrier cream.</li> <li>▶ Skin cleansing cream.</li> </ul>
<b>Thermal hazards</b>	Not Available

## Respiratory protection

Not Available

## SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

## Information on basic physical and chemical properties

<b>Appearance</b>	AMBER		
<b>Physical state</b>	Liquid	<b>Relative density (Water = 1)</b>	1.02
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol / water</b>	Not Available
<b>Odour threshold</b>	Not Available	<b>Auto-ignition temperature (°C)</b>	Not Available
<b>pH (as supplied)</b>	Not Available	<b>Decomposition temperature</b>	Not Available
<b>Melting point / freezing point (°C)</b>	Not Available	<b>Viscosity (cSt)</b>	Not Available
<b>Initial boiling point and boiling range (°C)</b>	Not Available	<b>Molecular weight (g/mol)</b>	Not Available
<b>Flash point (°C)</b>	Not Available	<b>Taste</b>	Not Available
<b>Evaporation rate</b>	Not Available	<b>Explosive properties</b>	Not Available
<b>Flammability</b>	Not Available	<b>Oxidising properties</b>	Not Available
<b>Upper Explosive Limit (%)</b>	Not Available	<b>Surface Tension (dyn/cm or mN/m)</b>	Not Available
<b>Lower Explosive Limit (%)</b>	Not Available	<b>Volatile Component (%vol)</b>	Not Available
<b>Vapour pressure (kPa)</b>	Not Available	<b>Gas group</b>	Not Available
<b>Solubility in water (g/L)</b>	Reacts	<b>pH as a solution (1%)</b>	Not Available
<b>Vapour density (Air = 1)</b>	Not Available	<b>VOC g/L</b>	Not Available

## SECTION 10 STABILITY AND REACTIVITY

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<b>Reactivity</b>	See section 7
<b>Chemical stability</b>	<ul style="list-style-type: none"> <li>▶ Unstable in the presence of incompatible materials.</li> <li>▶ Product is considered stable.</li> <li>▶ Hazardous polymerisation will not occur.</li> </ul>
<b>Possibility of hazardous reactions</b>	See section 7
<b>Conditions to avoid</b>	See section 7
<b>Incompatible materials</b>	See section 7
<b>Hazardous decomposition products</b>	See section 5

## SECTION 11 TOXICOLOGICAL INFORMATION

## Information on toxicological effects

<b>Inhaled</b>	Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful. The material is not thought to produce respiratory irritation (as classified by EC Directives using animal models). Nevertheless inhalation of vapours, fumes or aerosols, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress.
<b>Ingestion</b>	The material is not thought to produce adverse health effects following ingestion (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum.
<b>Skin Contact</b>	<p>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.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.</p>
<b>Eye</b>	Although the liquid is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may produce transient discomfort characterised by tearing or conjunctival redness (as with windburn).
<b>Chronic</b>	Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. With most allergens, removal of the offending material results in resolution of symptoms. Asthma caused by toluene diisocyanate (TDI) continues for months or even years after exposure ceases.

<b>ERAPOL CCM75A PART A</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	Not Available	Not Available
<b>toluene-2,4-diisocyanate</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	dermal (rat) LD50: >2000 mg/kg <sup>[1]</sup>	Eye (rabbit): 100 mg - SEVERE
	Inhalation (rat) LC50: 14 ppm/4H <sup>[2]</sup>	Skin (rabbit): 500 ppm(open)-SEVERE
	Oral (rat) LD50: >2000 mg/kg <sup>[1]</sup>	Skin (rabbit):500 mg/24hr-moderate
<b>toluene diisocyanate</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	Dermal (rabbit) LD50: >12100 mg/kg <sup>[2]</sup>	Not Available
	Inhalation (mouse) LC50: 14.1 ppm6 h <sup>[1]</sup>	
	Inhalation (mouse) LC50: 19 ppm6 h <sup>[1]</sup>	
	Oral (rat) LD50: >2000 mg/kg <sup>[1]</sup>	
<b>Legend:</b>	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	

<b>TOLUENE-2,4-DIISOCYANATE</b>	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important.</p> <p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-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.</p> <p>Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other irritants may aggravate symptoms. Allergy causing activity is due to interactions with proteins.</p> <p>Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema.</p> <p>Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure.</p> <p>The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p>
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	<p>The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.</p> <p>Aromatic and aliphatic diisocyanates may cause airway toxicity and skin sensitization. Monomers and prepolymers exhibit similar respiratory effect. Of the several members of diisocyanates tested on experimental animals by inhalation and oral exposure, some caused cancer while others produced a harmless outcome. This group of compounds has therefore been classified as cancer-causing.</p> <p>Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, gasping, severe distress, even loss of consciousness and fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance, euphoria, inco-ordination, anxiety, depression and paranoia.</p> <p><b>WARNING:</b> This substance has been classified by the IARC as Group 2B: Possibly Carcinogenic to Humans. Tenth Annual Report on Carcinogens: Substance anticipated to be Carcinogen [National Toxicology Program: U.S. Dep. of Health &amp; Human Services 2002]</p>
<b>TOLUENE DIISOCYANATE</b>	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important.</p> <p>Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-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.</p> <p>Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other irritants may aggravate symptoms. Allergy causing activity is due to interactions with proteins.</p> <p>Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema.</p> <p>Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure.</p> <p>The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.</p> <p>Aromatic and aliphatic diisocyanates may cause airway toxicity and skin sensitization. Monomers and prepolymers exhibit similar respiratory effect. Of the several members of diisocyanates tested on experimental animals by inhalation and oral exposure, some caused cancer while others produced a harmless outcome. This group of compounds has therefore been classified as cancer-causing.</p> <p>Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, gasping, severe distress, even loss of consciousness and fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance, euphoria, inco-ordination, anxiety, depression and paranoia.</p>

<b>Acute Toxicity</b>	✓	<b>Carcinogenicity</b>	⊗
<b>Skin Irritation/Corrosion</b>	⊗	<b>Reproductivity</b>	⊗
<b>Serious Eye Damage/Irritation</b>	⊗	<b>STOT - Single Exposure</b>	⊗
<b>Respiratory or Skin sensitisation</b>	✓	<b>STOT - Repeated Exposure</b>	⊗
<b>Mutagenicity</b>	⊗	<b>Aspiration Hazard</b>	⊗

Legend: ✗ – Data available but does not fill the criteria for classification  
✓ – Data required to make classification available  
⊗ – Data Not Available to make classification

## SECTION 12 ECOLOGICAL INFORMATION

## Toxicity

Ingredient	Endpoint	Test Duration (hr)	Species	Value	Source
toluene-2,4-diisocyanate	LC50	96	Fish	>0.100mg/L	6
toluene-2,4-diisocyanate	EC50	48	Crustacea	12.5mg/L	2
toluene-2,4-diisocyanate	EC50	504	Crustacea	2mg/L	2
toluene-2,4-diisocyanate	NOEC	504	Crustacea	0.5mg/L	2
toluene-2,4-diisocyanate	EC50	96	Algae or other aquatic plants	3230mg/L	2
toluene diisocyanate	LC50	96	Fish	ca.0.4mg/L	2
toluene diisocyanate	EC50	48	Crustacea	12.5mg/L	2
toluene diisocyanate	EC50	504	Crustacea	>=0.5mg/L	2
toluene diisocyanate	NOEC	504	Crustacea	0.5mg/L	2
toluene diisocyanate	EC50	96	Algae or other aquatic plants	3230mg/L	2

## Legend:

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

**DO NOT** discharge into sewer or waterways.

## Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
Polyurethane prepolymer	LOW	LOW
toluene-2,4-diisocyanate	HIGH	HIGH

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toluene diisocyanate	LOW (Half-life = 1 days)	LOW (Half-life = 0.13 days)
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**Bioaccumulative potential**

Ingredient	Bioaccumulation
Polyurethane prepolymer	LOW (LogKOW = -0.2174)
toluene-2,4-diisocyanate	LOW (BCF = 5)
toluene diisocyanate	LOW (BCF = 5)

**Mobility in soil**

Ingredient	Mobility
Polyurethane prepolymer	HIGH (KOC = 1)
toluene-2,4-diisocyanate	LOW (KOC = 9114)
toluene diisocyanate	LOW (KOC = 9114)

**SECTION 13 DISPOSAL CONSIDERATIONS****Waste treatment methods**

<b>Product / Packaging disposal</b>	<ul style="list-style-type: none"> <li>▶ Containers may still present a chemical hazard/ danger when empty.</li> <li>▶ Return to supplier for reuse/ recycling if possible.</li> </ul> <p>Otherwise:</p> <ul style="list-style-type: none"> <li>▶ 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.</li> <li>▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product.</li> </ul> <p>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.</p> <p>A Hierarchy of Controls seems to be common - the user should investigate:</p> <ul style="list-style-type: none"> <li>▶ Reduction</li> <li>▶ Reuse</li> <li>▶ Recycling</li> <li>▶ Disposal (if all else fails)</li> </ul> <p>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.</p> <ul style="list-style-type: none"> <li>▶ <b>DO NOT allow wash water from cleaning or process equipment to enter drains.</b></li> <li>▶ It may be necessary to collect all wash water for treatment before disposal.</li> <li>▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.</li> <li>▶ Where in doubt contact the responsible authority.</li> <li>▶ Recycle wherever possible.</li> <li>▶ 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.</li> <li>▶ Dispose of by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or incineration in a licenced apparatus (after admixture with suitable combustible material).</li> <li>▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.</li> </ul>
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**SECTION 14 TRANSPORT INFORMATION****Labels Required**

<b>Marine Pollutant</b>	NO
<b>HAZCHEM</b>	Not Applicable

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

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

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

**Transport in bulk according to Annex II of MARPOL 73 / 78 and the IBC code**

Source	Ingredient	Pollution Category
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	toluene-2,4-diisocyanate	Y
IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk	toluene diisocyanate	Y

**SECTION 15 REGULATORY INFORMATION****Safety, health and environmental regulations / legislation specific for the substance or mixture****TOLUENE-2,4-DIISOCYANATE(584-84-9) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Exposure Standards	Australia Inventory of Chemical Substances (AICS)
Australia Hazardous Substances Information System - Consolidated Lists	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

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**TOLUENE DIISOCYANATE(26471-62-5) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Exposure Standards	Australia Inventory of Chemical Substances (AICS)
Australia Hazardous Substances Information System - Consolidated Lists	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

National Inventory	Status
Australia - AICS	Y
Canada - DSL	Y
Canada - NDSL	N (toluene diisocyanate; toluene-2,4-diisocyanate)
China - IECSC	Y
Europe - EINEC / ELINCS / NLP	Y
Japan - ENCS	Y
Korea - KECI	Y
New Zealand - NZIoC	Y
Philippines - PICCS	Y
USA - TSCA	Y
<b>Legend:</b>	Y = All ingredients are on the inventory N = Not determined or one or more ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

**SECTION 16 OTHER INFORMATION****Other information****Ingredients with multiple cas numbers**

Name	CAS No
toluene diisocyanate	26471-62-5, 584-84-9, 91-08-7

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.

A list of reference resources used to assist the committee may be found at:  
[www.chemwatch.net](http://www.chemwatch.net)

The (M)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