

# ERAPOL EMD90A ISOCYANATE

Era Polymers Pty Ltd

Chemwatch Hazard Alert Code: 2

Chemwatch: 9-53255

Version No: 1.1

Safety Data Sheet according to WHS and ADG requirements

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Initial Date: **Not Available**  
S.GHS.AUS.EN

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

### Product Identifier

Product name	ERAPOL EMD90A ISOCYANATE
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	Not Applicable
Chemical formula	Not Applicable
Other means of identification	Not Available
CAS number	Not Applicable

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

Relevant identified uses	Use according to manufacturer's directions. 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 Model WHS Regulations and the ADG Code.

Poisons Schedule	S6
GHS Classification <sup>[1]</sup>	Skin Corrosion/Irritation Category 2, Eye Irrit. 2, Respiratory Sensitizer Category 1, Skin Sensitizer Category 1, Carcinogen Category 2, STOT - SE (Resp. Irr.) Category 3, STOT - RE Category 2
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI

### Label elements

GHS label elements	
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SIGNAL WORD **DANGER****Hazard statement(s)**

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

**Precautionary statement(s): Prevention**

<b>P101</b>	If medical advice is needed, have product container or label at hand.
<b>P102</b>	Keep out of reach of children.
<b>P103</b>	Read label before use.
<b>P201</b>	Obtain special instructions before use.
<b>P260</b>	Do not breathe dust/fume/gas/mist/vapours/spray.
<b>P271</b>	Use only outdoors or in a well-ventilated area.
<b>P280</b>	Wear protective gloves/protective clothing/eye protection/face protection.
<b>P284</b>	[In case of inadequate ventilation] wear respiratory protection.

**Precautionary statement(s): Response**

<b>P304+P340</b>	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
<b>P308+P313</b>	IF exposed or concerned: Get medical advice/attention.
<b>P321</b>	Specific treatment (see advice on this label).
<b>P342+P311</b>	If experiencing respiratory symptoms: Call a POISON CENTER/doctor/physician/first aider
<b>P302+P352</b>	IF ON SKIN: Wash with plenty of water and soap

**Precautionary statement(s): Storage**

<b>P405</b>	Store locked up.
<b>P403+P233</b>	Store in a well-ventilated place. Keep container tightly closed.

**Precautionary statement(s): Disposal**

<b>P501</b>	Dispose of contents/container to authorised chemical landfill or if organic to high temperature incineration
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**SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS****Substances**

See section below for composition of Mixtures

**Mixtures**

CAS No	%[weight]	Name
101-68-8	<25	<a href="#">4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)</a>
Not Available	>60	Polyurethane prepolymer

**SECTION 4 FIRST AID MEASURES****Description of first aid measures**

<b>Eye Contact</b>	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> <li>▶ Wash out immediately with fresh running water.</li> <li>▶ 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.</li> <li>▶ Seek medical attention without delay; if pain persists or recurs seek medical attention.</li> <li>▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul>
<b>Skin Contact</b>	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Immediately remove all contaminated clothing, including footwear.</li> <li>▶ Flush skin and hair with running water (and soap if available).</li> <li>▶ Seek medical attention in event of irritation.</li> </ul>
<b>Inhalation</b>	<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, without delay.</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</p>

	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.
<b>Ingestion</b>	<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

	<p>Treat symptomatically.</p> <p>For sub-chronic and chronic exposures to isocyanates:</p> <ul style="list-style-type: none"> <li>▶ This material may be a potent pulmonary sensitiser which causes bronchospasm even in patients without prior airway hyperreactivity.</li> <li>▶ Clinical symptoms of exposure involve mucosal irritation of respiratory and gastrointestinal tracts.</li> <li>▶ Conjunctival irritation, skin inflammation (erythema, pain vesiculation) and gastrointestinal disturbances occur soon after exposure.</li> <li>▶ Pulmonary symptoms include cough, burning, substernal pain and dyspnoea.</li> <li>▶ Some cross-sensitivity occurs between different isocyanates.</li> <li>▶ Noncardiogenic pulmonary oedema and bronchospasm are the most serious consequences of exposure. Markedly symptomatic patients should receive oxygen, ventilatory support and an intravenous line.</li> <li>▶ Treatment for asthma includes inhaled sympathomimetics (epinephrine [adrenalin], terbutaline) and steroids.</li> <li>▶ Activated charcoal (1 g/kg) and a cathartic (sorbitol, magnesium citrate) may be useful for ingestion.</li> <li>▶ Mydriatics, systemic analgesics and topical antibiotics (Sulamyd) may be used for corneal abrasions.</li> <li>▶ There is no effective therapy for sensitised workers.</li> </ul> <p style="text-align: right;">[Ellenhorn and Barceloux; Medical Toxicology]</p> <p><b>NOTE:</b> Isocyanates cause airway restriction in naive individuals with the degree of response dependant on the concentration and duration of exposure. They induce smooth muscle contraction which leads to bronchoconstrictive episodes. Acute changes in lung function, such as decreased FEV1, may not represent sensitivity.</p> <p>[Karol &amp; Jin, Frontiers in Molecular Toxicology, pp 56-61, 1992]</p> <p>Personnel who work with isocyanates, isocyanate prepolymers or polyisocyanates should have a pre-placement medical examination and periodic examinations thereafter, including a pulmonary function test. Anyone with a medical history of chronic respiratory disease, asthmatic or bronchial attacks, indications of allergic responses, recurrent eczema or sensitisation conditions of the skin should not handle or work with isocyanates. Anyone who develops chronic respiratory distress when working with isocyanates should be removed from exposure and examined by a physician. Further exposure must be avoided if a sensitivity to isocyanates or polyisocyanates has developed.</p>
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## SECTION 5 FIREFIGHTING MEASURES

### Extinguishing media

	<ul style="list-style-type: none"> <li>▶ Foam.</li> <li>▶ Dry chemical powder.</li> <li>▶ BCF (where regulations permit).</li> <li>▶ Carbon dioxide.</li> <li>▶ Water spray or fog - Large fires only.</li> </ul>
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### Special hazards arising from the substrate or mixture

<b>Fire Incompatibility</b>	▶ Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result
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### Advice for firefighters

<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 full body protective clothing with breathing apparatus.</li> <li>▶ Prevent, by any means available, spillage from entering drains or water course.</li> <li>▶ Use water delivered as a fine spray to control fire and cool adjacent area.</li> <li>▶ Avoid spraying water onto liquid pools.</li> </ul>
<b>Fire/Explosion Hazard</b>	<ul style="list-style-type: none"> <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> </ul>

## SECTION 6 ACCIDENTAL RELEASE MEASURES

### Personal precautions, protective equipment and emergency procedures

<b>Minor Spills</b>	<ul style="list-style-type: none"> <li>▶ Remove all ignition sources.</li> <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> </ul>
<b>Major Spills</b>	<ul style="list-style-type: none"> <li>▶ Avoid contamination with water, alkalies and detergent solutions.</li> <li>▶ Material reacts with water and generates gas, pressurises containers with even drum rupture resulting.</li> <li>▶ <b>DO NOT reseal container if contamination is suspected.</b></li> <li>▶ Open all containers with care.</li> </ul> <p>For isocyanate spills of less than 40 litres (2 m<sup>2</sup>):</p> <ul style="list-style-type: none"> <li>▶ Evacuate area from everybody not dealing with the emergency, keep them upwind and prevent further access, remove ignition sources and, if inside building, ventilate area as well as possible.</li> </ul>
	Personal Protective Equipment advice is contained in Section 8 of the MSDS.

## SECTION 7 HANDLING AND STORAGE

### Precautions for safe handling

<b>Safe handling</b>	<ul style="list-style-type: none"> <li>▶ <b>DO NOT allow clothing wet with material to stay in contact with skin</b></li> <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>	<p>for commercial quantities of isocyanates:</p> <ul style="list-style-type: none"> <li>▶ Isocyanates should be stored in adequately banded areas. Nothing else should be kept within the same banding. Pre-polymers need not be segregated. Drums of isocyanates should be stored under cover, out of direct sunlight, protected from rain, protected from physical damage and well away from moisture, acids and alkalis.</li> <li>▶ Where isocyanates are stored at elevated temperatures to prevent solidifying, adequate controls should be installed to prevent the high temperatures and precautions against fire should be taken.</li> </ul>

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

<b>Suitable container</b>	<ul style="list-style-type: none"> <li>▶ Metal can or drum</li> <li>▶ Packaging as recommended by manufacturer.</li> <li>▶ Check all containers are clearly labelled and free from leaks.</li> </ul>
<b>Storage incompatibility</b>	<ul style="list-style-type: none"> <li>▶ Avoid reaction with oxidising agents</li> <li>▶ <b>NOTE:</b> May develop pressure in containers; open carefully. Vent periodically.</li> <li>▶ Segregate from alcohol, water.</li> </ul>

**PACKAGE MATERIAL INCOMPATIBILITIES**

Not Available

**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	4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Isocyanates, all (as-NCO)	0.02 (mg/m3)	0.07 (mg/m3)	Not Available	Not Available

**EMERGENCY LIMITS**

Ingredient	TEEL-0	TEEL-1	TEEL-2	TEEL-3
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	0.05 / 5(ppm)	0.2 / 15(ppm)	25 / 2(ppm)	25 / 125(ppm)

Ingredient	Original IDLH	Revised IDLH
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	100(mgm3)	75(mgm3)

**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. 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>	<p>Safety glasses with side shields.</p> <p>Chemical goggles.</p> <p>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.</p>
<b>Skin protection</b>	See Hand protection below
<b>Hand protection</b>	<p><b>NOTE:</b></p> <ul style="list-style-type: none"> <li>▶ 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.</li> <li>▶ Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.</li> </ul> <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>
<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> </ul>

	▶ Skin cleansing cream.
<b>Thermal hazards</b>	Not Available

**Recommended material(s)****GLOVE SELECTION INDEX**

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the *computer-generated* selection:

ERAPOL EMD90A ISOCYANATE Not Available

Material	CPI
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\* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

**Respiratory protection**

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

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

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A-AUS P2	-	A-PAPR-AUS / Class 1 P2
up to 50 x ES	-	A-AUS / Class 1 P2	-
up to 100 x ES	-	A-2 P2	A-PAPR-2 P2 ^

^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO<sub>2</sub>), G = Agricultural chemicals, K = Ammonia(NH<sub>3</sub>), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

**SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES****Information on basic physical and chemical properties**

<b>Appearance</b>	Milky white translucent liquid
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<b>Physical state</b>	Liquid	<b>Relative density (Water = 1)</b>	1.05
<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**

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

Inhaled	Evidence shows, or practical experience predicts, that the material produces irritation of the respiratory system, in a substantial number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system. The material has <b>NOT</b> been classified by EC Directives or other classification systems as "harmful by inhalation".
Ingestion	The material has <b>NOT</b> been classified by EC Directives or other classification systems as "harmful by ingestion". This is because of the lack of corroborating animal or human evidence. The material may still be damaging to the health of the individual, following ingestion, especially where pre-existing organ (e.g liver, kidney) damage is evident. Present definitions of harmful or toxic substances are generally based on doses producing mortality rather than those producing morbidity (disease, ill-health). Gastrointestinal tract discomfort may produce nausea and vomiting.
Skin Contact	Evidence exists, or practical experience predicts, that the material either produces inflammation of the skin in a substantial number of individuals following direct contact, and/or produces significant inflammation when applied to the healthy intact skin of animals, for up to four hours, such inflammation being present twenty-four hours or more after the end of the exposure period. Skin irritation may also be present after prolonged or repeated exposure; this may result in a form of contact dermatitis (nonallergic). The dermatitis is often characterised by skin redness (erythema) and swelling (oedema) which may progress to blistering (vesiculation), scaling and thickening of the epidermis. At the microscopic level there may be intercellular oedema of the spongy layer of the skin (spongiosis) and intracellular oedema of the epidermis. The material may accentuate any pre-existing dermatitis condition Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.
Eye	Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.
Chronic	On the basis, primarily, of animal experiments, concern has been expressed that the material may produce carcinogenic or mutagenic effects; in respect of the available information, however, there presently exists inadequate data for making a satisfactory assessment. Long-term exposure to respiratory irritants may result in disease of the airways involving difficult breathing and related systemic problems. Practical evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a substantial number of individuals at a greater frequency than would be expected from the response of a normal population. Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases.

ERAPOL EMD90A ISOCYANATE	TOXICITY	IRRITATION
	Not Available	Not Available
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >6200 mg/kg *	[* = Bayer CCINFO 2133615]
	Inhalation (Rat) LC50: 178 mg/m3	Dermal Sensitiser *
	Oral (mouse) LD50: 2200 mg/kg	Respiratory Sensitiser (g.pig) *
	Oral (Rat) LD50: 9200 mg/kg	Skin (rabbit): 500 mg /24 hours
	Not Available	Not Available

ERAPOL EMD90A ISOCYANATE	Allergic reactions which develop in the respiratory passages as bronchial asthma or rhinoconjunctivitis, are mostly the result of reactions of the allergen with specific antibodies of the IgE class and belong in their reaction rates to the manifestation of the immediate type. In addition to the allergen-specific potential for causing respiratory sensitisation, the amount of the allergen, the exposure period and the genetically determined disposition of the exposed person are likely to be decisive. Factors which increase the sensitivity of the mucosa may play a role in predisposing a person to allergy. They may be genetically determined or acquired, for example, during infections or exposure to irritant substances. Immunologically the low molecular weight substances become complete allergens in the organism either by binding to peptides or proteins (haptens) or after metabolism (prohaptens).
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. Inhalation (human) TClO: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate

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

## CMR STATUS

**CARCINOGEN**

4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)

Australia Exposure Standards - Carcinogens

Carc. 2

**SECTION 12 ECOLOGICAL INFORMATION****Toxicity****DO NOT** discharge into sewer or waterways.**Persistence and degradability**

Ingredient	Persistence: Water/Soil	Persistence: Air
Not Available	Not Available	Not Available

**Bioaccumulative potential**

Ingredient	Bioaccumulation
Not Available	Not Available

**Mobility in soil**

Ingredient	Mobility
Not Available	Not Available

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

Product / Packaging disposal	Disposal instructions
	<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> Otherwise: <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 MSDS and observe all notices pertaining to the product.</li> </ul> Legislation addressing waste disposal requirements may differ by country, state and/ or territory.

**SECTION 14 TRANSPORT INFORMATION****Labels Required**

Marine Pollutant	NO
HAZCHEM	Not Applicable

**Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS****Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS****Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS****SECTION 15 REGULATORY INFORMATION****Safety, health and environmental regulations / legislation specific for the substance or mixture**

<b>4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)(101-68-8) is found on the following regulatory lists</b>	"Australia Hazardous Substances Information System - Consolidated Lists","OECD Existing Chemicals Database","GESAMP/EHS Composite List - GESAMP Hazard Profiles","IMO IBC Code Chapter 17: Summary of minimum requirements","International Air Transport Association (IATA) Dangerous Goods Regulations","FisherTransport Information","Sigma-AldrichTransport Information","Australia National Pollutant Inventory","International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs","Australia Inventory of Chemical Substances (AICS)","OECD List of High Production Volume (HPV) Chemicals","Australia High Volume Industrial Chemical List (HVICL)","IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk","Australia - Victoria Occupational Health and Safety Regulations - Schedule 9: Materials at Major Hazard Facilities (And Their Threshold Quantity) Table 2","Australia Occupational Health and Safety (Commonwealth Employment) (National Standards) Regulations 1994 - Hazardous Substances Requiring Health Surveillance","Australia - Tasmania Hazardous Substances Requiring Health Surveillance","Australia - Western Australia Hazardous Substances Requiring Health Surveillance","Australia - New South Wales Hazardous Substances Requiring Health Surveillance","Australia Work Health and Safety Regulations 2011 - Hazardous chemicals (other than lead) requiring health monitoring","Australia - Tasmania - Work Health and Safety Regulations 2012 - Requirements for Health Monitoring - Hazardous chemicals (other than lead) requiring health monitoring","Australia - South Australia - Work Health and Safety Regulations 2012 - Requirements for health monitoring - Hazardous chemicals (other than lead) requiring health monitoring","Australia - New South Wales - Work Health and Safety Regulation 2011 - Requirements for health monitoring -Hazardous chemicals (other than lead) requiring health monitoring","Australia Exposure Standards","Australia - Northern Territories Work Health and Safety National Uniform Legislation Regulations- Requirements for health monitoring - Hazardous chemicals (other than lead) requiring health monitoring","Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6","Australia Hazardous Substances Requiring Health Surveillance","Australia - Queensland Work Health and Safety Regulation - Hazardous chemicals (other than lead) requiring health monitoring","Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix F (Part 3)","Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)"
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**SECTION 16 OTHER INFORMATION****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.

A list of reference resources used to assist the committee may be found at:

[www.chemwatch.net/references](http://www.chemwatch.net/references)

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.

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