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LEAK STOP

Outback (M)SDS portal: http://jr.chemwatch.net/outb/account /autologin?login=wilhelmsen

Part Number: 630384 Issue Date: 31/07/2017 Version No: 6.26 Print Date: 29/01/2022 Safety Data Sheet (Conforms to Annex II of REACH (1907/2006) - Regulation 2020/878)

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

1.1. Product Identifier

Product name	LEAK STOP
Chemical Name	Not Applicable
Synonyms	Product Part Number: 630384, Leak Stop I, 50 x 1200 mm 606006, Leak Stop II, 50 x 3600 mm 630384 Leakstop I, 606006 Leakstop II, 630392, Leak Stop III, POLYMER KIT-ALFA
Chemical formula	Not Applicable
Other means of identification	630384, 1056603, 606006, 630392, 659300

1.2. Relevant identified uses of the substance or mixture and uses advised against

Chemical Product Category	PC32 Polymer preparations and compounds				
Sectors of Use	SU3 Industrial uses: Uses of substances as such or in preparations* at industrial sites				
Relevant identified uses	INTEGRITY CHECK: Product contains BOTH an acid and a base as ingredients.				
Uses advised against	Not Applicable				

1.3. Details of the supplier of the safety data sheet

Registered company name	Outback (M)SDS portal: http://jr.chemwatch.net/outb/account /autologin?login=wilhelmsen		Wilhelmsen Ships Service AS* Central Warehouse	
Address	Use our Outback portal to obtain our (M)SDSs in other languages and/or format For questions relating to our SDSs please use Email: WSS.GLOBAL.SDSINFO@wilhelmsen.com Norway	Willem Barentszstraat 50 Rotterdam Netherlands	Willem Barentszstraat 50 Rotterdam Netherlands	
Telephone	Not Available	+31 10 4877 777	+31 10 4877 777	
Fax	Fax Not Available		Not Available	
Website	http://www.wilhelmsen.com	http://www.wilhelmsen.com	http://www.wilhelmsen.com	
Email	Email wss.global.sdsinfo@wilhelmsen.com		wss.rotterdam@wilhelmsen.com	

1.4. Emergency telephone number

Association / Organisation	24hrs - Chemtrec	Dutch nat. poison centre	Dutch nat. poison centre
Emergency telephone numbers	+31-10-4877700	+ 31 88 7558561	+ 31 30 274 88 88

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Other emergency telephone numbers

+1 800 424 9300

+ 31 10 4877700

+ 31-10-4877700

SECTION 2 Hazards identification

2.1. Classification of the substance or mixture

Classification according to
regulation (EC) No
1272/2008 [CLP] and
amendments [1]

H302 - Acute Toxicity (Oral) Category 4, H315 - Skin Corrosion/Irritation Category 2, H334 - Sensitisation (Respiratory) Category 1, H317 - Sensitisation (Skin) Category 1, H335 - Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3

Legend:

1. Classified by Chemwatch; 2. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

2.2. Label elements

Hazard pictogram(s)





Signal word

Danger

Hazard statement(s)

H302	armful if swallowed.		
H315	uses skin irritation.		
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.		
H317	May cause an allergic skin reaction.		
H335 May cause respiratory irritation.			

Supplementary statement(s)

Not Applicable

Precautionary statement(s) General

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

Precautionary statement(s) Prevention

P261	Avoid breathing dust/fumes.		
P280	ear protective gloves/protective clothing/eye protection/face protection.		
P284	[In case of inadequate ventilation] wear respiratory protection.		
P270	Do not eat, drink or smoke when using this product.		
P272	Contaminated work clothing should not be allowed out of the workplace.		

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.		
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER/doctor/physician/first aider.		
P302+P352	ON SKIN: Wash with plenty of water and soap.		
P362+P364	Take off contaminated clothing and wash it before reuse.		
P301+P312	IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider/if you feel unwell.		
P330	Rinse mouth.		

Precautionary statement(s) Storage

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

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Precautionary statement(s) Disposal

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

2.3. Other hazards

4,4'-diphenylmethane diisocyanate (MDI)	Listed in the Europe Regulation (EC) No 1907/2006 - Annex XVII (Restrictions may apply)		
octamethylcyclotetrasiloxane	sted in the European Chemicals Agency (ECHA) Candidate List of Substances of Very High Concern for Authorisation		
octamethylcyclotetrasiloxane	Listed in the Europe Regulation (EC) No 1907/2006 - Annex XVII (Restrictions may apply)		
octamethylcyclotetrasiloxane	Listed in the Europe Regulation (EU) 2018/1881 Specific Requirements for Endocrine Disruptors		

SECTION 3 Composition / information on ingredients

3.1.Substances

See 'Composition on ingredients' in Section 3.2

3.2.Mixtures

1.CAS No 2.EC No 3.Index No 4.REACH No	%[weight]	Name	Classification according to regulation (EC) No 1272/2008 [CLP] and amendments	SCL / M-Factor	Nanoform Particle Characteristics
Not Available	16-27	Non-classified ingredients	Not Applicable	Not Applicable	Not Available
1.26447-40-5 2.247-714-0 3.615-005-00-9 4.Not Available	13-21	4,4'-diphenylmethane diisocyanate (MDI)	Acute Toxicity (Inhalation) Category 4, Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2, Sensitisation (Skin) Category 1, Sensitisation (Respiratory) Category 1, Carcinogenicity Category 2, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Repeated Exposure Category 2; H332, H315, H319, H317, H334, H351, H335, H373 [2]	Eye Irrit. 2; H319: C ≥ 5 % Skin Irrit. 2; H315: C ≥ 5 % Resp. Sens. 1; H334: C ≥ 0,1 % STOT SE 3; H335: C ≥ 5 %	Not Available
1.39310-05-9 2.Not Available 3.Not Available 4.Not Available	5-9	MDI prepolymer	Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2, Sensitisation (Skin) Category 1, Sensitisation (Respiratory) Category 1, Carcinogenicity Category 2, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Specific Target Organ Toxicity - Repeated Exposure Category 2; H315, H319, H317, H334, H351, H335, H373, EUH204 [1]	Not Available	Not Available
1.556-67-2 2.209-136-7 3.014-018-00-1 4.Not Available	<2	octamethylcyclotetrasiloxane [e]	Reproductive Toxicity Category 2, Hazardous to the Aquatic Environment Long-Term Hazard Category 4; H361f, H413 ^[2]	Not Available	Not Available
1.6425-39-4 2.229-194-7 3.Not Available 4.Not Available	<2	2,2'-dimorpholinodiethyl ether	Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 2, Serious Eye Damage/Eye Irritation Category 2, Sensitisation (Skin) Category 1; H302, H315, H319, H317 [1]	Not Available	Not Available
1.6683-19-8 2.229-722-6 3.Not Available 4.Not Available	<1	pentaerythritol tetrabutylhydroxyhydrocinnamate	Not Applicable	Not Available	Not Available

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1.CAS No 2.EC No 3.Index No 4.REACH No		%[weight]	Name	Classification according to regulation (EC) No 1272/2008 [CLP] and amendments	SCL / M-Factor	Nanoform Particle Characteristics
1.75-75-2 2.200-898-6 3.607-145-00-4 4.Not Available		<1	methanesulfonic acid	Skin Corrosion/Irritation Category 1B; H314 ^[2]	Not Available	Not Available
1.65997-17-3* 2.266-046-0 3.Not Available 4.Not Available		44-46	glass fibres	Not Applicable	Not Available	Not Available
	Legend:		•	n from Regulation (EU) No 1272/2008 - ied as having endocrine disrupting prope		ification drawn from

SECTION 4 First aid measures

4.1. Description of first aid measures

Eye Contact	► Generally not applicable.
Skin Contact	If skin contact occurs: Immediately remove all contaminated clothing, including footwear. Flush skin and hair with running water (and soap if available). Seek medical attention in event of irritation. Generally not applicable.
Inhalation	 If fumes or combustion products are inhaled remove from contaminated area. Lay patient down. Keep warm and rested. Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures. Apply artificial respiration if not breathing, preferably with a demand valve resuscitator, bag-valve mask device, or pocket mask as trained. Perform CPR if necessary. Transport to hospital, or doctor, without delay. 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. Generally not applicable.
Ingestion	 ▶ IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. ▶ For advice, contact a Poisons Information Centre or a doctor. ▶ Urgent hospital treatment is likely to be needed. ▶ In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. ▶ If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the SDS should be provided. Further action will be the responsibility of the medical specialist. ▶ If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the SDS. Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise: ▶ INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. NOTE: Wear a protective glove when inducing vomiting by mechanical means.

4.2 Most important symptoms and effects, both acute and delayed

See Section 11

4.3. Indication of any immediate medical attention and special treatment needed

For sub-chronic and chronic exposures to isocyanates:

- * This material may be a potent pulmonary sensitiser which causes bronchospasm even in patients without prior airway hyperreactivity.
- ▶ Clinical symptoms of exposure involve mucosal irritation of respiratory and gastrointestinal tracts.
- ▶ Conjunctival irritation, skin inflammation (erythema, pain vesiculation) and gastrointestinal disturbances occur soon after exposure.
- Pulmonary symptoms include cough, burning, substernal pain and dyspnoea.
- ▶ Some cross-sensitivity occurs between different isocyanates.
- P Noncardiogenic pulmonary oedema and bronchospasm are the most serious consequences of exposure. Markedly symptomatic patients should receive oxygen, ventilatory support and an intravenous line.

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- Treatment for asthma includes inhaled sympathomimetics (epinephrine [adrenalin], terbutaline) and steroids.
- Activated charcoal (1 g/kg) and a cathartic (sorbitol, magnesium citrate) may be useful for ingestion.
- Mydriatics, systemic analgesics and topical antibiotics (Sulamyd) may be used for corneal abrasions.
- There is no effective therapy for sensitised workers.

[Ellenhorn and Barceloux: Medical Toxicology]

NOTE: Isocyanates cause airway restriction in naive individuals with the degree of response dependant on the concentration and duration of exposure. They induce smooth muscle contraction which leads to bronchoconstrictive episodes. Acute changes in lung function, such as decreased FEV1, may not represent

[Karol & Jin, Frontiers in Molecular Toxicology, pp 56-61, 1992]

Personnel who work with isocyanates, isocyanate prepolymers or polyisocyanates should have a pre-placement medical examination and periodic examinations thereafter, including a pulmonary function test. Anyone with a medical history of chronic respiratory disease, asthmatic or bronchial attacks, indications of allergic responses, recurrent eczema or sensitisation conditions of the skin should not handle or work with isocyanates. Anyone who develops chronic respiratory distress when working with isocyanates should be removed from exposure and examined by a physician. Further exposure must be avoided if a sensitivity to isocyanates or polvisocvanates has developed.

SECTION 5 Firefighting measures

5.1. Extinguishing media

- Small quantities of water in contact with hot liquid may react violently with generation of a large volume of rapidly expanding hot sticky semi-solid foam.
- Presents additional hazard when fire fighting in a confined space.
- Cooling with flooding quantities of water reduces this risk.
- Water spray or fog may cause frothing and should be used in large quantities.
- Foam.
- Dry chemical powder.
- BCF (where regulations permit).
- Carbon dioxide.
- Water spray or fog Large fires only.

5.2. 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

5.3. Advice for firefighters

Fire Fighting

- ▶ Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- ▶ Prevent, by any means available, spillage from entering drains or water courses.
- Use water delivered as a fine spray to control fire and cool adjacent area.
- ▶ DO NOT approach containers suspected to be hot.
- Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.

Slight hazard when exposed to heat, flame and oxidisers.

- Combustible.
- Moderate fire hazard when exposed to heat or flame.
- When heated to high temperatures decomposes rapidly generating vapour which pressures and may then rupture containers with release of flammable and highly toxic isocyanate vapour.
- Burns with acrid black smoke and poisonous fumes.
- Due to reaction with water producing CO2-gas, a hazardous build-up of pressure could result if contaminated containers are re-sealed
- Combustion yields traces of highly toxic hydrogen cyanide HCN, plus toxic nitrogen oxides NOx and carbon monoxide. Combustion products include:

Fire/Explosion Hazard

carbon monoxide (CO)

carbon dioxide (CO2)

isocyanates

hydrogen cyanide

and minor amounts of

nitrogen oxides (NOx)

other pyrolysis products typical of burning organic material.

May emit corrosive fumes.

Articles and manufactured articles may constitute a fire hazard where polymers form their outer layers or where combustible packaging remains in place.

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Certain substances, found throughout their construction, may degrade or become volatile when heated to high temperatures. This may create a secondary hazard.

SECTION 6 Accidental release measures

6.1. Personal precautions, protective equipment and emergency procedures

See section 8

6.2. Environmental precautions

See section 12

6.3. Methods and material for containment and cleaning up Clean up all spills immediately. Secure load if safe to do so. Minor Spills ► Bundle/collect recoverable product. Collect remaining material in containers with covers for disposal. Clear area of personnel and move upwind. Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Stop leak if safe to do so. ▶ Contain spill with sand, earth or vermiculite. ▶ Collect recoverable product into labelled containers for recycling. For isocyanate spills of less than 40 litres (2 m2): F 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. Notify supervision and others as necessary. Put on personal protective equipment (suitable respiratory protection, face and eye protection, protective suit, gloves and impermeable boots). ▶ Control source of leakage (where applicable). ▶ Dike the spill to prevent spreading and to contain additions of decontaminating solution. Prevent the material from entering drains. ▶ Estimate spill pool volume or area. **Major Spills** Avoid contamination with water, alkalies and detergent solutions. Material reacts with water and generates gas, pressurises containers with even drum rupture resulting. DO NOT reseal container if contamination is suspected. Open all containers with care. Minor hazard. Clear area of personnel. Alert Fire Brigade and tell them location and nature of hazard. ▶ Control personal contact with the substance, by using protective equipment as required. Prevent spillage from entering drains or water ways. ► Contain spill with sand, earth or vermiculite. ▶ Collect recoverable product into labelled containers for recycling. Clean up all spills immediately. ▶ Wear protective clothing, safety glasses, dust mask, gloves. Secure load if safe to do so. Bundle/collect recoverable product. Use dry clean up procedures and avoid generating dust.

6.4. Reference to other sections

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

Water may be used to prevent dusting.

SECTION 7 Handling and storage

7.1. Precautions for safe	handling
Safe handling	 Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. Prevent concentration in hollows and sumps. DO NOT enter confined spaces until atmosphere has been checked. DO NOT allow material to contact humans, exposed food or food utensils. Avoid contact with incompatible materials.
Fire and explosion protection	See section 5

▶ Vacuum up (consider explosion-proof machines designed to be grounded during storage and use).

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Other information

Store away from incompatible materials.

7.2. Conditions for safe storage, including any incompatibilities

Suitable container

Generally packaging as originally supplied with the article or manufactured item is sufficient to protect against physical hazards. If repackaging is required ensure the article is intact and does not show signs of wear. As far as is practicably possible, reuse the original packaging or something providing a similar level of protection to both the article and the handler.

Storage incompatibility

· Avoid reaction with water, alcohols and detergent solutions. Isocyanates are electrophiles, and as such they are reactive toward a variety of nucleophiles including alcohols, amines, and even water. Upon treatment with an alcohol, an isocyanate forms a urethane linkage. If a di-isocyanate is treated with a compound containing two or more hydroxyl groups, such as a diol or a polyol, polymer chains are formed, which are known as polyurethanes. Reaction between a di-isocyanate and a compound containing two or more amine groups, produces long polymer chains known as polyureas.

· Isocyanates and thioisocyanates are incompatible with many classes of compounds, reacting exothermically to release toxic gases. Reactions with amines, strong bases, aldehydes, alcohols, alkali metals, ketones, mercaptans, strong oxidisers, hydrides, phenols, and peroxides can cause vigorous releases of heat.

- ▶ A range of exothermic decomposition energies for isocyanates is given as 20-30 kJ/mol.
- ▶ The relationship between energy of decomposition and processing hazards has been the subject of discussion; it is suggested that values of energy released per unit of mass, rather than on a molar basis (J/g) be used in the assessment.
- For example, in "open vessel processes" (with man-hole size openings, in an industrial setting), substances with exothermic decomposition energies below 500 J/g are unlikely to present a danger, whilst those in "closed vessel processes" (opening is a safety valve or bursting disk) present some danger where the decomposition energy exceeds 150 J/g.

BRETHERICK: Handbook of Reactive Chemical Hazards, 4th Edition















- Must not be stored together
- May be stored together with specific preventions
- May be stored together

Note: Depending on other risk factors, compatibility assessment based on the table above may not be relevant to storage situations, particularly where large volumes of dangerous goods are stored and handled. Reference should be made to the Safety Data Sheets for each substance or article and risks assessed accordingly.

7.3. Specific end use(s)

See section 1.2

SECTION 8 Exposure controls / personal protection

8.1. Control parameters

Ingredient	DNELs Exposure Pattern Worker	PNECs Compartment
4,4'-diphenylmethane diisocyanate (MDI)	Inhalation 0.05 mg/m³ (Local, Chronic) Inhalation 0.1 mg/m³ (Local, Acute) Inhalation 0.025 mg/m³ (Local, Chronic) * Inhalation 0.05 mg/m³ (Local, Acute) *	1 mg/L (Water (Fresh)) 0.1 mg/L (Water - Intermittent release) 10 mg/L (Water (Marine)) 1 mg/kg soil dw (Soil) 1 mg/L (STP)
octamethylcyclotetrasiloxane	Inhalation 73 mg/m³ (Systemic, Chronic) Inhalation 73 mg/m³ (Local, Chronic) Inhalation 13 mg/m³ (Systemic, Chronic) * Oral 3.7 mg/kg bw/day (Systemic, Chronic) * Inhalation 13 mg/m³ (Local, Chronic) *	1.5 µg/L (Water (Fresh)) 0.15 µg/L (Water - Intermittent release) 3 mg/kg sediment dw (Sediment (Fresh Water)) 0.3 mg/kg sediment dw (Sediment (Marine)) 0.54 mg/kg soil dw (Soil) 10 mg/L (STP) 41 mg/kg food (Oral)
2,2'-dimorpholinodiethyl ether	Dermal 1 mg/kg bw/day (Systemic, Chronic) Inhalation 7.28 mg/m³ (Systemic, Chronic) Dermal 0.5 mg/kg bw/day (Systemic, Chronic) * Inhalation 1.8 mg/m³ (Systemic, Chronic) * Oral 0.5 mg/kg bw/day (Systemic, Chronic) *	0.1 mg/L (Water (Fresh)) 0.01 mg/L (Water - Intermittent release) 1 mg/L (Water (Marine)) 8.2 mg/kg sediment dw (Sediment (Fresh Water)) 0.82 mg/kg sediment dw (Sediment (Marine)) 1.58 mg/kg soil dw (Soil) 100 mg/L (STP) 10 mg/kg food (Oral)
pentaerythritol tetrabutylhydroxyhydrocinnamate	Dermal 89.2 mg/kg bw/day (Systemic, Chronic) Inhalation 10 mg/m³ (Systemic, Chronic) Dermal 44.6 mg/kg bw/day (Systemic, Chronic) * Inhalation 7.7 mg/m³ (Systemic, Chronic) * Oral 4.6 mg/kg bw/day (Systemic, Chronic) *	Not Available

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Ingredient	DNELs Exposure Pattern Worker	PNECs Compartment		
	Dermal 19.44 mg/kg bw/day (Systemic, Chronic)	0.012 mg/L (Water (Fresh))		
	Inhalation 6.76 mg/m³ (Systemic, Chronic)	0.001 mg/L (Water - Intermittent release)		
	Inhalation 0.7 mg/m³ (Local, Chronic)	0.12 mg/L (Water (Marine))		
methanesulfonic acid	Dermal 8.33 mg/kg bw/day (Systemic, Chronic) *	0.044 mg/kg sediment dw (Sediment (Fresh Water))		
	Inhalation 1.44 mg/m³ (Systemic, Chronic) *	0.004 mg/kg sediment dw (Sediment (Marine))		
	Oral 8.33 mg/kg bw/day (Systemic, Chronic) *	0.002 mg/kg soil dw (Soil)		
	Inhalation 0.42 mg/m³ (Local, Chronic) *	100 mg/L (STP)		
		6.5 µg/L (Water (Fresh))		
		3.4 µg/L (Water - Intermittent release)		
		174 mg/kg sediment dw (Sediment (Fresh Water))		
glass fibres	Not Available	164 mg/kg sediment dw (Sediment (Marine))		
		147 mg/kg soil dw (Soil)		
		100 μg/L (STP)		
		10.9 mg/kg food (Oral)		

^{*} Values for General Population

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Europe ECHA Occupational exposure limits - Activity list	4,4'-diphenylmethane diisocyanate (MDI)	Not Available	Not Available	Not Available	Not Available	Not Available
UK Workplace Exposure Limits (WELs)	4,4'-diphenylmethane diisocyanate (MDI)	Isocyanates, all (as -NCO) Except methyl isocyanate	0.02 mg/m3	0.07 mg/m3	Not Available	Sen

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
4,4'-diphenylmethane diisocyanate (MDI)	0.45 mg/m3	Not Available	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	29 mg/m3	40 mg/m3	240 mg/m3
octamethylcyclotetrasiloxane	30 ppm	68 ppm	130 ppm
methanesulfonic acid	0.99 mg/m3	11 mg/m3	65 mg/m3
glass fibres	15 mg/m3	170 mg/m3	990 mg/m3

Ingredient	Original IDLH	Revised IDLH
4,4'-diphenylmethane diisocyanate (MDI)	75 mg/m3	Not Available
MDI prepolymer	Not Available	Not Available
octamethylcyclotetrasiloxane	Not Available	Not Available
2,2'-dimorpholinodiethyl ether	Not Available	Not Available
pentaerythritol tetrabutylhydroxyhydrocinnamate	Not Available	Not Available
methanesulfonic acid	Not Available	Not Available
glass fibres	Not Available	Not Available

Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit	
MDI prepolymer	prepolymer E ≤ 0.1 ppm		
octamethylcyclotetrasiloxane	Е	≤ 0.1 ppm	
2,2'-dimorpholinodiethyl ether	Е	≤ 0.1 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

for isocyanates:

Some jurisdictions require that health surveillance be conducted on occupationally exposed workers. This should emphasise:

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- b demography, occupational and medical history and health advice
- completion of a standardised respiratory questionnaire
- physical examination of the respiratory system and skin
- standardised respiratory function tests such as FEV1, FVC and FEV1/FVC

Various portable or stationary instruments are available for the continuous measurement of isocyanates in the air. All of them function on the principle of colourimetric evaluation of an indicator paper strip. They are operating continuously and unattended. Paper tape systems are easy to use and do not require skilled analysts to operate them. They give rapid results and are therefore suitable for leak detection and in emergency situations. However,:

- they may read incorrect at very high or very low humidity,
- are unsuitable for aerosols
- and may not be accepted for purposes of regulatory compliance.

8.2. Exposure controls

Articles or manufactured items, in their original condition, generally don't require engineering controls during handling or in

Exceptions may arise following extensive use and subsequent wear, during recycling or disposal operations where substances, found in the article, may be released to the environment.

8.2.1. Appropriate engineering 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.

8.2.2. Personal protection









No special equipment required due to the physical form of the product.

- Safety glasses with side shields.
- Chemical goggles.

Eye and face protection

 Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable.

Skin protection

See Hand protection below

Wear general protective gloves, eg. light weight rubber gloves.

Hands/feet protection

- 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.
- Isocyanate resistant materials include Teflon, Viton, nitrile rubber and some PVA gloves.
- Protective gloves and overalls should be worn as specified in the appropriate national standard.
- Contaminated garments should be removed promptly and should not be re-used until they have been decontaminated.
- ▶ NOTE: Natural rubber, neoprene, PVC can be affected by isocyanates

Body protection

See Other protection below

Other protection

- Overalls.
- P.V.C apron.
- Barrier cream.
- Skin cleansing cream.
- ► Eye wash unit.

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

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

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Material	СРІ
NEOPRENE	С
PE/EVAL/PE	С

Respiratory protection

Respiratory protection not normally required due to the physical form of the product.

С

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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.

8.2.3. Environmental exposure controls

See section 12

SECTION 9 Physical and chemical properties

9.1. Information on basic physical and chemical properties

Appearance	Knitted tape, black, insoluble in water		
Physical state	Manufactured	Relative density (Water = 1)	1.13
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available
pH (as supplied)	Not Applicable	Decomposition temperature	>200
Melting point / freezing point (°C)	<15	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	>200	Molecular weight (g/mol)	Not Available
Flash point (°C)	218	Taste	Not Available
Evaporation rate	Not Available BuAC = 1	Explosive properties	Not Available
Flammability	Not Applicable	Oxidising properties	Not Available
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Applicable
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	Not Available	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (Not Available%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available
Nanoform Solubility	Not Available	Nanoform Particle Characteristics	Not Available
Particle Size	Not Available		

9.2. Other information

Not Available

SECTION 10 Stability and reactivity

10.1.Reactivity	See section 7.2	
10.2. Chemical stability	roduct is considered stable and hazardous polymerisation will not occur.	
10.3. Possibility of hazardous reactions	See section 7.2	
10.4. Conditions to avoid	See section 7.2	
10.5. Incompatible materials	See section 7.2	

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10.6. Hazardous decomposition products

See section 5.3

SECTION 11 Toxicological information

11.1. 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 vapour/mist may be highly irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis and pulmonary oedema. Possible neurological symptoms arising from isocyanate exposure include headache, insomnia, euphoria, ataxia, anxiety neurosis, depression and paranoia. Gastrointestinal disturbances are characterised by nausea and vomiting. Pulmonary sensitisation may produce asthmatic reactions ranging from minor breathing difficulties to severe allergic attacks; this may occur following a single acute exposure or may develop without warning for several hours after exposure. Sensitized people can react to very low doses, and should not be allowed to work in situations allowing exposure to this material. Continued exposure of sensitised persons may lead to possible long term respiratory impairment. Inhalation hazard is increased at higher temperatures.

Ingestion

Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual.

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

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.

Eye

Although the material 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).

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. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking. 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.

Substances that can cause occupational asthma (also known as asthmagens and respiratory sensitisers) can induce a state of specific airway hyper-responsiveness via an immunological, irritant or other mechanism. Once the airways have become hyper-responsive, further exposure to the substance, sometimes even to tiny quantities, may cause respiratory symptoms. These symptoms can range in severity from a runny nose to asthma. Not all workers who are exposed to a sensitiser will become hyper-responsive and it is impossible to identify in advance who are likely to become hyper-responsive.

Substances than can cuase occupational asthma should be distinguished from substances which may trigger the symptoms of asthma in people with pre-existing air-way hyper-responsiveness. The latter substances are not classified as asthmagens or respiratory sensitisers

Wherever it is reasonably practicable, exposure to substances that can cuase occupational asthma should be prevented.

Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

Persons with a history of asthma or other respiratory problems or are known to be sensitised, should not be engaged in any work involving the handling of isocyanates.

The chemistry of reaction of isocyanates, as evidenced by MDI, in biological milieu is such that in the event of a true exposure of small MDI doses to the mouth, reactions will commence at once with biological macromolecules in the buccal region and will continue along the digestive tract prior to reaching the stomach. Reaction products will be a variety of polyureas and macromolecular conjugates with for example mucus, proteins and cell components.

This is corroborated by the results from an MDI inhalation study. Following an inhalation exposure of rats to radiolabelled MDI, 79% of the dose was excreted in faeces. The faecal excretion in these animals was considered entirely due to ingestion of radioactivity from grooming and ingestion of deposited material from the nasopharangeal region via the mucociliary escalator, i.e. not following systemic absorption. The faecal radioactivity was tentatively identified as mixed molecular weight polyureas derived from MDI.

Cyclotetrasiloxanes are oestrogen-like substances which may produce reproductive effects and may be carcinogenic at high

Chronic

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levels of exposure.

On the weight of evidence an important effect of octamethylcyclotetrasiloxane (OMCT) exposure is impaired fertility. The liver as a target organ for OMCT exposures. The critical effect level for repeated-dose toxicity via inhalation is considered to be 420 mg/m3, based not only on increased liver weights, but also on effects observed in other organs (adrenals, thymus, lungs) in a three-month rat inhalation study. Comparison of the critical effect level for repeated dose effects via inhalation (420 mg/m3) and the conservative upper-bounding exposure estimate via inhalation for OMCT results in an adequate margin of exposure. The critical effect level for repeated-dose toxicity via the oral route is considered to be 100 mg/kg-bw/day, based on decreased serum oestradiol in 7-day mouse studies and decreased body-weights and relative liver weights in foetuses in 8-day rat studies (OMCT administered to pregnant females). Comparison of the critical effect level for repeated dose effects via the oral route (100 mg/kgbw/day) and the upper-bounding estimate of daily intake of OMCT by the general population results in an adequate margin of

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.

Isocyanate vapours/mists are irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis with wheezing, gasping and severe distress, even sudden loss of consciousness, and pulmonary oedema. Possible neurological symptoms arising from isocyanate exposure include headache, insomnia, euphoria, ataxia, anxiety neurosis, depression and paranoia. Gastrointestinal disturbances are characterised by nausea and vomiting. Pulmonary sensitisation may produce asthmatic reactions ranging from minor breathing difficulties to severe allergic attacks; this may occur following a single acute exposure or may develop without warning after a period of tolerance. A respiratory response may occur following minor skin contact. Skin sensitisation is possible and may result in allergic dermatitis responses including rash, itching, hives and swelling of extremities.

Isocyanate-containing vapours/ mists may cause inflammation of eyes and nasal passages.

L FAIX OTOD	TOXICITY	IRRITATION
LEAK STOP	Not Available	Not Available
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >6200 mg/kg ^[2]	Dermal Sensitiser *
4,4'-diphenylmethane diisocyanate (MDI)	Inhalation(Rat) LC50; 0.368 mg/L4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
a	Oral (Rat) LD50; >2000 mg/kg ^[1]	Skin (rabbit): 500 mg /24 hours
		Skin: adverse effect observed (irritating) ^[1]
	TOXICITY	IRRITATION
MDI prepolymer	Dermal (rabbit) LD50: >10000 mg/kg ^[2]	Not Available
	Oral (Rat) LD50; >10000 mg/kg ^[2]	
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 754.3 mg/kg ^[2]	Eye (rabbit): 500 mg/24h - mild
	Inhalation(Rat) LC50; 36 mg/l4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
octamethylcyclotetrasiloxane	Oral (Rat) LD50; 1540 mg/kg ^[2]	Skin (rabbit): 500 mg/24h - mild
		Skin: adverse effect observed (irritating) ^[1]
		Skin: no adverse effect observed (not irritating) ^[1]
	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: 746.24 mg/kg ^[1]	Eye (rabbit): irritant OECD 405
2,2'-dimorpholinodiethyl ether	Oral (Rat) LD50; >2000 mg/kg ^[1]	Eye: adverse effect observed (irritating) ^[1]
		Skin (rabbit): irritant OECD 404
		Skin: no adverse effect observed (not irritating) ^[1]
	TOXICITY	IRRITATION
	dermal (rat) LD50: 3160 mg/kg ^[2]	Eye: no adverse effect observed (not irritating) ^[1]
pentaerythritol tetrabutylhydroxyhydrocinnamate	Inhalation(Rat) LC50; >1.95 mg/l4h ^[2]	Eye: non-irritating **
totrabatymyaroxymyaroommamato	Oral (Rat) LD50; >2000 mg/kg ^[2]	Skin: no adverse effect observed (not irritating) ^[1]
		Skin: non-irritating **
	TOXICITY	IRRITATION
methanesulfonic acid	Dermal (rabbit) LD50: >1000 mg/kg ^[1]	Not Available
	Oral (Rat) LD50; 200 mg/kg ^[2]	

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LEAK STOP

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glass fibres

TOXICITY	IRRITATION
Oral (Rat) LD50; >2000 mg/kg ^[1]	Not Available

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

4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)

Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate

MDI PREPOLYMER

as MDI product Inhalation LC50: 11000 mg/m3 as MDI oligomer

OCTAMETHYLCYCLOTETRASILOXANE

Result: negative Remarks: Based on test data Test Type: Chromosome aberration test in vitro Result: negative Remarks: Based on test data Test Type: In vitro sister chromatid exchange assay in mammalian cells Result: negative Remarks: Based on test data Test Type: DNA damage and repair, unscheduled DNA synthesis in mammalian cells (in vitro) Result: negative Remarks: Based on test data Genotoxicity in vivo: Test Type: Mammalian erythrocyte micronucleus test (in vivo cytogenetic assay) Species: Rat Application Route: inhalation (vapor) Result: negative Remarks: Based on test data Test Type: Rodent dominant lethal test (germ cell) (in vivo) Species: Rat Application Route: Ingestion Result: negative Remarks: Based on test data Germ cell mutagenicity - Assessment : Animal testing did not show any mutagenic effects Effects on fertility : Test Type: Two-generation reproduction toxicity study Species: Rat, male and female Application Route: inhalation (vapor) Symptoms: Effects on fertility. Remarks: Based on test data Effects on fetal development : Test Type: Prenatal development toxicity study (teratogenicity) Species: Rabbit Application Route: inhalation (vapor) Symptoms: No effects on fetal development. Remarks: Based on test data Reproductive toxicity - Assessment : Some evidence of adverse effects on sexual function and fertility, based on animal experiments. STOT-single exposure May cause damage to organs (Eyes, Central nervous system Routes of exposure: Ingestion Assessment: No significant health effects observed in animals at concentrations of 100 mg/kg bw or less. Routes of exposure: inhalation (vapor) Assessment: No significant health effects observed in animals at concentrations of 1 mg/l/6h/d or less. Routes of exposure: Skin contact Assessment: No significant health effects observed in animals at concentrations of 200 mg/kg bw or less. Results from a 2 year repeated vapor inhalation exposure study to rats of octamethylcyclotetrasiloxane (D4) indicate effects (benign uterine adenomas) in the uterus of female animals. This finding occurred at the highest exposure dose (700 ppm) only. Studies to date have not demonstrated if these effects occur through pathways that are relevant to humans. Repeated exposure in rats to D4 resulted in protoporphyrin accumulation in the liver. Without knowledge of the specific mechanism leading to the protoporphyrin accumulation the relevance of this finding to humans is unknown

Does not cause skin sensitization Genotoxicity in vitro: Test Type: Bacterial reverse mutation assay (AMES) Result: negative Remarks: Based on test data Test Type: Mutagenicity (in vitro mammalian cytogenetic test)

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 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.

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:

2,2'-DIMORPHOLINODIETHYL ETHER

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 studies.

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

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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. No experimental evidence available for genotoxicity in vitro (Ames test negative). *BASF

PENTAERYTHRITOL

TETRABUTYLHYDROXYHYDROCINNAMATE

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. 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-butyl-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. Non-sensitising in Guinea pig skin assay ** * CG ** Clariant

wheezing, laryngitis, shortness of breath, headache, nausea, and a burning sensation.

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,

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).

METHANESULFONIC ACID

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 produce severe skin irritation after prolonged or repeated exposure, and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) thickening of the epidermis.

Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis. Prolonged contact is unlikely, given the severity of response, but repeated exposures may produce severe ulceration.

The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. For fibre glass wool: In October 2001, IARC classified fiber glass wool as Group 3, "not classifiable as to its carcinogenicity to humans." The 2001 decision was based on current human and animal research that shows no association between inhalation exposure to dust from fibre glass wool and the development of respiratory disease. This is a reversal of the IARC finding in 1987 of a Group 2B designation (possibly carcinogenic to humans) based on earlier studies in which animals were injected with large quantities of fiber glass. NTP and ACGIH have not yet reviewed the IARC reclassification or the most current fibre

glass health research; at this time, both agencies continue to classify glass wool based on the earlier animal

glass fibres

There is little evidence for acute toxicity after inhalation of rockwool/ slagwool/ glasswool mineral fibres (MMMF). Rockwool/glasswool administered by inhalation produced little pulmonary fibrosis in experimental animals, [IARC Monograph 43]

Animal studies with amorphous silica show that surviving rats rapidly recovered on removal from dust, the silica was largely eliminated and cellular nodules, perivascular infiltrations and emphysema were almost completely resolved [Patty's].

The dust has been associated with skin irritation due to the mechanical action of the fibres [CHEMINFO, Sax, ILO ENCYCLOPEDIA].

MMMF are manufactured to definite diameters and cannot split along their length rather they break across and form small particles not needles [FARIMA].

The dust has been associated with skin irritation due to the mechanical action of the fibres [CHEMINFO, Sax, ILO ENCYCLOPAEDIA]. MMMF are manufactured to definite fibre diameters and cannot split along their length rather they break across and form small particles not needles [FARIMA].

LEAK STOP & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI PREPOLYMER & METHANESULFONIC ACID & glass fibres

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.

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LEAK STOP & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI PREPOLYMER

Allergic reactions which develop in the respiratory passages as bronchial asthma or rhinoconjunctivitis, are mostly the result of reactions of the allergen with specific antibodies of the IgE class and belong in their reaction rates to the manifestation of the immediate type. In addition to the allergen-specific potential for causing respiratory sensitisation, the amount of the allergen, the exposure period and the genetically determined disposition of the exposed person are likely to be decisive. Factors which increase the sensitivity of the mucosa may play a role in predisposing a person to allergy. They may be genetically determined or acquired, for example, during infections or exposure to irritant substances. Immunologically the low molecular weight substances become complete allergens in the organism either by binding to peptides or proteins (haptens) or after metabolism (prohaptens).

Particular attention is drawn to so-called atopic diathesis which is characterised by an increased susceptibility to allergic rhinitis, allergic bronchial asthma and atopic eczema (neurodermatitis) which is associated with increased IgE synthesis.

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.

LEAK STOP & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI PREPOLYMER & 2,2'-DIMORPHOLINODIETHYL ETHER

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

Isocyanate vapours/mists are irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis with wheezing, gasping and severe distress, even sudden loss of consciousness, and pulmonary oedema. Possible neurological symptoms arising from isocyanate exposure include headache, insomnia, euphoria, ataxia, anxiety neurosis, depression and paranoia. Gastrointestinal disturbances are characterised by nausea and vomiting. Pulmonary sensitisation may produce asthmatic reactions ranging from minor breathing difficulties to severe allergic attacks; this may occur following a single acute exposure or may develop without warning after a period of tolerance. A respiratory response may occur following minor skin contact. Skin sensitisation is possible and may result in allergic dermatitis responses including rash, itching, hives and swelling of extremities.

Isocyanate-containing vapours/ mists may cause inflammation of eyes and nasal passages.

Onset of symptoms may be immediate or delayed for several hours after exposure. Sensitised people can

react to very low levels of airborne isocyanates.

4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI PREPOLYMER

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

for diisocyanates:

In general, there appears to be little or no difference between aromatic and aliphatic diisocyanates as toxicants. In addition, there are insufficient data available to make any major distinctions between polymeric (<1000 MW) and monomeric diisocyanates. Based on repeated dose studies in animals by the inhalation route, both aromatic and aliphatic diisocyanates appear to be of high concern for pulmonary toxicity at low exposure levels. Based upon a very limited data set, it appears that diisocyanate prepolymers exhibit the same respiratory tract effects as the monomers in repeated dose studies. There is also evidence that both aromatic and aliphatic diisocyanates are acutely toxic via the inhalation route. Most members of the diisocyanate category have not been tested for carcinogenic potential. Though the aromatic diisocyanates tested positive and the one aliphatic diisocyanate tested negative in one species, it is premature to make any generalizations about the carcinogenic potential of aromatic versus aliphatic diisocyanates.

4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI PREPOLYMER & glass fibres

The substance is classified by IARC as Group 3:

NOT classifiable as to its carcinogenicity to humans.

Evidence of carcinogenicity may be inadequate or limited in animal testing.

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

Legend:

★ - Data either not available or does not fill the criteria for classification

✔ – Data available to make classification

11.2.1. Endocrine Disruption Properties

Not Available

SECTION 12 Ecological information

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12.1. Toxicity

	Endpoint	Test Duration (hr)	Species	Value	Source
LEAK STOP	Not Available	Not Available	Not Available	Not Available	Not Available
	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	504h	Crustacea	>=10mg/l	2
4,4'-diphenylmethane diisocyanate (MDI)	LC50	96h	Fish	>1000mg/l	2
diisocyanate (MDI)	BCF	672h	Fish	61-150	7
	EC50	72h	Algae or other aquatic plants	>1640mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Source
MDI prepolymer	Not Available	Not Available	Not Available	Not Available	Not Available
octamethylcyclotetrasiloxane	Endpoint	Test Duration (hr)	Species	Value	Source
	NOEC(ECx)	96h	Fish	0.204-3.483mg/l	4
	LC50	96h	Fish	0.204>3.483mg/l	4
2,2'-dimorpholinodiethyl ether	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50(ECx)	72h	Algae or other aquatic plants	>100mg/l	2
	LC50	96h	Fish	>2150mg/l	2
	EC50	72h	Algae or other aquatic plants	>100mg/l	2
	EC50	48h	Crustacea	>100mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50(ECx)	24h	Crustacea	>86mg/l	1
pentaerythritol etrabutylhydroxyhydrocinnamate	BCF	1008h	Fish	<0.2	7
	LC50	96h	Fish	>100mg/l	2
	EC50	72h	Algae or other aquatic plants	>100mg/l	1
	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50(ECx)	24h	Crustacea	1.7mg/l	1
mothemesulfenie seid	LC50	96h	Fish	73mg/l	2
methanesulfonic acid	EC50	72h	Algae or other aquatic plants	>=12<=24mg/l	2
	EC50	48h	Crustacea	12mg/l	1
	EC50	96h	Algae or other aquatic plants	7.2-20mg/l	2
	Endpoint	Test Duration (hr)	Species	Value	Source
alana fibres	NOEC(ECx)	72h	Algae or other aquatic plants	>=1000mg/l	2
glass fibres	LC50	96h	Fish	>1000mg/l	2
	EC50	72h	Algae or other aquatic plants	>1000mg/l	2

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

for polyisocyanates:

Polyisocyanates are not readily biodegradable. However, due to other elimination mechanisms (hydrolysis, adsorption), long retention times in water are not to be expected. The resulting polyurea is more or less inert and, due to its molecular size, not bioavailable. Within the limits of water solubility, polyisocyanates have a low to moderate toxicity for aquatic organisms.

Hydrolysis would represents the primary fate mechanism for the majority of the commercial isocyanate monomers, but, is tempered somewhat by the lack of water solubility. In the absence of hydrolysis, sorption to solids (e.g., sludge and sediments) will be the primary mechanism of removal. Hydrolysis products are predominantly insoluble stable polyureas.

Biodegradation is minimal for most compounds and volatilisation is negligible. Atmospheric degradation is not expected with removal from air occurring by washout or dry deposition. Volatilisation from surface waters (e.g., lakes and rivers) is expected to take years. In wastewater treatment this process is not expected to be significant.

DO NOT discharge into sewer or waterways.

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12.2. Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
4,4'-diphenylmethane diisocyanate (MDI)	LOW (Half-life = 1 days)	LOW (Half-life = 0.24 days)
octamethylcyclotetrasiloxane	HIGH	HIGH
2,2'-dimorpholinodiethyl ether	HIGH	HIGH
pentaerythritol tetrabutylhydroxyhydrocinnamate	HIGH	HIGH
methanesulfonic acid	HIGH	HIGH

12.3. Bioaccumulative potential

Ingredient	Bioaccumulation
4,4'-diphenylmethane diisocyanate (MDI)	LOW (BCF = 15)
octamethylcyclotetrasiloxane	HIGH (BCF = 12400)
2,2'-dimorpholinodiethyl ether	LOW (LogKOW = -1.3122)
pentaerythritol tetrabutylhydroxyhydrocinnamate	LOW (BCF = 2.3)
methanesulfonic acid	LOW (LogKOW = -2.3817)

12.4. Mobility in soil

Ingredient	Mobility
4,4'-diphenylmethane diisocyanate (MDI)	LOW (KOC = 376200)
octamethylcyclotetrasiloxane	LOW (KOC = 17960)
2,2'-dimorpholinodiethyl ether	LOW (KOC = 10)
methanesulfonic acid	HIGH (KOC = 1)

12.5. Results of PBT and vPvB assessment

	P	В	Т
Relevant available data	Not Available	Not Available	Not Available
PBT	×	×	×
vPvB	×	×	×
PBT Criteria fulfilled?			No
vPvB			No

12.6. Endocrine Disruption Properties

Not Available

12.7. Other adverse effects

Not Available

SECTION 13 Disposal considerations

13.1. Waste treatment methods

Product / Packaging

disposal

- Recycle wherever possible or consult manufacturer for recycling options.
 Consult State Land Waste Management Authority for disposal.
- ▶ 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.
- ► **DO NOT** recycle spilled material.
- Consult State Land Waste Management Authority for disposal.

	 Neutralise spill material carefully and decontaminate empty containers and spill residues with 10% ammonia solution plus detergent or a proprietary decontaminant prior to disposal. DO NOT seal or stopper drums being decontaminated as CO2 gas is generated and may pressurise containers. Puncture containers to prevent re-use. Bury or incinerate residues at an approved site.
Waste treatment options	Not Available
Sewage disposal options	Not Available

SECTION 14 Transport information

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

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

14.1. UN number	Not Applicable	
14.2. UN proper shipping name	Not Applicable	
14.3. Transport hazard	Class Not Applicable	€
class(es)	Subrisk Not Applicable)
14.4. Packing group	Not Applicable	
14.5. Environmental hazard	Not Applicable	
	Hazard identification (Ker	nler) Not Applicable
	Classification code	Not Applicable
14.6. Special precautions	Hazard Label	Not Applicable
for user	Special provisions	Not Applicable
	Limited quantity	Not Applicable
	Tunnel Restriction Code	Not Applicable

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

14.1. UN number	Not Applicable			
14.2. UN proper shipping name	Not Applicable			
	ICAO/IATA Class	ICAO/IATA Class Not Applicable		
14.3. Transport hazard class(es)	ICAO / IATA Subrisk	Not Applicable		
Class(es)	ERG Code	Not Applicable		
14.4. Packing group	Not Applicable			
14.5. Environmental hazard	Not Applicable			
14.6. Special precautions for user	Special provisions		Not Applicable	
	Cargo Only Packing Instructions		Not Applicable	
	Cargo Only Maximum Qty / Pack		Not Applicable	
	Passenger and Cargo Packing Instructions		Not Applicable	
	Passenger and Cargo Maximum Qty / Pack		Not Applicable	
	Passenger and Cargo	Limited Quantity Packing Instructions	Not Applicable	
	Passenger and Cargo	Limited Maximum Qty / Pack	Not Applicable	

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

14.1. UN number	Not Applicable

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14.2. UN proper shipping name	Not Applicable	
14.3. Transport hazard class(es)		Not Applicable Not Applicable
14.4. Packing group	Not Applicable	
14.5. Environmental hazard	Not Applicable	
	EMS Number	Not Applicable
14.6. Special precautions for user	Special provisions	Not Applicable
	Limited Quantities	Not Applicable

Inland waterways transport (ADN): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Not Applicable	
Not Applicable	
Not Applicable Not	Applicable
Not Applicable	
Not Applicable	
Classification code	Not Applicable
Special provisions	Not Applicable
Limited quantity	Not Applicable
Equipment required	Not Applicable
Fire cones number	Not Applicable
	Not Applicable Not Applicable Not Applicable Not Applicable Classification code Special provisions Limited quantity Equipment required

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

Not Applicable

14.8. Transport in bulk in accordance with MARPOL Annex V and the IMSBC Code

-	
Product name	Group
4,4'-diphenylmethane diisocyanate (MDI)	Not Available
MDI prepolymer	Not Available
octamethylcyclotetrasiloxane	Not Available
2,2'-dimorpholinodiethyl ether	Not Available
pentaerythritol tetrabutylhydroxyhydrocinnamate	Not Available
methanesulfonic acid	Not Available
glass fibres	Not Available

14.9. Transport in bulk in accordance with the ICG Code

Product name	Ship Type
4,4'-diphenylmethane diisocyanate (MDI)	Not Available
MDI prepolymer	Not Available
octamethylcyclotetrasiloxane	Not Available
2,2'-dimorpholinodiethyl ether	Not Available
pentaerythritol tetrabutylhydroxyhydrocinnamate	Not Available
methanesulfonic acid	Not Available
glass fibres	Not Available

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SECTION 15 Regulatory information

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

4,4'-diphenylmethane diisocyanate (MDI) is found on the following regulatory lists

EU European Chemicals Agency (ECHA) Community Rolling Action Plan (CoRAP) List of Substances

EU REACH Regulation (EC) No 1907/2006 - Annex XVII - Restrictions on the manufacture, placing on the market and use of certain dangerous substances, mixtures and articles

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI International Agency for Research on Cancer (IARC) - Agents Classified by

the IARC Monographs

MDI prepolymer is found on the following regulatory lists

Not Applicable

octamethylcyclotetrasiloxane is found on the following regulatory lists

Chemical Footprint Project - Chemicals of High Concern List

EU REACH Regulation (EC) No 1907/2006 - Annex XVII - Restrictions on the manufacture, placing on the market and use of certain dangerous substances, mixtures and articles

EU REACH Regulation (EC) No 1907/2006 - Proposals to identify Substances of Very High Concern: Annex XV reports for commenting by Interested Parties previous consultation

Europe EC Inventory

Europe European Chemicals Agency (ECHA) Candidate List of Substances of Very High Concern for Authorisation

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

2,2'-dimorpholinodiethyl ether is found on the following regulatory lists

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

pentaerythritol tetrabutylhydroxyhydrocinnamate is found on the following regulatory lists

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

methanesulfonic acid is found on the following regulatory lists

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

European Union (EU) Regulation (EC) No 1272/2008 on Classification, Labelling and Packaging of Substances and Mixtures - Annex VI

glass fibres is found on the following regulatory lists

Europe EC Inventory

European Union - European Inventory of Existing Commercial Chemical Substances (EINECS)

This safety data sheet is in compliance with the following EU legislation and its adaptations - as far as applicable -: Directives 98/24/EC, - 92/85/EEC, - 94/33/EC, - 2008/98/EC, - 2010/75/EU; Commission Regulation (EU) 2020/878; Regulation (EC) No 1272/2008 as updated through ATPs.

15.2. Chemical safety assessment

No Chemical Safety Assessment has been carried out for this substance/mixture by the supplier.

FCHA SUMMARY

Ingredient	CAS number	Index No	ECHA Dossier
4,4'-diphenylmethane diisocyanate (MDI)	26447-40-5	615-005-00-9	Not Available

Harmonisation (C&L Inventory)	Hazard Class and Category Code(s)	Pictograms Signal Word Code(s)	Hazard Statement Code(s)
1	Skin Irrit. 2; Skin Sens. 1; Eye Irrit. 2; Acute Tox. 4; Resp. Sens. 1; STOT SE 3; Carc. 2; STOT RE 2	GHS08; Dgr	H315; H317; H319; H332; H334; H335; H351; H373
2	Eye Irrit. 2; STOT SE 3; Carc. 2; STOT SE 3;	GHS08; Dgr; GHS06	H315; H317; H319; H334; H335; H351; H370; H330; H341; H372; H413

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Harmonisation (C&L Inventory)	Hazard Class and Category Code(s)	Pictograms Signal Word Code(s)	Hazard Statement Code(s)
	2; Aquatic Chronic 4; STOT SE 3		
1	Skin Irrit. 2; Skin Sens. 1; Eye Irrit. 2; Acute Tox. 2; Resp. Sens. 1; STOT SE 3; Carc. 2; STOT RE 2	GHS08; GHS06; Dgr	H315; H317; H319; H330; H334; H335; H351; H373
2	Skin Irrit. 2; Eye Irrit. 2; STOT SE 3; Carc. 2; STOT RE 2; STOT SE 3; STOT RE 2; STOT SE 3; STOT RE 2; STOT SE 3; STOT SE 3; STOT RE 2; STOT SE 3; STOT S	GHS08; GHS06; Dgr	H315; H317; H319; H330; H334; H335; H351; H373; H370

Harmonisation Code 1 = The most prevalent classification. Harmonisation Code 2 = The most severe classification.

Ingredient	CAS number	Index No	ECHA Dossier
MDI prepolymer	39310-05-9	Not Available	Not Available

Harmonisation (C&L Inventory)	Hazard Class and Category Code(s)	Pictograms Signal Word Code(s)	Hazard Statement Code(s)
1	Resp. Sens. 1	GHS08; Dgr	H334
2	Skin Irrit. 2; Eye Irrit. 2; Acute Tox. 4; STOT SE 3; STOT SE 3; Carc. 2; STOT RE 2; STOT SE 3; STOT RE 2; STOT RE 2; STOT SE 3	GHS08; Dgr	H334; H315; H317; H319; H332; H335; H351; H373

Harmonisation Code 1 = The most prevalent classification. Harmonisation Code 2 = The most severe classification.

Ingredient	CAS number	Index No	ECHA Dossier
octamethylcyclotetrasiloxane	556-67-2	014-018-00-1	Not Available

Harmonisation (C&L Inventory)	Hazard Class and Category Code(s)	Pictograms Signal Word Code(s)	Hazard Statement Code(s)
1	Flam. Liq. 3; Repr. 2; Aquatic Chronic 4	GHS02; GHS08; Wng	H226; H361; H413
2	Flam. Liq. 3; Repr. 2; Repr. 2; Repr. 2; Repr. 2; Repr. 2; Aquatic Chronic 1; Repr. 2; Repr. 2; Repr. 2; Repr. 2; Acute Tox. 4; Acute Tox. 3; Aquatic Acute 1; Repr. 2	GHS02; GHS08; GHS09; GHS03; GHS06; Dgr	H226; H361; H410; H361f; H302; H311; H330; H400

Harmonisation Code 1 = The most prevalent classification. Harmonisation Code 2 = The most severe classification.

Ingredient	CAS number	Index No	ECHA Dossier
2,2'-dimorpholinodiethyl ether	6425-39-4	Not Available	Not Available

Harmonisation (C&L Inventory)	Hazard Class and Category Code(s)	Pictograms Signal Word Code(s)	Hazard Statement Code(s)
1	Eye Irrit. 2	GHS07; Wng	H319
2	Eye Irrit. 2; Skin Irrit. 2; Acute Tox. 4	GHS07; Wng; GHS09	H319; H315; H302; H413; H317

Harmonisation Code 1 = The most prevalent classification. Harmonisation Code 2 = The most severe classification.

Ingredient	CAS number	Index No	ECHA Dossier
pentaerythritol tetrabutylhydroxyhydrocinnamate	6683-19-8	Not Available	Not Available

Harmonisation (C&L Inventory)	Hazard Class and Category Code(s)	Pictograms Signal Word Code(s)	Hazard Statement Code(s)
1	Not Classified	Not Available	Not Available
2	Aquatic Chronic 3; Acute Tox. 3; Acute Tox. 4; Acute Tox. 4; Skin Irrit. 2	GHS08; Dgr; GHS06; GHS09	H412; H350; H331; H302; H312; H315

Harmonisation Code 1 = The most prevalent classification. Harmonisation Code 2 = The most severe classification.

Ingredient	CAS number	Index No	ECHA Dossier
methanesulfonic acid	75-75-2	607-145-00-4	Not Available

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Harmonisation (C&L Inventory)	Hazard Class and Category Code(s)	Pictograms Signal Word Code(s)	Hazard Statement Code(s)
1	Skin Corr. 1B	GHS05; Dgr	H314
2	Met. Corr. 1; Acute Tox. 4; Eye Dam. 1; STOT SE 3; Acute Tox. 3; STOT SE 3; Acute Tox. 4; Repr. 2; Aquatic Chronic 3; STOT SE 3; STOT SE 3; STOT SE 3	GHS05; Dgr; GHS06; GHS08	H290; H312; H314; H318; H335; H336; H301

Harmonisation Code 1 = The most prevalent classification. Harmonisation Code 2 = The most severe classification.

Ingredient	CAS number	Index No	ECHA Dossier
glass fibres	65997-17-3*	Not Available	Not Available

Harmonisation (C&L Inventory)	Hazard Class and Category Code(s)	Pictograms Signal Word Code(s)	Hazard Statement Code(s)
1	Not Classified	Not Available	Not Available
2	Skin Irrit. 2; Eye Irrit. 2; STOT SE 3; STOT SE 3	GHS08; Dgr	H350; H315; H319; H335; H373

Harmonisation Code 1 = The most prevalent classification. Harmonisation Code 2 = The most severe classification.

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (4,4'-diphenylmethane diisocyanate (MDI); MDI prepolymer; octamethylcyclotetrasiloxane; 2,2'-dimorpholinodiethyl ether; pentaerythritol tetrabutylhydroxyhydrocinnamate; methanesulfonic acid; glass fibres)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	No (MDI prepolymer)
Japan - ENCS	No (MDI prepolymer; glass fibres)
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	No (MDI prepolymer; 2,2'-dimorpholinodiethyl ether)
Vietnam - NCI	Yes
Russia - FBEPH	No (MDI prepolymer)
Legend:	Yes = All CAS declared ingredients are on the inventory No = One or more of the CAS listed ingredients are not on the inventory. These ingredients may be exempt or will require registration.

SECTION 16 Other information

Revision Date	31/07/2017
Initial Date	31/07/2017

CONTACT POINT

- For quotations contact your local Customer Services - http://wssdirectory.wilhelmsen.com/#/customerservices - - Responsible for safety data sheet Wilhelmsen Ships Service AS - Prepared by: Product HSE Manager, - Email: WSS.GLOBAL.SDSINFO@wilhelmsen.com - Telephone: Tel.: +31 10 4877775

Full text Risk and Hazard codes

H226	Flammable liquid and vapour.
H290	May be corrosive to metals.
H301	Toxic if swallowed.
H311	Toxic in contact with skin.
H312	Harmful in contact with skin.

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H314	Causes severe skin burns and eye damage.
-	
H318	Causes serious eye damage.
H319	Causes serious eye irritation.
H330	Fatal if inhaled.
H331	Toxic if inhaled.
H332	Harmful if inhaled.
H336	May cause drowsiness or dizziness.
H341	Suspected of causing genetic defects.
H350	May cause cancer.
H351	Suspected of causing cancer.
H361	Suspected of damaging fertility or the unborn child.
H361f	Suspected of damaging fertility.
H370	Causes damage to organs.
H372	Causes damage to organs through prolonged or repeated exposure.
H373	May cause damage to organs through prolonged or repeated exposure.
H400	Very toxic to aquatic life.
H410	Very toxic to aquatic life with long lasting effects.
H412	Harmful to aquatic life with long lasting effects.
H413	May cause long lasting harmful effects to aquatic life.

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.

For detailed advice on Personal Protective Equipment, refer to the following EU CEN Standards:

EN 166 Personal eye-protection

EN 340 Protective clothing

EN 374 Protective gloves against chemicals and micro-organisms

EN 13832 Footwear protecting against chemicals

EN 133 Respiratory protective devices

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 $_{\circ}$

IDLH: Immediately Dangerous to Life or Health Concentrations

ES: Exposure Standard 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

AIIC: Australian Inventory of Industrial Chemicals

DSL: Domestic Substances List NDSL: Non-Domestic Substances List

IECSC: Inventory of Existing Chemical Substance in China

EINECS: European INventory of Existing Commercial chemical Substances

ELINCS: European List of Notified Chemical Substances

NLP: No-Longer Polymers

ENCS: Existing and New Chemical Substances Inventory

KECI: Korea Existing Chemicals Inventory

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NZIoC: New Zealand Inventory of Chemicals

PICCS: Philippine Inventory of Chemicals and Chemical Substances

TSCA: Toxic Substances Control Act TCSI: Taiwan Chemical Substance Inventory INSQ: Inventario Nacional de Sustancias Químicas

NCI: National Chemical Inventory

FBEPH: Russian Register of Potentially Hazardous Chemical and Biological Substances

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