

F-160 PART A BARNES PRODUCTS PTY LTD

Chemwatch: 60-8759

Chemwatch Hazard Alert Code: 2

Version No: 8.1

Safety Data Sheet according to the Health and Safety at Work (Hazardous Substances) Regulations 2017

Issue Date: 19/03/2023 Print Date: 15/06/2023 S.GHS.NZL.EN.E

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

Product Identifier	
Product name	F-160 PART A
Chemical Name	Not Applicable
Synonyms	F-160 REV 1 PART A
Chemical formula	Not Applicable
Other means of identification	Not Available

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

Relevant identified uses	Polyurethane resins.

Details of the manufacturer or supplier of the safety data sheet

Registered company name	BARNES PRODUCTS PTY LTD	
Address	5 GREENHILLS AVE MOOREBANK NSW 2170 Australia	
Telephone	Barnes Australia +612 9793 7555 Mon-Fri 8am-4:30pm	
Fax	Barnes Australia +612 9793 7091	
Website	www.barnesnz.co.nz	
Email	sales@barnes.com.au	

Emergency telephone number

Association / Organisation	New Zealand Poisons Information Centre	
Emergency telephone numbers	Barnes NZ +649 9731 816 - Monday-Thursday 9am-5pm Friday 9am-4.30pm	
Other emergency telephone numbers	New Zealand Poisons Information Centre 0800 764 766 After Hours	

SECTION 2 Hazards identification

Classification of the substance or mixture

Classification ^[1]	Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 2, Acute Toxicity (Inhalation) Category 2, Sensitisation (Respiratory) Category 1, Specific Target Organ Toxicity - Single Exposure (Respiratory Tract Irritation) Category 3, Carcinogenicity Category 2, Specific Target Organ Toxicity - Repeated Exposure Category 1	
Legend:	1. Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI	
Determined by Chemwatch using GHS/HSNO criteria	6 1B (inhalation) 6 1D (oral) 6 3A 6 4A 6 5A (respiratory) 6 5B (contact) 6 /B 6 9A 6 1E (respiratory tract irritant)	

Label elements



Signal word

Danger

Hazard pictogram(s)

Hazard statement(s)

H302	Harmful if swallowed.
H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H319	Causes serious eye irritation.
H330	Fatal if inhaled.

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H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.	
H335	May cause respiratory irritation.	
H351	Suspected of causing cancer.	
H372	Causes damage to organs through prolonged or repeated exposure.	

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P260	Do not breathe mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves, protective clothing, eye protection and face protection.
P284	[In case of inadequate ventilation] wear respiratory protection.
P264	Wash all exposed external body areas thoroughly after handling.
P270	Do not eat, drink or smoke when using this product.

Precautionary statement(s) Response

P310	Immediately call a POISON CENTER/doctor/physician/first aider.		
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER/doctor/physician/first aider.		
P302+P352	IF ON SKIN: Wash with plenty of water.		
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.		
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.		

Precautionary statement(s) Storage

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

Precautionary statement(s) Disposal

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

SECTION 3 Composition / information on ingredients

P501

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
9048-57-1	50-70	MDI, propoxylated
101-68-8	20-30	4.4'-diphenylmethane diisocyanate (MDI)
25686-28-6	5-10	MDI homopolymer
108-32-7	5-10	propylene carbonate
Legend:	 Classified by Chemwatch; 2. Classification drawn from CCID EPA NZ; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; Classification drawn from C&L * EU IOELVs available 	

SECTION 4 First aid measures

Description of first aid measures		
Eye Contact	 If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel. 	
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. Wash contaminated clothing thoroughly before reuse or destroy.	
Inhalation	 If fumes, aerosols or combustion products are inhaled remove from contaminated area. Other measures are usually unnecessary. 	
Ingestion	DO NOT INDUCE vomiting. Rinse mouth out with plenty of water. Seek medical attention.	

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

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.
- Noncardiogenic pulmonary oedema and bronchospasm are the most serious consequences of exposure. Markedly symptomatic patients should receive oxygen, ventilatory support and an intravenous line.
- 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 sensitivity.

[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 polyisocyanates has developed.

SECTION 5 Firefighting measures

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility	Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result		
Advice for firefighters			
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus. Prevent, by any means available, spillage from entering drains or water course. Use water delivered as a fine spray to control fire and cool adjacent area. Avoid spraying water onto liquid pools. DO NOT approach containers suspected to be hot. Cool fire exposed containers with water spray from a protected location. 		
Fire/Explosion Hazard	 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 products include: carbon dioxide (CO2) and minor amounts of hydrogen cyanide other pyrolysis products typical of burning organic material. May emit corrosive fumes. WARNING: Long standing in contact with air and light may result in the formation of potentially explosive peroxides. When heated at high temperatures many isocyanates decompose rapidly generating a vapour which pressurises containers, possibly to the point of rupture. Release of toxic and/or flammable isocyanate vapours may then occur isocyanates aldehydes nitrogen oxides (NOX) 		

SECTION 6 Accidental release measures

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	 Remove all ignition sources. Clean up all spills immediately. Avoid breathing vapours and contact with skin and eyes. Control personal contact with the substance, by using protective equipment. Contain and absorb spill with sand, earth, inert material or vermiculite. Wipe up. Place in a suitable, labelled container for waste disposal.
Major Spills	 Liquid Isocyanates and high isocyanate vapour concentrations will penetrate seals on self contained breathing apparatus - SCBA should be used inside encapsulating suit where this exposure may occur. For isocyanate spills of less than 40 litres (2 m2): 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.
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.
Moderate hazard.
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.
No smoking, naked lights or ignition sources.
► Increase ventilation.

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

SECTION 7 Handling and storage

Precautions for safe handling DO NOT allow clothing wet with material to stay in contact with skin Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. Use in a well-ventilated area. Safe handling Prevent concentration in hollows and sumps. DO NOT enter confined spaces until atmosphere has been checked. Avoid smoking, naked lights or ignition sources. Avoid contact with incompatible materials. Consider storage under inert gas. for commercial quantities of isocyanates: - Isocyanates should be stored in adequately bunded areas. Nothing else should be kept within the same bunding. 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. · 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. Where stored in tanks, the more reactive isocyanates should be blanketed with a non-reactive gas such as nitrogen and equipped with Other information absorptive type breather valve (to prevent vapour emissions)... · Transfer systems for isocyanates in bulk storage should be fully enclosed and use pump or vacuum systems. Store in original containers. Keep containers securely sealed. No smoking, naked lights or ignition sources. Store in a cool, dry, well-ventilated area. Store away from incompatible materials and foodstuff containers. Protect containers against physical damage and check regularly for leaks. Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	Packaging as recommended by manufacturer.
Storage incompatibility	 Segregate from alcohol, water. amines Avoid strong acids, bases. Avoid reaction with oxidising agents

SECTION 8 Exposure controls / personal protection

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
New Zealand Workplace Exposure Standards (WES)	4,4'-diphenylmethane diisocyanate (MDI)	Diphenylmethane diisocyanate	0.02 mg/m3	0.07 mg/m3	Not Available	(dsen) - Dermal sensitiser (rsen) - Respiratory sensitiser (ifv) - The Inhalable Fraction and Vapour (ifv) notation is used when a material exerts sufficient vapour pressure such that it may be present in both particle and vapour phases, with each contributing to a significant portion of exposure
New Zealand Workplace Exposure Standards (WES)	4,4'-diphenylmethane diisocyanate (MDI)	MDI	0.02 mg/m3	0.07 mg/m3	Not Available	(dsen) - Dermal sensitiser (rsen) - Respiratory sensitiser (ifv) - The Inhalable Fraction and Vapour (ifv) notation is used when a material exerts sufficient vapour pressure such that it may be present in both particle and vapour phases, with each contributing to a significant portion of exposure
New Zealand Workplace Exposure Standards (WES)	4,4'-diphenylmethane diisocyanate (MDI)	Methylene bisphenyl isocyanate	0.02 mg/m3	0.07 mg/m3	Not Available	(dsen) - Dermal sensitiser (rsen) - Respiratory sensitiser (ifv) - The Inhalable Fraction and Vapour (ifv) notation is used when a material exerts sufficient

	Ingredient Material name	TWA STEL	Peak Note	S			
			parti	ur pressure such that it may be present in both le and vapour phases, with each contributing to nificant portion of exposure			
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			
propylene carbonate	34 mg/m3	370 mg/m3		2,200 mg/m3			
Ingredient	Original IDLH		Revised IDLH				
MDI, propoxylated	Not Available		Not Available	Not Available			
4,4'-diphenylmethane diisocyanate (MDI)	75 mg/m3		Not Available				
MDI homopolymer	Not Available		Not Available				
propylene carbonate	Not Available		Not Available				
Occupational Exposure Banding							
Ingredient	Occupational Exposure Band Rating		Occupational Expo	sure Band Limit			
MDI, propoxylated	E		≤ 0.1 ppm				
MDI homopolymer	E		≤ 0.1 ppm				
propylene carbonate	E		≤ 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.						
xposure controls	All processes in which isocyanates are us						
Appropriate engineering controls	 standards. If total enclosure of the process is not feasible, local exhaust ventilation may be necessary. Local exhaust ventilation is essential where lower molecular weight isocyanates (such as TDI or HDI) is used or where isocyanate or polyurethane is sprayed. Where other isocyanates or pre-polymers are used and aerosol formation cannot occur, local exhaust ventilation may not be necessary if the atmospheric concentration can be kept below the relevant exposure standards. Where other isocyanates ventilation is installed, exhaust vapours should not be vented to the exterior in such a manner as to create a hazard. 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. 						
Individual protection measures, such as personal protective equipment							
Eye and face protection	 Safety glasses with side shields. Chemical goggles. [AS/NZS 1337.1, EN166 or national equivalent] 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						
Hands/feet protection							
Rody protection	See Other protection below	See Other protection below					
Body protection	All employees working with isocyanates must be informed of the hazards from exposure to the contaminant and the precautions necessary to prevent damage to their health. They should be made aware of the need to carry out their work so that as little contamination as possible is produced, and of the importance of the proper use of all safeguards against exposure to themselves and their fellow workers. Adequate training, both in the proper execution of the task and in the use of all associated engineering controls, as well as of any personal protective equipment, is essential. Employees exposed to contamination hazards should be educated in the need for, and proper use of, facilities, clothing and equipment and thereby maintain a high standard of personal cleanliness. Special attention should be given to ensuring that all personnel understand instructions, especially newly recruited employees and those with local-language difficulties, where they are known. P.V.C apron. Barrier cream. 						

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

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

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Material	CPI
PE/EVAL/PE	A

* 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.

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required. Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A-AUS 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(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds/below 65 deaC)

- Cartridge respirators should never be used for emergency ingress or in areas of unknown vapour concentrations or oxygen content.
- The wearer must be warned to leave the contaminated area immediately on detecting any odours through the respirator. The odour may indicate that the mask is not functioning properly, that the vapour concentration is too high, or that the mask is not properly fitted. Because of these limitations, only restricted use of cartridge respirators is considered appropriate.
- Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used

For spraying or operations which might generate aerosols:

- Full face respirator with supplied air.
- In certain circumstances, personal protection of the individual employee is necessary. Personal protective devices should be regarded as being supplementary to substitution and engineering control and should not be used in preference to them as they do nothing to eliminate the hazard.
- However, in some situations, minimising exposure to isocyanates by enclosure and ventilation is not possible, and occupational exposure standards may be exceeded, particularly during on-site mixing of paints, spray-painting, foaming and maintenance of machine and ventilation systems. In these situations, air-line respirators or self-contained breathing apparatus complying with the appropriate nationals standard must be used.
- Organic vapour respirators with particulate pre- filters and powered, air-purifying respirators are NOT suitable.
- Personal protective equipment must be appropriately selected, individually fitted and workers trained in their correct use and maintenance. Personal protective equipment must be regularly checked and maintained to ensure that the worker is being protected.
- Air- line respirators or self-contained breathing apparatus complying with the appropriate national standard should be used during the clean-up of spills and the repair or clean-up of contaminated equipment and similar situations which cause emergency exposures to hazardous atmospheric concentrations of isocyanate.

Information on basic physical and chemical properties

Appearance	Pale yellow viscous liquid with mild musty odour; reacts with water.				
Physical state	Liquid Relative density (Water = 1) 1.1 @ 25C				
Odour	Not Available	Partition coefficient n-octanol / water	Not Available		
Odour threshold	Not Available	Auto-ignition temperature (°C)	>600		
pH (as supplied)	Not Applicable	Decomposition temperature (°C)	>300		
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	1254.0 @25C		
Initial boiling point and boiling range (°C)	>300	Molecular weight (g/mol)	Not Applicable		
Flash point (°C)	>110 (SCC)	Taste	Not Available		
Evaporation rate	Not Available	Explosive properties	Not Available		
Flammability	Not Applicable	Oxidising properties	Not Available		
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available		
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Negligible		
Vapour pressure (kPa)	Not Available	Gas group	Not Available		

Continued...

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Solubi	lity in water	Reacts	pH as a solution (1%)	Not Available
Vapour dens	sity (Air = 1)	8.5	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable. Hazardous polymerisation will not occur. Presence of elevated temperatures.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7
Hazardous decomposition products	See section 5

SECTION 11 Toxicological information

Information on toxicological effects

Inhaled	Inhalation of aerosols (mists, fumes), generated by the material during the The material can cause respiratory irritation in some persons. The body' The vapour/mist may be highly irritating to the upper respiratory tract and pulmonary oedema. Possible neurological symptoms arising from isocya neurosis, depression and paranoia. Gastrointestinal disturbances are che produce asthmatic reactions ranging from minor breathing difficulties to o or may develop without warning for several hours after exposure. Sensit work in situations allowing exposure to this material. Continued exposure impairment.	s response to such irritation can cause further lung damage. d lungs; the response may be severe enough to produce bronchitis and inate exposure include headache, insomnia, euphoria, ataxia, anxiety aracterised by nausea and vomiting. Pulmonary sensitisation may severe allergic attacks; this may occur following a single acute exposure ized people can react to very low doses, and should not be allowed to	
Ingestion	Inhalation hazard is increased at higher temperatures. Accidental ingestion of the material may be seriously damaging to the health of the individual; animal experiments indicate that ingestion of less than 40 gram may be fatal.		
Skin Contact	This material can cause inflammation of the skin on contact in some persons. The material may accentuate any pre-existing dermatitis condition Skin contact with the material may damage the health of the individual; systemic effects may result following absorption. Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.		
Eye	This material may produce eye irritation in some persons and produce eye damage 24 hours or more after instillation. Moderate inflammation may be expected with redness; conjunctivitis may occur with prolonged exposure.		
Chronic	There has been concern that this material can cause cancer or mutation Long-term exposure to respiratory irritants may result in airways disease Inhaling this product is more likely to cause a sensitisation reaction in so Skin contact with the material is more likely to cause a sensitisation react Harmful: danger of serious damage to health by prolonged exposure thr This material can cause serious damage if one is exposed to it for long p produce severe defects. Substance accumulation, in the human body, may occur and may cause Isocyanate vapours are irritating to the airways and can cause their infla consciousness and fluid in the lungs. Nervous system symptoms that ma anxiety, depression and paranoia.	, involving difficulty breathing and related whole-body problems. me persons compared to the general population. tion in some persons compared to the general population. ough inhalation. beriods. It can be assumed that it contains a substance which can some concern following repeated or long-term occupational exposure. mmation, with wheezing, gasping, severe distress, even loss of	
	ΤΟΧΙΟΙΤΥ	IRRITATION	
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	Not Available	Not Available	
	ΤΟΧΙΟΙΤΥ	IRRITATION	
MDI, propoxylated	Not Available	Not Available	
	тохісіту	IRRITATION	
	Dermal (rabbit) LD50: >6200 mg/kg ^[2]	Eye: no adverse effect observed (not irritating) ^[1]	
4,4'-diphenyImethane diisocyanate (MDI)	Inhalation(Rat) LC50: 0.368 mg/L4h ^[1]	Skin (rabbit): 500 mg /24 hours Dermal Sensitiser *Respirate Sensitiser (g.pig) *[* = Bayer CCINFO 2133615]	
	Oral (Mouse) LD50; 2200 mg/kg ^[2]	Skin: adverse effect observed (irritating) ^[1]	
	ΤΟΧΙΟΙΤΥ	IRRITATION	
MDI homopolymer	Oral (Rat) LD50: >5000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]	
		Skin: adverse effect observed (irritating) ^[1]	
	ΤΟΧΙΟΙΤΥ	IRRITATION	
	Dermal (rabbit) LD50: >=2000 mg/kg ^[1]	Eye (rabbit): 60 mg - moderate	
propylene carbonate	Oral (Rat) LD50: >5000 mg/kg ^[2]	Eye: adverse effect observed (irritating) ^[1]	
		Skin (human): 100 mg/3d-I moderate	

		Skin (rabbit): 50	0 ma moderate	
			e effect observed (not irritating) ^[1]	
		SKIII. NO adverse	e enect observed (not initiating)	
Legend:	 Value obtained from Europe ECHA Registered Substances - Acute to specified data extracted from RTECS - Register of Toxic Effect of chemic 		ined from manufacturer's SDS. Unless otherwise	
MDI, PROPOXYLATED	No significant acute toxicological data identified in literature search. Polyethers (such as ethoxylated surfactants and polyethylene glycols) are highly susceptible to being oxidized in the air. They then form complex mixtures of oxidation products. Animal testing reveals that whole the pure, non-oxidised surfactant is non-sensitizing, many of the oxidation products are sensitisers. The oxidization products also cause irritation.			
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate Aromatic and aliphatic disocyanates may cause airway toxicity and skin sensitization. Monomers and prepolymers exhibit similar respiratory effect. Of the several members of disocyanates tested on experimental animals by inhalation and oral exposure, some caused cancer while others produced a harmless outcome. This group of compounds has therefore been classified as cancer-causing.			
MDI HOMOPOLYMER	as polymethylene polyphenyl isocyanate			
PROPYLENE CARBONATE	WARNING: This substance has been classified by the IARC as Group 2 The material may cause skin irritation after prolonged or repeated exposive sicles, scaling and thickening of the skin. for propylene carbonate: Numerous adequate and reliable acute toxicity tests are available on pro- guidelines. Propylene carbonate is practically nontoxic following acute ex- mg/kg. No further testing is recommended. Subchronic studies (13-14 weeks) of propylene carbonate by inhalation current guidelines. The oral study indicated low systemic toxicity from pr- no systemic toxicity was seen at concentrations up to 1000 mg/m ³ ; howe 1000 mg/m3. A dermal carcinogenicity study in mice did not indicate turn propylene carbonate.	ure and may produ pylene carbonate. (posures; the oral l (aerosol) and oral pylene carbonate ver, there was peri	ce on contact skin redness, swelling, the production Oral and dermal tests meet OECD and EPA test _D50 is >.5000 mg/kg and the dermal LD50 is >3000 (gavage) routes were conducted in rats according to (NOAEL = 5000 mg/kg/day). In the inhalation study, ocular irritation and swelling in a few males at 500 ar	
	The following information refers to contact allergens as a group and may Contact allergies quickly manifest themselves as contact eczema, more eczema involves a cell-mediated (T lymphocytes) immune reaction of the involve antibody-mediated immune reactions. The significance of the condistribution of the substance and the opportunities for contact with it are distributed can be a more important allergen than one with stronger sense clinical point of view, substances are noteworthy if they produce an allerge Asthma-like symptoms may continue for months or even years after experi-	rarely as urticaria of e delayed type. Oth ntact allergen is no equally important. <i>i</i> sitising potential wit gic test reaction in posure to the materi	or Quincke's oedema. The pathogenesis of contact her allergic skin reactions, e.g. contact urticaria, t simply determined by its sensitisation potential: the A weakly sensitising substance which is widely h which few individuals come into contact. From a more than 1% of the persons tested.	
MDI, PROPOXYLATED & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI HOMOPOLYMER	known as reactive airways dysfunction syndrome (RADS) which can occ criteria for diagnosing RADS include the absence of previous airways dis asthma-like symptoms within minutes to hours of a documented exposur airflow pattern on lung function tests, moderate to severe bronchial hype lymphocytic inflammation, without eosinophilia. RADS (or asthma) follow the concentration of and duration of exposure to the irritating substance. result of exposure due to high concentrations of irritating substance (ofte disorder is characterized by difficulty breathing, cough and mucus produ Allergic reactions involving the respiratory tract are usually due to interace potential of the allergen and period of exposure often determine the seve others, and exposure to other irritants may aggravate symptoms. Allergy Attention should be paid to atopic diathesis, characterised by increased Exogenous allergic alveolitis is induced essentially by allergen specific ir lymphocytes) may be involved. Such allergy is of the delayed type with of Isocyanate vapours are irritating to the airways and can cause their infla consciousness and fluid in the lungs. Nervous system symptoms that ma anxiety, depression and paranoia.	sease in a non-atop e to the irritant. Ott rreactivity on meth ing an irritating inh On the other hand n particles) and is ction. tions between IgE rrity of symptoms. I causing activity is susceptibility to na mnune-complexes nset up to four hou mmation, with whe	b high levels of highly irritating compound. Main bic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversible acholine challenge testing, and the lack of minimal alation is an infrequent disorder with rates related to , industrial bronchitis is a disorder that occurs as a completely reversible after exposure ceases. The antibodies and allergens and occur rapidly. Allergic Some people may be genetically more prone than due to interactions with proteins. sal inflammation, asthma and eczema. of the IgG type; cell-mediated reactions (T ars following exposure. ezing, gasping, severe distress, even loss of	
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI	criteria for diagnosing RADS include the absence of previous airways dis asthma-like symptoms within minutes to hours of a documented exposur airflow pattern on lung function tests, moderate to severe bronchial hype lymphocytic inflammation, without eosinophilia. RADS (or asthma) follow the concentration of and duration of exposure to the irritating substance. result of exposure due to high concentrations of irritating substance (ofte disorder is characterized by difficulty breathing, cough and mucus produ Allergic reactions involving the respiratory tract are usually due to interace potential of the allergen and period of exposure often determine the seve others, and exposure to other irritants may aggravate symptoms. Allergy Attention should be paid to atopic diathesis, characterised by increased Exogenous allergic alveolitis is induced essentially by allergen specific ir lymphocytes) may be involved. Such allergy is of the delayed type with c Isocyanate vapours are irritating to the airways and can cause their infla consciousness and fluid in the lungs. Nervous system symptoms that mark	sease in a non-atop e to the irritant. Ott rreactivity on meth ing an irritating inh On the other hand n particles) and is ction. stons between IgE errity of symptoms. causing activity is susceptibility to nas nmune-complexes neet up to four hou mmation, with whe ay occur include he	b high levels of highly irritating compound. Main bic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversible acholine challenge testing, and the lack of minimal alation is an infrequent disorder with rates related to , industrial bronchitis is a disorder that occurs as a completely reversible after exposure ceases. The antibodies and allergens and occur rapidly. Allergic Some people may be genetically more prone than due to interactions with proteins. sal inflammation, asthma and eczema. of the IgG type; cell-mediated reactions (T ars following exposure. ezing, gasping, severe distress, even loss of	
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI HOMOPOLYMER 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & MDI	criteria for diagnosing RADS include the absence of previous airways dis asthma-like symptoms within minutes to hours of a documented exposur airflow pattern on lung function tests, moderate to severe bronchial hype lymphocytic inflammation, without eosinophilia. RADS (or asthma) follow the concentration of and duration of exposure to the irritating substance. result of exposure due to high concentrations of irritating substance (ofte disorder is characterized by difficulty breathing, cough and mucus produ Allergic reactions involving the respiratory tract are usually due to interac potential of the allergen and period of exposure often determine the seve others, and exposure to other irritants may aggravate symptoms. Allergy Attention should be paid to atopic diathesis, characterised by increased Exogenous allergic alveolitis is induced essentially by allergen specific ir lymphocytes) may be involved. Such allergy is of the delayed type with of lsocyanate vapours are irritating to the airways and can cause their infla consciousness and fluid in the lungs. Nervous system symptoms that ma anxiety, depression and paranoia. The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans.	sease in a non-atop e to the irritant. Ott rreactivity on meth ing an irritating inh On the other hand n particles) and is ction. titions between IgE erity of symptoms. susceptibility to nas nmune-complexes inset up to four hou mmation, with whe ay occur include he	b high levels of highly irritating compound. Main bic individual, with sudden onset of persistent her criteria for diagnosis of RADS include a reversibil acholine challenge testing, and the lack of minimal alation is an infrequent disorder with rates related to i, industrial bronchitis is a disorder that occurs as a completely reversible after exposure ceases. The antibodies and allergens and occur rapidly. Allergic Some people may be genetically more prone than due to interactions with proteins. sal inflammation, asthma and eczema. of the IgG type; cell-mediated reactions (T irs following exposure. ezing, gasping, severe distress, even loss of adache, sleep disturbance, euphoria, inco-ordination	
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Data available to make classification

SECTION 12 Ecological information

Image: Product with the product wi

	Endpoint	Test Duration (hr)		Species		Value	Source
MDI, propoxylated	Not Available	Not Available		Not Available		Not Available	Not Available
	Endpoint	Test Duration (hr)	Sp	ecies	Value	•	Source
4,4'-diphenylmethane	LC50	96h	Fis	h	95.24	-134.37mg/l	Not Available
diisocyanate (MDI)	BCF	672h	Fis	h	61-15	0	7
	EC50	48h	Cru	ustacea	acea >100mg/l		2
	NOEC(ECx)	504h	Cru	ustacea	>=10	mg/l	2
MDI hamanahman	Endpoint	Test Duration (hr)		Species		Value	Source
MDI homopolymer	NOEC(ECx)	504h		Crustacea		>=10mg/l	2
	Endpoint	Test Duration (hr)		Species		Value	Source
	LC50	96h		Fish 1000r		1000mg/l	1
propylene carbonate	EC50	72h		Algae or other aquatic plants >900mg/l		>900mg/l	1
	EC50	48h		Crustacea >1000mg/		>1000mg/l	1
	NOEC(ECx)	72h		Algae or other aquatic plants		900mg/l	1
Legend:	Ecotox databas			Substances - Ecotoxicological Inforr Assessment Data 6. NITE (Japan)			

DO NOT discharge into sewer or waterways.

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)
propylene carbonate	HIGH	HIGH

Bioaccumulative potential

Ingredient	Bioaccumulation
4,4'-diphenylmethane diisocyanate (MDI)	LOW (BCF = 15)
propylene carbonate	LOW (LogKOW = -0.41)

Mobility in soil

Ingredient	Mobility
4,4'-diphenylmethane diisocyanate (MDI)	LOW (KOC = 376200)
propylene carbonate	LOW (KOC = 14.85)

SECTION 13 Disposal considerations

Waste treatment methods	
Product / Packaging disposal	 Containers may still present a chemical hazard/ danger when empty. Return to supplier for reuse/ recycling if possible. Otherwise: If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill. Where possible retain label warnings and SDS and observe all notices pertaining to the product. 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 sever 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.

Ensure that the hazardous substance is disposed in accordance with the Hazardous Substances (Disposal) Notice 2017

Disposal Requirements

Packages that have been in direct contact with the hazardous substance must be only disposed if the hazardous substance was appropriately removed and cleaned out from the package. The package must be disposed according to the manufacturer's directions taking into account the material it is made of. Packages which hazardous content have been appropriately treated and removed may be recycled.

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The hazardous substance must only be disposed if it has been treated by a method that changed the characteristics or composition of the substance and it is no longer hazardous. Only dispose to the environment if a tolerable exposure limit has been set for the substance.

Only deposit the hazardous substance into or onto a landfill or sewage facility or incinerator, where the hazardous substance can be handled and treated appropriately.

SECTION 14 Transport information

Labels Required		
Marine Pollutant	NO	
HAZCHEM	Not Applicable	

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

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

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

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

Not Applicable

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

Product name	Group
MDI, propoxylated	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	Not Available
MDI homopolymer	Not Available
propylene carbonate	Not Available

Transport in bulk in accordance with the IGC Code

Product name	Ship Type
MDI, propoxylated	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	Not Available
MDI homopolymer	Not Available
propylene carbonate	Not Available

SECTION 15 Regulatory information

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

This substance is to be managed using the conditions specified in an applicable Group Standard

HSR Number	Group Standard	
HSR002625	N.O.S. Acutely Toxic Carcinogenic Group Standard 2020	
HSR100425	Pharmaceutical Active Ingredients Group Standard 2020	
HSR100757	Veterinary Medicines Limited Pack Size Finished Dose Group Standard 2020	
HSR100758	SR100758 Veterinary Medicines Non dispersive Closed System Application Group Standard 2020	

Please refer to Section 8 of the SDS for any applicable tolerable exposure limit or Section 12 for environmental exposure limit.

MDI, propoxylated is found on the following regulatory lists

New Zealand Inventory of Chemicals (NZIoC)

4,4'-diphenylmethane diisocya	nate (MDI) is found on the following regulatory lists		
International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Not Classified as Carcinogenic		New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals - Classification Data	
New Zealand Approved Hazardo	ous Substances with controls	New Zealand Inventory of Chemicals (NZIoC)	
New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals		New Zealand Workplace Exposure Standards (WES)	
MDI homopolymer is found or	the following regulatory lists		
New Zealand Inventory of Chemicals (NZIoC)			
propylene carbonate is found	on the following regulatory lists		
New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals		New Zealand Inventory of Chemicals (NZIoC)	
New Zealand Hazardous Substances and New Organisms (HSNO) Act - Classification of Chemicals - Classification Data			
Hazardous Substance Locat	ion		
Subject to the Health and Safety at Work (Hazardous Substances) Regulations 2017.			
Hazard Class	Quantity (Compliance Certificate)	Quantity (Compliance Certificate - Farms >4 ha)	
6.1B	250 kg or 250 L	500 kg or 500 L	

Certified Handler

Subject to Part 4 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Class of substance	Quantities
6.1B	Any quantity

Refer Group Standards for further information

Maximum quantities of certain hazardous substances permitted on passenger service vehicles

Subject to Regulation 13.14 of the Health and Safety at Work (Hazardous Substances) Regulations 2017.

Hazard Class	Gas (aggregate water capacity in mL)	Liquid (L)	Solid (kg)	Maximum quantity per package for each classification
6.1B	120	0,1	0,5	
6.5A or 6.5B	120	1	3	

Tracking Requirements

Subject to tracking according to the Health and Safety at Work (Hazardous Substances) Regulations 2017

- Refer to the regulation for more information

National Inventory Status

National Inventory	Status	
Australia - AIIC / Australia Non-Industrial Use	Yes	
Canada - DSL	Yes	
Canada - NDSL	No (MDI, propoxylated; 4,4'-diphenylmethane diisocyanate (MDI); MDI homopolymer; propylene carbonate)	
China - IECSC	Yes	
Europe - EINEC / ELINCS / NLP	Yes	
Japan - ENCS	No (MDI, propoxylated)	
Korea - KECI	Yes	
New Zealand - NZIoC	Yes	
Philippines - PICCS	Yes	
USA - TSCA	Yes	
Taiwan - TCSI	Yes	
Mexico - INSQ	No (MDI, propoxylated; MDI homopolymer)	
Vietnam - NCI	Yes	
Russia - FBEPH	No (MDI, propoxylated)	
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	19/03/2023
Initial Date	03/03/2017

SDS Version Summary

Version	Date of Update	Sections Updated
6.1	23/12/2022	Classification review due to GHS Revision change.
8.1	19/03/2023	Hazards identification - Classification, Composition / information on ingredients - Ingredients, Identification of the substance / mixture and of the company / undertaking - Supplier Information, Identification of the substance / mixture and of the company / undertaking - Synonyms, Name

Other information

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

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

Definitions and abbreviations

PC - TWA: Permissible Concentration-Time Weighted Average

PC - STEL: Permissible Concentration-Short Term Exposure Limit

IARC: International Agency for Research on Cancer

ACGIH: American Conference of Governmental Industrial Hygienists STEL: Short Term Exposure Limit

TEEL: Temporary Emergency Exposure Limit, IDLH: Immediately Dangerous to Life or Health Concentrations

ES: Exposure Standard

OSF: Odour Safety Factor

NOAEL :No Observed Adverse Effect Level

LOAEL: Lowest Observed Adverse Effect Level

TLV: Threshold Limit Value

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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 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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