

AMC
Chemwatch: 36-1270

Chemwatch Hazard Alert Code: 2

Issue Date: **03/10/2023**Print Date: **03/20/2023**L.GHS.AUS.EN.E

Version No: **8.1**Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

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

Product Identifier

Product name	AMC ECO GRIP B
Chemical Name	Not Applicable
Synonyms	Not Available
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 rigid foam.

Details of the manufacturer or supplier of the safety data sheet

Registered company name	AMC
Address	216 Balcatta Rd, Balcatta WA 6021 Australia
Telephone	+61 (8) 9445 4000
Fax	+61 (8) 9445 4040
Website	www.amcmud.com
Email	amc@imdexlimited.com

Emergency telephone number

Association / Organisation	Chemwatch	CHEMWATCH EMERGENCY RESPONSE (24/7)
Emergency telephone numbers	1800 039 008	+61 1800 951 288
Other emergency telephone numbers	Not Available	+61 3 9573 3188

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

SECTION 2 Hazards identification

Classification of the substance or mixture

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

Chemwatch Hazard Ratings

		,-	
	Min	Max	
Flammability	1	i	
Toxicity	2		
Body Contact	2		0 = Minimum 1 = Low
Reactivity	2	i	2 = Moderate
Chronic	2	i i	3 = High 4 = Extreme

Poisons Schedule

S6

Issue Date: **03/10/2023**Print Date: **03/20/2023**

Classification [1]

Skin Corrosion/Irritation Category 2, Sensitisation (Skin) Category 1, Serious Eye Damage/Eye Irritation Category 2A,
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 2

Legend:

1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI

Label elements

Hazard pictogram(s)





Signal word

Danger

Hazard statement(s)

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

Precautionary statement(s) General

P101	If medical advice is needed, have product container or label at hand.
P102	Keep out of reach of children.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P260	Do not breathe mist/vapours/spray.

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove person to fresh air and keep comfortable for breathing.
P308+P313	IF exposed or concerned: Get medical advice/ attention.

Precautionary statement(s) Storage

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

Precautionary statement(s) Disposal

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

SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
9016-87-9	>25	polymeric diphenylmethane diisocyanate
Legend:	•	Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - vn from C&L * EU IOELVs available

SECTION 4 First aid measures

 Chemwatch: 36-1270
 Page 3 of 10
 Issue Date: 03/10/2023

 Version No: 8.1
 AMC ECO GRIP B
 Print Date: 03/20/2023

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.
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.
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.

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.
- 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

Issue Date: **03/10/2023**Print Date: **03/20/2023**

- Foam.
- Dry chemical powder.

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

Advice for intelligities	
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear full body protective clothing with breathing apparatus.
Fire/Explosion Hazard	- Combustible Moderate fire hazard when exposed to heat or flame. Combustion products include: carbon dioxide (CO2) isocyanates other pyrolysis products typical of burning organic material. May emit corrosive fumes. 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
HAZCHEM	Not Applicable

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.
Major Spills	 Avoid contamination with water, alkalies and detergent solutions. Material reacts with water and generates gas, pressurises containers with even drum rupture resulting. Moderate hazard. Clear area of personnel and move upwind.

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

SECTION 7 Handling and storage

Precautions for safe handling

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.
Other information	 Store in original containers. Keep containers securely sealed. Store in a well-ventilated area at temperatures between 15oC and 35oC.

Conditions for safe storage, including any incompatibilities

Suitable container	 Metal can or drum Packaging as recommended by manufacturer. Check all containers are clearly labelled and free from leaks.
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. Keep dry NOTE: May develop pressure in containers; open carefully. Vent periodically. Avoid any contamination of this material as it is very reactive and any contamination is potentially hazardous

SECTION 8 Exposure controls / personal protection

Issue Date: **03/10/2023**Print Date: **03/20/2023**

Control parameters

Occupational Exposure Limits (OEL)

INGREDIENT DATA

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure	polymeric diphenylmethane	Isocyanates, all (as-NCO)	0.02	0.07	Not	Not
Standards	diisocyanate		mg/m3	mg/m3	Available	Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
polymeric diphenylmethane diisocyanate	0.15 mg/m3	3.6 mg/m3	22 mg/m3

Ingredient	Original IDLH	Revised IDLH
polymeric diphenylmethane diisocyanate	Not Available	Not Available

MATERIAL DATA

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations.

Exposure controls

Appropriate engineering controls

- All processes in which isocyanates are used should be enclosed wherever possible.
- Total enclosure, accompanied by good general ventilation, should be used to keep atmospheric concentrations below the relevant exposure standards.

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.

Individual protection measures, such as personal protective equipment



NOTE:









Eye and face protection

- Safety glasses with side shields.
- ► Chemical goggles

Skin protection

See Hand protection below

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.

The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from

Hands/feet protection

manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.

- ▶ 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.

Body protection

See Other protection below

Other 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.

- Overalls.
- P.V.C apron.

Respiratory protection

Full face respirator with supplied air.

- · 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
- 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

Issue Date: **03/10/2023**Print Date: **03/20/2023**

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.

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Brownish-red liquid with slightly musty odour, reacts with water.			
Physical state	Liquid	Relative density (Water = 1)	Not Available	
Odour	Not Available	Partition coefficient n-octanol / water	Not Available	
Odour threshold	Not Available	Auto-ignition temperature (°C)	Not Available	
pH (as supplied)	Not Available	Decomposition temperature (°C)	Not Available	
Melting point / freezing point (°C)	Not Applicable	Viscosity (cSt)	Not Available	
Initial boiling point and boiling range (°C)	>300 (decomposes)	Molecular weight (g/mol)	Not Applicable	
Flash point (°C)	189 (CC)	Taste	Not Available	
Evaporation rate	Not Available	Explosive properties	Not Available	
Flammability	Not Applicable	Oxidising properties	Not Available	
Upper Explosive Limit (%)	Not Available	Surface Tension (dyn/cm or mN/m)	Not Available	
Lower Explosive Limit (%)	Not Available	Volatile Component (%vol)	Not Available	
Vapour pressure (kPa)	Not Available	Gas group	Not Available	
Solubility in water	Reacts	pH as a solution (1%)	Not Available	
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available	

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	 Unstable in the presence of incompatible materials. Product is considered stable.
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 course of normal handling, may be harmful. 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 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.
Ingestion	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.

Chemwatch: 36-1270 Page 7 of 10 Issue Date: 03/10/2023 Version No: 8.1 Print Date: 03/20/2023

AMC ECO GRIP B

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

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, 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.

Eve

Evidence exists, or practical experience predicts, that the material may cause eye irritation in a substantial number of individuals and/or may produce significant ocular lesions which are present twenty-four hours or more after instillation into the eye(s) of experimental animals. Repeated or prolonged eye contact may cause inflammation characterised by a temporary redness (similar to windburn) of the conjunctiva (conjunctivitis); temporary impairment of vision and/or other transient eye damage/ulceration may occur.

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.

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.

Harmful: danger of serious damage to health by prolonged exposure through inhalation.

Serious damage (clear functional disturbance or morphological change which may have toxicological significance) is likely to be caused by repeated or prolonged exposure. As a rule the material produces, or contains a substance which produces severe

Chronic

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.

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.

AMC ECO GRIP B

Not Available	Not Available
TOXICITY	IRRITATION
Dermal (rabbit) LD50: >9400 mg/kg ^[2]	Eye (rabbit): 100 mg - mild
Inhalation(Rat) LC50: 0.49 mg/L4h ^[2]	
Oral (Rat) LD50: 43000 mg/kg ^[2]	

IRRITATION

Legend:

polymeric diphenylmethane diisocyanate

> 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

product The following information refers to contact allergens as a group and may not be specific to this product.

TOXICITY

Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound.

Allergic reactions which develop in the respiratory passages as bronchial asthma or rhinoconjunctivitis, are mostly the result of DIISOCYANATE 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.

Particular attention is drawn to so-called atopic diathesis which is characterised by an increased susceptibility to allergic rhinitis,

DIPHENYI METHANE

POLYMERIC

Chemwatch: 36-1270 Version No: 8.1

Page **8** of **10**

Issue Date: **03/10/2023**Print Date: **03/20/2023**

AMC ECO GRIP B

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. 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.

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. 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	X	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

SECTION 12 Ecological information

Toxicity

AMC ECO GRIP B	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
polymeric	Endpoint	Test Duration (hr)	Species	Value	Source
diphenylmethane diisocyanate	Not Available	Not Available	Not Available	Not Available	Not Available
Legend:	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				

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
	No Data available for all ingredients	No Data available for all ingredients

Bioaccumulative potential

Ingredient	Bioaccumulation	
	No Data available for all ingredients	

Mobility in soil

Ingredient	Mobility	
	No Data available for all ingredients	

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging

Containers may still present a chemical hazard/ danger when empty.

Issue Date: **03/10/2023**Print Date: **03/20/2023**

disposal

- Return to supplier for reuse/ recycling if possible.
- Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area.
- ▶ **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.
- DO NOT recycle spilled material.
- ▶ Consult State Land Waste Management Authority for disposal.

SECTION 14 Transport information

Labels Required

Marine Pollutant	NO
HAZCHEM	Not Applicable

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

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

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

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
polymeric diphenylmethane diisocyanate	Not Available

Transport in bulk in accordance with the IGC Code

Product name	Ship Type
polymeric diphenylmethane diisocyanate	Not Available

SECTION 15 Regulatory information

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

polymeric diphenylmethane diisocyanate is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Model Work Health and Safety Regulations - Hazardous chemicals (other than lead) requiring health monitoring

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6

Australian Inventory of Industrial Chemicals (AIIC)
International Agency for Research on Cancer (IARC) - Agents Classified by
the IARC Monographs - Not Classified as Carcinogenic

National Inventory Status

National Inventory	Status		
Australia - AIIC / Australia Non-Industrial Use	Yes		
Canada - DSL	Yes		
Canada - NDSL	No (polymeric diphenylmethane diisocyanate)		
China - IECSC	Yes		
Europe - EINEC / ELINCS / NLP	No (polymeric diphenylmethane diisocyanate)		
Japan - ENCS	Yes		
Korea - KECI	Yes		
New Zealand - NZIoC	Yes		
Philippines - PICCS	Yes		
USA - TSCA	Yes		

Page 10 of 10

Issue Date: 03/10/2023 Print Date: 03/20/2023

National Inventory	Status
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes
	Yes = All CAS declared ingredients are on the inventory
Legend:	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	03/10/2023
Initial Date	07/03/2013

SDS Version Summary

Version	Date of Update	Sections Updated
7.1	12/23/2022	Classification review due to GHS Revision change.
8.1	03/10/2023	Classification change due to full database hazard calculation/update.

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.

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 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

This document is copyright.

Apart from any fair dealing for the purposes of private study, research, review or criticism, as permitted under the Copyright Act, no part may be reproduced by any process without written permission from CHEMWATCH.