



TensorGrip T30 Canister Spray Adhesive

QUIN GLOBAL ASIA PACIFIC

Version No: 2.2

Safety Data Sheet according to WHS Regulations (Hazardous Chemicals) Amendment 2020 and ADG requirements

Chemwatch Hazard Alert Code: 4

Issue Date: 20/12/2022

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S.GHS.AUS.EN

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

Product Identifier

Product name	TensorGrip T30 Canister Spray Adhesive
Chemical Name	Not Applicable
Synonyms	Not Available
Proper shipping name	CHEMICAL UNDER PRESSURE, FLAMMABLE, TOXIC, N.O.S. (contains dimethyl ether)
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	Adhesives
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Details of the manufacturer or supplier of the safety data sheet

Registered company name	QUIN GLOBAL ASIA PACIFIC
Address	63 Hincksman Street Queanbeyan, NSW 2620 Australia
Telephone	+61 2 6175 0574
Fax	Not Available
Website	www.quinglobal.com
Email	sales@quinglobal.com.au

Emergency telephone number

Association / Organisation	CHEMWATCH EMERGENCY RESPONSE
Emergency telephone numbers	+61 1800 951 288
Other emergency telephone numbers	+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

Poisons Schedule	Not Applicable
Classification [1]	Serious Eye Damage/Eye Irritation Category 2A, Sensitisation (Respiratory) Category 1, Specific Target Organ Toxicity - Repeated Exposure Category 2, Acute Toxicity (Oral) Category 4, Skin Corrosion/Irritation Category 2, Gases Under Pressure (Liquefied Gas), Sensitisation (Skin) Category 1, Carcinogenicity Category 2, Flammable Gases Category 1A
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)

H319	Causes serious eye irritation.
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H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
H373	May cause damage to organs through prolonged or repeated exposure. (Skin) (Dermal)
AUH044	Risk of explosion if heated under confinement.
H302	Harmful if swallowed.
H315	Causes skin irritation.
H280	Contains gas under pressure; may explode if heated.
H317	May cause an allergic skin reaction.
H351	Suspected of causing cancer.
H220	Extremely flammable gas.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P210	Keep away from heat, hot surfaces, sparks, open flames and other ignition sources. No smoking.
P260	Do not breathe gas.
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.
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.
P308+P313	IF exposed or concerned: Get medical advice/ attention.
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER/doctor/physician/first aider.
P377	Leaking gas fire: Do not extinguish, unless leak can be stopped safely.
P302+P352	IF ON SKIN: Wash with plenty of water and soap.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P314	Get medical advice/attention if you feel unwell.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.
P337+P313	If eye irritation persists: Get medical advice/attention.
P362+P364	Take off contaminated clothing and wash it before reuse.
P381	In case of leakage, eliminate all ignition sources.
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.
P410+P403	Protect from sunlight. Store in a well-ventilated place.

Precautionary statement(s) Disposal

P501	Dispose of contents/container to authorised hazardous or special waste collection point in accordance with any local regulation.
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SECTION 3 Composition / information on ingredients

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
75-09-2	20-40	<u>methylene chloride</u>
101-68-8	10-30	<u>4,4'-diphenylmethane diisocyanate (MDI)</u>
141-78-6	<5	<u>ethyl acetate</u>
115-10-6	30-50	<u>dimethyl ether</u>
Legend:	1. Classified by Chemwatch; 2. Classification drawn from HCIS; 3. Classification drawn from Regulation (EU) No 1272/2008 - Annex VI; 4. Classification drawn from C&L; * EU IOELVs available	

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	<ul style="list-style-type: none"> ▸ If product comes in contact with eyes remove the patient from gas source or contaminated area. ▸ Take the patient to the nearest eye wash, shower or other source of clean water. ▸ Open the eyelid(s) wide to allow the material to evaporate. ▸ Gently rinse the affected eye(s) with clean, cool water for at least 15 minutes. Have the patient lie or sit down and tilt the head back. Hold the
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	<p>eyelid(s) open and pour water slowly over the eyeball(s) at the inner corners, letting the water run out of the outer corners.</p> <ul style="list-style-type: none"> ▶ The patient may be in great pain and wish to keep the eyes closed. It is important that the material is rinsed from the eyes to prevent further damage. ▶ Ensure that the patient looks up, and side to side as the eye is rinsed in order to better reach all parts of the eye(s) ▶ Transport to hospital or doctor. ▶ Even when no pain persists and vision is good, a doctor should examine the eye as delayed damage may occur. ▶ If the patient cannot tolerate light, protect the eyes with a clean, loosely tied bandage. ▶ Ensure verbal communication and physical contact with the patient. <p>DO NOT allow the patient to rub the eyes DO NOT allow the patient to tightly shut the eyes DO NOT introduce oil or ointment into the eye(s) without medical advice DO NOT use hot or tepid water.</p>
Skin Contact	<p>If skin contact occurs:</p> <ul style="list-style-type: none"> ▶ 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. <p>In case of cold burns (frost-bite):</p> <ul style="list-style-type: none"> ▶ Move casualty into warmth before thawing the affected part; if feet are affected carry if possible ▶ Bathe the affected area immediately in luke-warm water (not more than 35 deg C) for 10 to 15 minutes, immersing if possible and without rubbing ▶ DO NOT apply hot water or radiant heat. ▶ Apply a clean, dry, light dressing of "fluffed-up" dry gauze bandage ▶ If a limb is involved, raise and support this to reduce swelling ▶ If an adult is involved and where intense pain occurs provide pain killers such as paracetamol ▶ Transport to hospital, or doctor ▶ Subsequent blackening of the exposed tissue indicates potential of necrosis, which may require amputation.
Inhalation	<p>Following uptake by inhalation, move person to an area free from risk of further exposure. Oxygen or artificial respiration should be administered as needed. Asthmatic-type symptoms may develop and may be immediate or delayed up to several hours. Treatment is essentially symptomatic. A physician should be consulted.</p> <ul style="list-style-type: none"> ▶ Following exposure to gas, remove the patient from the gas source or contaminated area. ▶ NOTE: Personal Protective Equipment (PPE), including positive pressure self-contained breathing apparatus may be required to assure the safety of the rescuer. ▶ Prostheses such as false teeth, which may block the airway, should be removed, where possible, prior to initiating first aid procedures. ▶ If the patient is not breathing spontaneously, administer rescue breathing. ▶ If the patient does not have a pulse, administer CPR. ▶ If medical oxygen and appropriately trained personnel are available, administer 100% oxygen. ▶ Summon an emergency ambulance. If an ambulance is not available, contact a physician, hospital, or Poison Control Centre for further instruction. ▶ Keep the patient warm, comfortable and at rest while awaiting medical care. ▶ MONITOR THE BREATHING AND PULSE, CONTINUOUSLY. ▶ Administer rescue breathing (preferably with a demand-valve resuscitator, bag-valve mask-device, or pocket mask as trained) or CPR if necessary.
Ingestion	<p>Not considered a normal route of entry.</p> <ul style="list-style-type: none"> ▶ Avoid giving milk or oils. ▶ Avoid giving alcohol. ▶ If spontaneous vomiting appears imminent or occurs, hold patient's head down, lower than their hips to help avoid possible aspiration of vomitus.

Indication of any immediate medical attention and special treatment needed

for intoxication due to Freons/ Halons;

A: Emergency and Supportive Measures

- ▶ Maintain an open airway and assist ventilation if necessary
- ▶ Treat coma and arrhythmias if they occur. Avoid (adrenaline) epinephrine or other sympathomimetic amines that may precipitate ventricular arrhythmias. Tachyarrhythmias caused by increased myocardial sensitisation may be treated with propranolol, 1-2 mg IV or esmolol 25-100 microgm/kg/min IV.
- ▶ Monitor the ECG for 4-6 hours

B: Specific drugs and antidotes:

- ▶ There is no specific antidote

C: Decontamination

- ▶ Inhalation; remove victim from exposure, and give supplemental oxygen if available.
- ▶ Ingestion; (a) Prehospital: Administer activated charcoal, if available. **DO NOT** induce vomiting because of rapid absorption and the risk of abrupt onset CNS depression. (b) Hospital: Administer activated charcoal, although the efficacy of charcoal is unknown. Perform gastric lavage only if the ingestion was very large and recent (less than 30 minutes)

D: Enhanced elimination:

- ▶ There is no documented efficacy for diuresis, haemodialysis, haemoperfusion, or repeat-dose charcoal.

POISONING and DRUG OVERDOSE, Californian Poison Control System Ed. Kent R Olson; 3rd Edition

- ▶ Do not administer sympathomimetic drugs unless absolutely necessary as material may increase myocardial irritability.
- ▶ No specific antidote.
- ▶ Because rapid absorption may occur through lungs if aspirated and cause systematic effects, the decision of whether to induce vomiting or not should be made by an attending physician.
- ▶ If lavage is performed, suggest endotracheal and/or esophageal control.
- ▶ Danger from lung aspiration must be weighed against toxicity when considering emptying the stomach.
- ▶ Treatment based on judgment of the physician in response to reactions of the patient

for lower alkyl ethers:

BASIC TREATMENT

- ▶ Establish a patent airway with suction where necessary.
- ▶ Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- ▶ Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- ▶ A low-stimulus environment must be maintained.
- ▶ Monitor and treat, where necessary, for shock.
- ▶ Anticipate and treat, where necessary, for seizures.
- ▶ **DO NOT** use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.

ADVANCED TREATMENT

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- ▶ Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- ▶ Positive-pressure ventilation using a bag-valve mask might be of use.
- ▶ Monitor and treat, where necessary, for arrhythmias.
- ▶ Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- ▶ Drug therapy should be considered for pulmonary oedema.
- ▶ Hypotension without signs of hypovolaemia may require vasopressors.
- ▶ Treat seizures with diazepam.
- ▶ Proparacaine hydrochloride should be used to assist eye irrigation.

EMERGENCY DEPARTMENT

- ▶ Laboratory analysis of complete blood count, serum electrolytes, BUN, creatinine, glucose, urinalysis, baseline for serum aminotransferases (ALT and AST), calcium, phosphorus and magnesium, may assist in establishing a treatment regime. Other useful analyses include anion and osmolar gaps, arterial blood gases (ABGs), chest radiographs and electrocardiograph.
- ▶ Ethers may produce anion gap acidosis. Hyperventilation and bicarbonate therapy might be indicated.
- ▶ Haemodialysis might be considered in patients with impaired renal function.
- ▶ Consult a toxicologist as necessary.

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

For gas exposures:

BASIC TREATMENT

- ▶ Establish a patent airway with suction where necessary.
- ▶ Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- ▶ Administer oxygen by non-rebreather mask at 10 to 15 l/min.
- ▶ Monitor and treat, where necessary, for pulmonary oedema.
- ▶ Monitor and treat, where necessary, for shock.
- ▶ Anticipate seizures.

ADVANCED TREATMENT

- ▶ Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.
- ▶ Positive-pressure ventilation using a bag-valve mask might be of use.
- ▶ Monitor and treat, where necessary, for arrhythmias.
- ▶ Start an IV D5W TKO. If signs of hypovolaemia are present use lactated Ringers solution. Fluid overload might create complications.
- ▶ Drug therapy should be considered for pulmonary oedema.
- ▶ Hypotension with signs of hypovolaemia requires the cautious administration of fluids. Fluid overload might create complications.
- ▶ Treat seizures with diazepam.
- ▶ Proparacaine hydrochloride should be used to assist eye irrigation.

BRONSTEIN, A.C. and CURRANCE, P.L.

EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

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

- ▶ Alcohol stable foam.
- ▶ Dry chemical powder.
- ▶ BCF (where regulations permit).
- ▶ Carbon dioxide.
- ▶ Water spray or fog - Large fires only.

**DO NOT EXTINGUISH BURNING GAS UNLESS LEAK CAN BE STOPPED SAFELY:
OTHERWISE: LEAVE GAS TO BURN.**

FOR SMALL FIRE:

- ▶ Dry chemical, CO2 or water spray to extinguish gas (only if absolutely necessary and safe to do so).
- ▶ **DO NOT** use water jets.

FOR LARGE FIRE:

- ▶ Cool cylinder by direct flooding quantities of water onto upper surface until well after fire is out.
- ▶ **DO NOT** direct water at source of leak or venting safety devices as icing may occur.

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

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Fire Fighting	<p>FOR FIRES INVOLVING MANY GAS CYLINDERS:</p> <ul style="list-style-type: none"> ▶ To stop the flow of gas, specifically trained personnel may inert the atmosphere to reduce oxygen levels thus allowing the capping of leaking container(s). ▶ Reduce the rate of flow and inject an inert gas, if possible, before completely stopping the flow to prevent flashback. ▶ DO NOT extinguish the fire until the supply is shut off otherwise an explosive re-ignition may occur. ▶ If the fire is extinguished and the flow of gas continues, used increased ventilation to prevent build-up, of explosive atmosphere. ▶ Use non-sparking tools to close container valves. ▶ Be CAUTIOUS of a Boiling Liquid Evaporating Vapour Explosion, <i>BLEVE</i>, if fire is impinging on surrounding containers. ▶ Direct 2500 litre/min (500 gpm) water stream onto containers above liquid level with the assistance remote monitors. <p>-----</p> <p>GENERAL</p> <p>-----</p> <ul style="list-style-type: none"> ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ May be violently or explosively reactive. ▶ Wear breathing apparatus plus protective gloves. ▶ Consider evacuation ▶ Fight fire from a safe distance, with adequate cover. ▶ If safe, switch off electrical equipment until vapour fire hazard removed. ▶ Use water delivered as a fine spray to control fire and cool adjacent area. ▶ DO NOT approach cylinders suspected to be hot. ▶ Cool fire-exposed cylinders with water spray from a protected location. ▶ If safe to do so, remove containers from path of fire. <p>-----</p> <p>FIRE FIGHTING PROCEDURES:</p> <p>-----</p> <ul style="list-style-type: none"> ▶ The only safe way to extinguish a flammable gas fire is to stop the flow of gas. ▶ If the flow cannot be stopped, allow the entire contents of the cylinder to burn while cooling the cylinder and surroundings with water from a suitable distance. ▶ Extinguishing the fire without stopping the gas flow may permit the formation of ignitable or explosive mixtures with air. These mixtures may propagate to a source of ignition. <p>-----</p> <p>SPECIAL HAZARDS</p> <p>-----</p> <ul style="list-style-type: none"> ▶ Excessive pressures may develop in a gas cylinder exposed in a fire; this may result in explosion. ▶ Cylinders with pressure relief devices may release their contents as a result of fire and the released gas may constitute a further source of hazard for the fire-fighter. ▶ Cylinders without pressure-relief valves have no provision for controlled release and are therefore more likely to explode if exposed to fire. <p>-----</p> <p>FIRE FIGHTING REQUIREMENTS:</p> <p>-----</p> <p>The need for proximity, entry and flash-over protection and special protective clothing should be determined for each incident, by a competent fire-fighting safety professional.</p>
Fire/Explosion Hazard	<ul style="list-style-type: none"> ▶ HIGHLY FLAMMABLE: will be easily ignited by heat, sparks or flames. ▶ Will form explosive mixtures with air ▶ Fire exposed containers may vent contents through pressure relief valves thereby increasing fire intensity and/ or vapour concentration. ▶ Vapours may travel to source of ignition and flash back. ▶ Containers may explode when heated - Ruptured cylinders may rocket ▶ Fire may produce irritating, poisonous or corrosive gases. ▶ Runoff may create fire or explosion hazard. ▶ May decompose explosively when heated or involved in fire. ▶ High concentration of gas may cause asphyxiation without warning. ▶ Contact with gas may cause burns, severe injury and/ or frostbite. <p>Combustion products include:</p> <p>,</p> <p>carbon monoxide (CO)</p> <p>,</p> <p>carbon dioxide (CO₂)</p> <p>,</p> <p>hydrogen cyanide</p> <p>,</p> <p>isocyanates</p> <p>,</p> <p>and minor amounts of</p> <p>,</p> <p>hydrogen chloride</p> <p>,</p> <p>phosgene</p> <p>,</p> <p>nitrogen oxides (NO_x)</p> <p>,</p> <p>other pyrolysis products typical of burning organic material.</p> <p>Contains low boiling substance: Closed containers may rupture due to pressure buildup under fire conditions.</p> <ul style="list-style-type: none"> ▶ Vented gas is more dense than air and may collect in pits, basements.
HAZCHEM	2WE

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

Continued...

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Minor Spills	<ul style="list-style-type: none"> ▶ Avoid breathing vapour and any contact with liquid or gas. Protective equipment including respirator should be used. ▶ DO NOT enter confined spaces where gas may have accumulated. ▶ Shut off all sources of possible ignition and increase ventilation. ▶ Clear area of personnel. ▶ Stop leak only if safe to do so. ▶ Remove leaking cylinders to safe place. release pressure under safe controlled conditions by opening valve. ▶ Orientate cylinder so that the leak is gas, not liquid, to minimise rate of leakage ▶ Keep area clear of personnel until gas has dispersed.
Major Spills	<p>For isocyanate spills of less than 40 litres (2 m2):</p> <ul style="list-style-type: none"> ▶ 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. ▶ Absorb and decontaminate. - Completely cover the spill with wet sand, wet earth, vermiculite or other similar absorbent. - Add neutraliser (for suitable formulations: see below) to the adsorbent materials (equal to that of estimated spill pool volume). Intensify contact between spill, absorbent and neutraliser by carefully mixing with a rake and allow to react for 15 minutes ▶ Shovel absorbent/decontaminant solution mixture into a steel drum. ▶ Decontaminate surface. - Pour an equal amount of neutraliser solution over contaminated surface. - Scrub area with a stiff bristle brush, using moderate pressure. - Completely cover decontaminant with vermiculite or other similar absorbent. - After 5 minutes, shovel absorbent/decontamination solution mixture into the same steel drum used above. ▶ Monitor for residual isocyanate. If surface is decontaminated, proceed to next step. If contamination persists, repeat decontaminate procedure immediately above ▶ Place loosely covered drum (release of carbon dioxide) outside for at least 72 hours. Label waste-containing drum appropriately. Remove waste materials for incineration. ▶ Decontaminate and remove personal protective equipment. ▶ Return to normal operation. ▶ Conduct accident investigation and consider measures to prevent reoccurrence. <p>Decontamination: Treat isocyanate spills with sufficient amounts of isocyanate decontaminant preparation ("neutralising fluid"). Isocyanates and polyisocyanates are generally not miscible with water. Liquid surfactants are necessary to allow better dispersion of isocyanate and neutralising fluids/preparations. Alkaline neutralisers react faster than water/surfactant mixtures alone. Typically, such a preparation may consist of: Sawdust: 20 parts by weight Kieselguhr 40 parts by weight plus a mixture of {ammonia (s.g. 0.880) 8% v/v non-ionic surfactant 2% v/v water 90% v/v}.</p> <p>Let stand for 24 hours Three commonly used neutralising fluids each exhibit advantages in different situations.</p> <p>Formulation A : liquid surfactant 0.2-2% sodium carbonate 5-10% water to 100%</p> <p>Formulation B liquid surfactant 0.2-2% concentrated ammonia 3-8% water to 100%</p> <p>Formulation C ethanol, isopropanol or butanol 50% concentrated ammonia 5% water to 100%</p> <p>After application of any of these formulae, let stand for 24 hours.</p> <p>Formulation B reacts faster than Formulation A. However, ammonia-based neutralisers should be used only under well-ventilated conditions to avoid overexposure to ammonia or if members of the emergency team wear suitable respiratory protection. Formulation C is especially suitable for cleaning of equipment from unreacted isocyanate and neutralizing under freezing conditions. Regard has to be taken to the flammability of the alcoholic solution.</p> <ul style="list-style-type: none"> ▶ 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. ▶ Clear area of all unprotected personnel and move upwind. ▶ Alert Emergency Authority and advise them of the location and nature of hazard. ▶ May be violently or explosively reactive. ▶ Wear full body clothing with breathing apparatus. ▶ Prevent by any means available, spillage from entering drains and water-courses. ▶ Consider evacuation. ▶ Shut off all possible sources of ignition and increase ventilation. ▶ No smoking or naked lights within area. ▶ Use extreme caution to prevent violent reaction. ▶ Stop leak only if safe to do so. ▶ Water spray or fog may be used to disperse vapour. ▶ DO NOT enter confined space where gas may have collected. ▶ Keep area clear until gas has dispersed. <ul style="list-style-type: none"> ▶ Remove leaking cylinders to a safe place. ▶ Fit vent pipes. Release pressure under safe, controlled conditions ▶ Burn issuing gas at vent pipes. ▶ DO NOT exert excessive pressure on valve; DO NOT attempt to operate damaged valve.

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

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SECTION 7 Handling and storage

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> Consider use in closed pressurised systems, fitted with temperature, pressure and safety relief valves which are vented for safe dispersal. Use only properly specified equipment which is suitable for this product, its supply pressure and temperature The tubing network design connecting gas cylinders to the delivery system should include appropriate pressure indicators and vacuum or suction lines. Fully-welded types of pressure gauges, where the bourdon tube sensing element is welded to the gauge body, are recommended. Before connecting gas cylinders, ensure manifold is mechanically secure and does not contain another gas. Before disconnecting gas cylinder, isolate supply line segment proximal to cylinder, remove trapped gas in supply line with aid of vacuum pump When connecting or replacing cylinders take care to avoid airborne particulates violently ejected when system pressurises. Consider the use of doubly-contained piping; diaphragm or bellows sealed, soft seat valves; backflow prevention devices; flash arrestors; and flow monitoring or limiting devices. Gas cabinets, with appropriate exhaust treatment, are recommended, as is automatic monitoring of the secondary enclosures and work areas for release. Use a pressure reducing regulator when connecting cylinder to lower pressure (<100 psig) piping or systems Use a check valve or trap in the discharge line to prevent hazardous back-flow into the cylinder Check regularly for spills or leaks. Keep valves tightly closed but do not apply extra leverage to hand wheels or cylinder keys. Open valve slowly. If valve is resistant to opening then contact your supervisor Valve protection caps must remain in place unless container is secured with valve outlet piped to use point. Never insert a pointed object (e.g hooks) into cylinder cap openings as a means to open cap or move cylinder. Such action can inadvertently turn the valve and gas a gas leak. Use an adjustable strap instead of wrench to free an over-tight or rusted cap. A bubble of gas may buildup behind the outlet dust cap during transportation, after prolonged storage, due to defective cylinder valve or if a dust cap is inserted without adequate evacuation of gas from the line. When loosening dust cap, preferably stand cylinder in a suitable enclosure and take cap off slowly. Never face the dust cap directly when removing it; point cap away from any personnel or any object that may pose a hazard. under negative pressure (relative to atmospheric gas) Suck back of water into the container must be prevented. Do not allow backfeed into the container. Do NOT drag, slide or roll cylinders - use a suitable hand truck for cylinder movement Test for leakage with brush and detergent - NEVER use a naked flame. Do NOT heat cylinder by any means to increase the discharge rate of product from cylinder. Leaking gland nuts may be tightened if necessary. If a cylinder valve will not close completely, remove the cylinder to a well ventilated location (e.g. outside) and, when empty, tag as FAULTY and return to supplier. Obtain a work permit before attempting any repairs. DO NOT attempt repair work on lines, vessels under pressure. Atmospheres must be tested and O.K. before work resumes after leakage. <ul style="list-style-type: none"> Avoid generation of static electricity. Earth all lines and equipment. DO NOT transfer gas from one cylinder to another.
Other information	<ul style="list-style-type: none"> Cylinders should be stored in a purpose-built compound with good ventilation, preferably in the open. Such compounds should be sited and built in accordance with statutory requirements. The storage compound should be kept clear and access restricted to authorised personnel only. Cylinders stored in the open should be protected against rust and extremes of weather. Cylinders in storage should be properly secured to prevent toppling or rolling. Cylinder valves should be closed when not in use. Where cylinders are fitted with valve protection this should be in place and properly secured. Gas cylinders should be segregated according to the requirements of the Dangerous Goods Act(s). Cylinders containing flammable gases should be stored away from other combustible materials. Alternatively a fire-resistant partition may be used. Check storage areas for flammable or hazardous concentrations of gases prior to entry. Preferably store full and empty cylinders separately. Full cylinders should be arranged so that the oldest stock is used first. Cylinders in storage should be checked periodically for general condition and leakage. Protect cylinders against physical damage. Move and store cylinders correctly as instructed for their manual handling. <p>NOTE: A 'G' size cylinder is usually too heavy for an inexperienced operator to raise or lower.</p>

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> DO NOT use aluminium or galvanised containers Cylinder: <ul style="list-style-type: none"> Ensure the use of equipment rated for cylinder pressure. Ensure the use of compatible materials of construction. Valve protection cap to be in place until cylinder is secured, connected. Cylinder must be properly secured either in use or in storage. Cylinder valve must be closed when not in use or when empty. Segregate full from empty cylinders. <p>WARNING: Suckback into cylinder may result in rupture. Use back-flow preventive device in piping.</p>
Storage incompatibility	<p>Dimethyl ether:</p> <ul style="list-style-type: none"> is a peroxidisable gas may be heat and shock sensitive is able to form unstable peroxides on prolonged exposure to air reacts violently with oxidisers, aluminium hydride, lithium aluminium hydride is incompatible with strong acids, metal salts <p>Methylene chloride</p> <ul style="list-style-type: none"> is a combustible liquid under certain circumstances even though there is no measurable flash point and it is difficult to ignite its is flammable in ambient air in the range 12-23%; increased oxygen content can greatly enhance fire and explosion potential contact with hot surfaces and elevated temperatures can form fumes of hydrogen chloride and phosgene reacts violently with active metals, aluminium, lithium, methanol., peroxydisulphuryl difluoride, potassium, potassium tert-butoxide, sodium forms explosive mixtures with nitric acid is incompatible with strong oxidisers, strong caustics, alkaline earths and alkali metals attacks some plastics, coatings and rubber may generate electrostatic charge due to low conductivity Esters react with acids to liberate heat along with alcohols and acids. Strong oxidising acids may cause a vigorous reaction with esters that is sufficiently exothermic to ignite the reaction products. Heat is also generated by the interaction of esters with caustic solutions. Flammable hydrogen is generated by mixing esters with alkali metals and hydrides.

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- Esters may be incompatible with aliphatic amines and nitrates.
- Segregate from alcohol, water.

Ethers

- may react violently with strong oxidising agents and acids.
 - can act as bases.- they form salts with strong acids and addition complexes with Lewis acids; the complex between diethyl ether and boron trifluoride is an example.
 - are generally stable to water under neutral conditions and ambient temperatures.
 - are hydrolysed by heating in the presence of halogen acids, particularly hydrogen iodide
 - are relatively inert In other reactions, which typically involve the breaking of the carbon-oxygen bond
 - The tendency of many ethers to form explosive peroxides is well documented.
 - Ethers lacking non-methyl hydrogen atoms adjacent to the ether link are thought to be relatively safe.
 - When solvents have been freed from peroxides (by percolation through a column of activated alumina for example), the absorbed peroxides must promptly be desorbed by treatment with the polar solvents methanol or water, which should be discarded safely.
 - 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. Acids and bases initiate polymerisation reactions in these materials.
 - Isocyanates also can react with themselves. Aliphatic di-isocyanates can form trimers, which are structurally related to cyanuric acid.
 - Isocyanates participate in Diels-Alder reactions, functioning as dienophiles
 - Isocyanates easily form adducts with carbodiimides, isothiocyanates, ketenes, or with substrates containing activated CC or CN bonds.
 - Some isocyanates react with water to form amines and liberate carbon dioxide. This reaction may also generate large volumes of foam and heat. Foaming spaces may produce pressure in confined spaces or containers. Gas generation may pressurise drums to the point of rupture.
 - Do NOT reseal container if contamination is expected
 - Open all containers with care
 - Base-catalysed reactions of isocyanates with alcohols should be carried out in inert solvents. Such reactions in the absence of solvents often occur with explosive violence,
 - Isocyanates will attack and embrittle some plastics and rubbers.
 - The isocyanate anion is a pseudohalide (syn pseudohalogen) whose chemistry, resembling that of the true halogens, allows it to substitute for halogens in several classes of chemical compounds.. The behavior and chemical properties of the several pseudohalides are identical to that of the true halide ions.
 - 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
- Compressed gases may contain a large amount of kinetic energy over and above that potentially available from the energy of reaction produced by the gas in chemical reaction with other substances

SECTION 8 Exposure controls / personal protection**Control parameters****Occupational Exposure Limits (OEL)****INGREDIENT DATA**

Source	Ingredient	Material name	TWA	STEL	Peak	Notes
Australia Exposure Standards	methylene chloride	Methylene chloride	50 ppm / 174 mg/m3	Not Available	Not Available	Not Available
Australia Exposure Standards	4,4'-diphenylmethane diisocyanate (MDI)	Methylene bisphenyl isocyanate (MDI)	0.02 mg/m3	0.07 mg/m3	Not Available	Not Available
Australia Exposure Standards	ethyl acetate	Ethyl acetate	200 ppm / 720 mg/m3	1440 mg/m3 / 400 ppm	Not Available	Not Available
Australia Exposure Standards	dimethyl ether	Dimethyl ether	400 ppm / 760 mg/m3	950 mg/m3 / 500 ppm	Not Available	Not Available

Emergency Limits

Ingredient	TEEL-1	TEEL-2	TEEL-3
methylene chloride	Not Available	Not Available	Not Available
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
ethyl acetate	1,200 ppm	1,700 ppm	10000** ppm
dimethyl ether	3,000 ppm	3800* ppm	7200* ppm

Ingredient	Original IDLH	Revised IDLH
methylene chloride	2,300 ppm	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	75 mg/m3	Not Available
ethyl acetate	2,000 ppm	Not Available
dimethyl ether	Not Available	Not Available

Exposure controls

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Appropriate engineering controls	<p>Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection. The basic types of engineering controls are:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.</p> <p>Employers may need to use multiple types of controls to prevent employee overexposure.</p> <ul style="list-style-type: none"> Employees exposed to confirmed human carcinogens should be authorized to do so by the employer, and work in a regulated area. Work should be undertaken in an isolated system such as a "glove-box". Employees should wash their hands and arms upon completion of the assigned task and before engaging in other activities not associated with the isolated system. Within regulated areas, the carcinogen should be stored in sealed containers, or enclosed in a closed system, including piping systems, with any sample ports or openings closed while the carcinogens are contained within. Open-vessel systems are prohibited. Each operation should be provided with continuous local exhaust ventilation so that air movement is always from ordinary work areas to the operation. Exhaust air should not be discharged to regulated areas, non-regulated areas or the external environment unless decontaminated. Clean make-up air should be introduced in sufficient volume to maintain correct operation of the local exhaust system. For maintenance and decontamination activities, authorized employees entering the area should be provided with and required to wear clean, impervious garments, including gloves, boots and continuous-air supplied hood. Prior to removing protective garments the employee should undergo decontamination and be required to shower upon removal of the garments and hood. Except for outdoor systems, regulated areas should be maintained under negative pressure (with respect to non-regulated areas). Local exhaust ventilation requires make-up air be supplied in equal volumes to replaced air. Laboratory hoods must be designed and maintained so as to draw air inward at an average linear face velocity of 0.76 m/sec with a minimum of 0.64 m/sec. Design and construction of the fume hood requires that insertion of any portion of the employees body, other than hands and arms, be disallowed.
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> Chemical goggles. Full face shield may be required for supplementary but never for primary protection of eyes. 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. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]
Skin protection	See Hand protection below
Hands/feet protection	<p>NOTE:</p> <ul style="list-style-type: none"> 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. <p>For esters:</p> <ul style="list-style-type: none"> Do NOT use natural rubber, butyl rubber, EPDM or polystyrene-containing materials. 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 When handling sealed and suitably insulated cylinders wear cloth or leather gloves. Insulated gloves: <p>NOTE: Insulated gloves should be loose fitting so that may be removed quickly if liquid is spilled upon them. Insulated gloves are not made to permit hands to be placed in the liquid; they provide only short-term protection from accidental contact with the liquid.</p>
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> Employees working with confirmed human carcinogens should be provided with, and be required to wear, clean, full body protective clothing (smocks, coveralls, or long-sleeved shirt and pants), shoe covers and gloves prior to entering the regulated area. [AS/NZS ISO 6529:2006 or national equivalent] Employees engaged in handling operations involving carcinogens should be provided with, and required to wear and use half-face filter-type respirators with filters for dusts, mists and fumes, or air purifying canisters or cartridges. A respirator affording higher levels of protection may be substituted. [AS/NZS 1715 or national equivalent] Emergency deluge showers and eyewash fountains, supplied with potable water, should be located near, within sight of, and on the same level with locations where direct exposure is likely. Prior to each exit from an area containing confirmed human carcinogens, employees should be required to remove and leave protective clothing and equipment at the point of exit and at the last exit of the day, to place used clothing and equipment in impervious containers at the point of exit for purposes of decontamination or disposal. The contents of such impervious containers must be identified with suitable labels. For maintenance and decontamination activities, authorized employees entering the area should be provided with and required to wear clean, impervious garments, including gloves, boots and continuous-air supplied hood. Prior to removing protective garments the employee should undergo decontamination and be required to shower upon removal of the garments and hood. The clothing worn by process operators insulated from earth may develop static charges far higher (up to 100 times) than the minimum ignition energies for various flammable gas-air mixtures. This holds true for a wide range of clothing materials including cotton. Avoid dangerous levels of charge by ensuring a low resistivity of the surface material worn outermost. <p>BREThERICK: Handbook of Reactive Chemical Hazards.</p> <ul style="list-style-type: none"> Protective overalls, closely fitted at neck and wrist. Eye-wash unit. <p>IN CONFINED SPACES:</p> <ul style="list-style-type: none"> Non-sparking protective boots Static-free clothing. Ensure availability of lifeline. <p>Staff should be trained in all aspects of rescue work.</p> <p>Rescue gear: Two sets of SCBA breathing apparatus Rescue Harness, lines etc.</p>

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- ▶ Some plastic personal protective equipment (PPE) (e.g. gloves, aprons, overshoes) are not recommended as they may produce static electricity.
- ▶ For large scale or continuous use wear tight-weave non-static clothing (no metallic fasteners, cuffs or pockets).
- ▶ Non sparking safety or conductive footwear should be considered. Conductive footwear describes a boot or shoe with a sole made from a conductive compound chemically bound to the bottom components, for permanent control to electrically ground the foot and shall dissipate static electricity from the body to reduce the possibility of ignition of volatile compounds. Electrical resistance must range between 0 to 500,000 ohms. Conductive shoes should be stored in lockers close to the room in which they are worn. Personnel who have been issued conductive footwear should not wear them from their place of work to their homes and return.

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	CPI
BUTYL	C
BUTYL/NEOPRENE	C
CPE	C
HYPALON	C
NATURAL RUBBER	C
NATURAL+NEOPRENE	C
NEOPRENE	C
NEOPRENE/NATURAL	C
NITRILE	C
NITRILE+PVC	C
PE/EVAL/PE	C
PVA	C
PVC	C
SARANEX-23	C
SARANEX-23 2-PLY	C
TEFLON	C
VITON	C
VITON/BUTYL	C
VITON/CHLOROBUTYL	C

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

Respiratory protection

Type AX 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	AX-AUS	-	AX-PAPR-AUS / Class 1
up to 50 x ES	-	AX-AUS / Class 1	-
up to 100 x ES	-	AX-2	AX-PAPR-2 ^

^ - 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 degC)

- ▶ 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
- ▶ Positive pressure, full face, air-supplied breathing apparatus should be used for work in enclosed spaces if a leak is suspected or the primary containment is to be opened (e.g. for a cylinder change)
- ▶ Air-supplied breathing apparatus is required where release of gas from primary containment is either suspected or demonstrated.

Selection of the Class and Type of respirator will depend upon the level of breathing zone contaminant and the chemical nature of the contaminant. Protection Factors (defined as the ratio of contaminant outside and inside the mask) may also be important.

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	AX-AUS / Class 1	-
up to 50	1000	-	AX-AUS / Class 1
up to 50	5000	Airline *	-
up to 100	5000	-	AX-2
up to 100	10000	-	AX-3
100+		-	Airline**

** - Continuous-flow or positive pressure demand.

A(All classes) = Organic vapours, B AUS or B1 = Acid gases, 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 deg C)

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Not Available		
Physical state	Liquified Gas	Relative density (Water = 1)	0.709
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	350

Continued...

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pH (as supplied)	Not Available	Decomposition temperature (°C)	Not Applicable
Melting point / freezing point (°C)	-141.5	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	-24.8	Molecular weight (g/mol)	Not Available
Flash point (°C)	-41.1	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	HIGHLY FLAMMABLE.	Oxidising properties	Not Available
Upper Explosive Limit (%)	18.2	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	3.4	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	434	Gas group	Not Available
Solubility in water	Immiscible	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	1.6	VOC g/L	572.87

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur.
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	<p>Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may produce toxic effects. The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo.</p> <p>The main effects of simple esters are irritation, stupor and insensibility. Headache, drowsiness, dizziness, coma and behavioural changes may occur.</p> <p>Following inhalation, ethers cause lethargy and stupor. Inhaling lower alkyl ethers results in headache, dizziness, weakness, blurred vision, seizures and possible coma.</p> <p>Inhalation of high concentrations of gas/vapour causes lung irritation with coughing and nausea, central nervous depression with headache and dizziness, slowing of reflexes, fatigue and inco-ordination.</p> <p>Material is highly volatile and may quickly form a concentrated atmosphere in confined or unventilated areas. The vapour may displace and replace air in breathing zone, acting as a simple asphyxiant. This may happen with little warning of overexposure.</p> <p>Symptoms of asphyxia (suffocation) may include headache, dizziness, shortness of breath, muscular weakness, drowsiness and ringing in the ears. If the asphyxia is allowed to progress, there may be nausea and vomiting, further physical weakness and unconsciousness and, finally, convulsions, coma and death.</p> <p>The use of a quantity of material in an unventilated or confined space may result in increased exposure and an irritating atmosphere developing. Before starting consider control of exposure by mechanical ventilation.</p> <p>Inhalation exposure may cause susceptible individuals to show change in heart beat rhythm i.e. cardiac arrhythmia. Exposures must be terminated.</p> <p>Acute intoxication by halogenated aliphatic hydrocarbons appears to take place over two stages. Signs of a reversible narcosis are evident in the first stage and in the second stage signs of injury to organs may become evident, a single organ alone is (almost) never involved.</p>
Ingestion	<p>Ingestion of alkyl ethers may produce stupor, blurred vision, headache, dizziness and irritation of the nose and throat. Respiratory distress and asphyxia may result.</p> <p>Not normally a hazard due to physical form of product.</p> <p>Considered an unlikely route of entry in commercial/industrial environments</p> <p>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.</p> <p>Central nervous system (CNS) depression may include general discomfort, symptoms of giddiness, headache, dizziness, nausea, anaesthetic effects, slowed reaction time, slurred speech and may progress to unconsciousness. Serious poisonings may result in respiratory depression and may be fatal.</p>
Skin Contact	<p>The material may accentuate any pre-existing dermatitis condition</p> <p>Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.</p> <p>Alkyl ethers may defat and dehydrate the skin producing dermatoses. Absorption may produce headache, dizziness, and central nervous system depression.</p> <p>Open cuts, abraded or irritated skin should not be exposed to this material</p> <p>Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.</p> <p>Vapourising liquid causes rapid cooling and contact may cause cold burns, frostbite, even through normal gloves. Frozen skin tissues are painless and appear waxy and yellow. Signs and symptoms of frost-bite may include "pins and needles", paleness followed by numbness, a hardening and stiffening of the skin, a progression of colour changes in the affected area, (first white, then mottled and blue and eventually black; on recovery, red, hot, painful and blistered).</p> <p>The material may cause severe inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering.</p>

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Eye	<p>Not considered to be a risk because of the extreme volatility of the gas. Eye contact with alkyl ethers (vapour or liquid) may produce irritation, redness and tears.</p> <p>There is some evidence that 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.</p>	
Chronic	<p>Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. Strong evidence exists that this substance may cause irreversible mutations (though not lethal) even following a single exposure. Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. There is sufficient evidence to suggest that this material directly causes cancer in humans.</p> <p>Toxic: danger of serious damage to health by prolonged exposure through inhalation, in contact with skin and if swallowed. This material can cause serious damage if one is exposed to it for long periods. It can be assumed that it contains a substance which can produce severe defects.</p> <p>Ample evidence from experiments exists that there is a suspicion this material directly reduces fertility.</p> <p>Main route of exposure to the gas in the workplace is by inhalation.</p> <p>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.</p> <p>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.</p> <p>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 nasopharyngeal 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. Diamine was not present. Thus, for MDI and diisocyanates in general the oral gavage dosing route is inappropriate for toxicological studies and risk assessment.</p> <p>It is expected that oral gavage dosing will result in a similar outcome to that produced by TDI or MDI, that is (1) reaction with stomach contents and (2) polymerization to solid polyureas.</p> <ul style="list-style-type: none"> Reaction with stomach contents is very plausibly described in case reports of accidental ingestion of polymeric MDI based glue in domestic animals. Extensive polymerization and CO₂ liberation resulting in an expansion of the gastric content is described in the stomach, without apparent acute chemical toxicity Polyurea formation in organic and aqueous phases has been described. In this generally accepted chemistry of hydrolysis of an isocyanate the initially produced carbamate decarboxylates to an amine which. The amine, as a reactive intermediate, then reacts very readily with the present isocyanate to produce a solid and inert polyurea. This urea formation acts as a pH buffer in the stomach, thus promoting transformation of the diisocyanate into polyurea, even under the acidic conditions. <p>At the absorptive tissues in the small intestine, these high molecular reaction products are likely to be of very low bioavailability, which is substantiated by the absence of systemic toxicity in acute oral bioassays with rats at the OECD limit dose (LC₅₀>2 g/kg bw).</p> <p>The respiratory tract may be regarded as the main entry for systemically available isocyanates as evidenced following MDI exposures. A detailed summary on urinary, plasma and in vitro metabolite studies is provided below. Taken together, all available studies provide convincing evidence that MDI-protein adduct and MDI-metabolite formation proceeds:</p> <ul style="list-style-type: none"> via formation of a labile isocyanate glutathione (GSH)-adduct, then transfer to a more stable adduct with larger proteins, and without formation of free MDA. MDA reported as a metabolite is actually formed by analytical workup procedures (strong acid or base hydrolysis) and is not an identified metabolite in urine or blood <p>Chronic exposure to alkyl ethers may result in loss of appetite, excessive thirst, fatigue, and weight loss.</p> <p>Dichloromethane exposures cause liver and kidney damage in animals and this justifies consideration before exposing persons with a history of impaired liver function and/or renal disorders.</p>	
TensorGrip T30 Canister Spray Adhesive	TOXICITY	IRRITATION
	Not Available	Not Available
	TOXICITY	IRRITATION
	dermal (rat) LD50: >2000 mg/kg ^[2]	Eye(rabbit): 162 mg - moderate
methylene chloride	Inhalation(Rat) LC50: 76 mg/L4h ^[2]	Eye(rabbit): 500 mg/24hr - mild
	Oral (Rat) LD50; 1600 mg/kg ^[2]	Skin (rabbit): 100mg/24hr-moderate
		Skin (rabbit): 810 mg/24hr-SEVERE
4,4'-diphenylmethane diisocyanate (MDI)	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >6200 mg/kg ^[2]	Dermal Sensitiser *
	Inhalation(Rat) LC50: 0.368 mg/L4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (Rat) LD50; >2000 mg/kg ^[1]	Skin (rabbit): 500 mg /24 hours
ethyl acetate	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >18000 mg/kg ^[2]	Eye (human): 400 ppm
	Inhalation(Mouse) LC50; >18 mg/l4h ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (Mouse) LD50; 4100 mg/kg ^[2]	Skin: no adverse effect observed (not irritating) ^[1]
dimethyl ether	TOXICITY	IRRITATION
	Inhalation(Rat) LC50: >20000 ppm4h ^[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	
TensorGrip T30 Canister Spray Adhesive	Laboratory (in vitro) and animal studies show, exposure to the material may result in a possible risk of irreversible effects, with the possibility of producing mutation.	

TensorGrip T30 Canister Spray Adhesive

	<p>Generally,linear and branched-chain alkyl esters are hydrolysed to their component alcohols and carboxylic acids in the intestinal tract, blood and most tissues throughout the body. Following hydrolysis the component alcohols and carboxylic acids are metabolized</p> <p>Oral acute toxicity studies have been reported for 51 of the 67 esters of aliphatic acyclic primary alcohols and aliphatic linear saturated carboxylic acids. The very low oral acute toxicity of this group of esters is demonstrated by oral LD50 values greater than 1850 mg/kg bw</p> <p>Genotoxicity studies have been performed in vitro using the following esters of aliphatic acyclic primary alcohols and aliphatic linear saturated carboxylic acids: methyl acetate, butyl acetate, butyl stearate and the structurally related isoamyl formate and demonstrates that these substances are not genotoxic.</p> <p>The JEFCA Committee concluded that the substances in this group would not present safety concerns at the current levels of intake the esters of aliphatic acyclic primary alcohols and aliphatic linear saturated carboxylic acids are generally used as flavouring substances up to average maximum levels of 200 mg/kg. Higher levels of use (up to 3000 mg/kg) are permitted in food categories such as chewing gum and hard candy. In Europe the upper use levels for these flavouring substances are generally 1 to 30 mg/kg foods and in special food categories like candy and alcoholic beverages up to 300 mg/kg foods</p> <p>Internationl Program on Chemical Safety: the Joint FAO/WHO Expert Committee on Food Additives (JECFA) Esters of Aliphatic acyclic primary alcohols with aliphatic linear saturated carboxylic acids.; 1998</p>
METHYLENE CHLORIDE	<p>Inhalation (human) TCLo: 500 ppm/ 1 y - I Eye(rabbit): 10 mg - mild</p> <p>The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.</p> <p>WARNING: This substance has been classified by the IARC as Group 2A: Probably Carcinogenic to Humans.</p>
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	<p>Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate</p> <p>The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans.</p> <p>Evidence of carcinogenicity may be inadequate or limited in animal testing.</p> <p>Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, gasping, severe distress, even loss of consciousness and fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance, euphoria, inco-ordination, anxiety, depression and paranoia.</p> <p>Aromatic and aliphatic diisocyanates may cause airway toxicity and skin sensitization. Monomers and prepolymers exhibit similar respiratory effect. Of the several members of diisocyanates tested on experimental animals by inhalation and oral exposure, some caused cancer while others produced a harmless outcome. This group of compounds has therefore been classified as cancer-causing.</p>
TensorGrip T30 Canister Spray Adhesive & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI) & ETHYL ACETATE	<p>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. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. 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. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.</p>
TensorGrip T30 Canister Spray Adhesive & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	<p>Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other irritants may aggravate symptoms. Allergy causing activity is due to interactions with proteins.</p> <p>Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema.</p> <p>Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure.</p> <p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke’s oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. 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.</p>
TensorGrip T30 Canister Spray Adhesive & METHYLENE CHLORIDE	
METHYLENE CHLORIDE & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	<p>The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p>

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

SECTION 12 Ecological information

Toxicity

TensorGrip T30 Canister Spray Adhesive	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available
methylene chloride	Endpoint	Test Duration (hr)	Species	Value	Source
	BCF	1008h	Fish	2-5.4	7
	EC50(ECx)	96h	Algae or other aquatic plants	0.98mg/l	4

Continued...

TensorGrip T30 Canister Spray Adhesive

	EC50	72h	Algae or other aquatic plants	202-286mg/l	4
	EC50	48h	Crustacea	150-218mg/l	4
	LC50	96h	Fish	2-3.3mg/l	4
	EC50	96h	Algae or other aquatic plants	0.98mg/l	4
4,4'-diphenylmethane diisocyanate (MDI)	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	72h	Algae or other aquatic plants	>1640mg/l	2
	BCF	672h	Fish	61-150	7
	NOEC(ECx)	504h	Crustacea	>=10mg/l	2
	LC50	96h	Fish	95.24-134.37mg/l	Not Available
ethyl acetate	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48h	Crustacea	164mg/l	1
	NOEC(ECx)	72h	Algae or other aquatic plants	>100mg/l	1
	LC50	96h	Fish	>75.6mg/l	2
dimethyl ether	Endpoint	Test Duration (hr)	Species	Value	Source
	EC50	48h	Crustacea	>4400mg/L	2
	NOEC(ECx)	48h	Crustacea	>4000mg/l	1
	LC50	96h	Fish	1783.04mg/l	2
	EC50	96h	Algae or other aquatic plants	154.917mg/l	2
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					

Harmful to aquatic organisms, may cause long-term adverse effects in the aquatic environment.

Do NOT allow product to come in contact with surface waters or to intertidal areas below the mean high water mark. Do not contaminate water when cleaning equipment or disposing of equipment wash-waters.

Wastes resulting from use of the product must be disposed of on site or at approved waste sites.

For Methylene Chloride: Log Kow: 1.25; Log Koc: 1.68; Log Kom: 1.44; Henry's atm m³/mol: 2.68E-03; Henry's Law Constant: 0.002 atm/m³/mol; BCF: 5.

Atmospheric Fate: Methylene chloride is a volatile liquid that tends to evaporate to the atmosphere from water and soil. The main degradation pathway for methylene chloride in air is via reactions with hydroxyl radicals the average atmospheric lifetime is estimated to be 130 days. Because this degradation pathway is relatively slow, methylene chloride may become widely dispersed but, is not likely to accumulate in the atmosphere. The small amount of methylene chloride which reaches the stratosphere, (about 1%), may undergo direct breakdown by sunlight; however, this is not expected to occur in the troposphere. Reactions of methylene chloride with ozone or other common atmospheric species, (e.g., oxygen atoms, chlorine atoms, and nitrate radicals), are not believed to contribute to its breakdown.

Terrestrial Fate: The substance will evaporate rapidly from moist soil and does not sorb strongly to soil or sediment. Methylene chloride is likely to be highly mobile in soil and is expected to leach to groundwater. Biological breakdown is dependent on soil type, substrate concentration, and if the chemical gains or loses electrons, (redox reactions). The substance has been reported to be degraded in both oxygenated and low oxygen soils and degradation appears to accelerate in the presence of elevated levels of organic carbon. Methylene chloride has a low tendency to absorb to soil; therefore, there is a potential for leaching to groundwater. The substance is expected to evaporate from dry/moist soil.

Aquatic Fate: Methylene chloride will evaporate rapidly from water, however; evaporation rates vary with rate of mixing, wind speed, temperature, and other factors. The substance slowly breaks down in neutral pH water, with an experimental half-life of 18 months @ 25 C. This reaction rate varies greatly with changes in temperature and pH it has been estimated that the same reaction in acidic solutions would take 700 years. Oxygenated and non-oxygenated biological breakdown may be important fate processes for methylene chloride in water. Methylene chloride has been observed to undergo degradation at a rapid rate in the presence of oxygen.

Ecotoxicity: Only a few valid acute toxicity data, and no results from long-term studies in marine species, are available for this substance. Available data in marine species do not indicate a marked difference in the sensitivity of marine and freshwater species to this substance. Methylene chloride is moderately toxic to the common mummichog, daggerblade grass shrimp, and fathead minnow. The substance has low toxicity to Daphnia magna water fleas. Methylene chloride is not expected to accumulate/concentrate in aquatic organisms.

Most ethers are very resistant to hydrolysis, and the rate of cleavage of the carbon-oxygen bond by abiotic processes is expected to be insignificant.

Direct photolysis will not be an important removal process since aliphatic ethers do not absorb light at wavelengths >290 nm

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
methylene chloride	LOW (Half-life = 56 days)	HIGH (Half-life = 191 days)
4,4'-diphenylmethane diisocyanate (MDI)	LOW (Half-life = 1 days)	LOW (Half-life = 0.24 days)
ethyl acetate	LOW (Half-life = 14 days)	LOW (Half-life = 14.71 days)
dimethyl ether	LOW	LOW

Bioaccumulative potential

Ingredient	Bioaccumulation
methylene chloride	LOW (BCF = 40)
4,4'-diphenylmethane diisocyanate (MDI)	LOW (BCF = 15)
ethyl acetate	HIGH (BCF = 3300)
dimethyl ether	LOW (LogKOW = 0.1)

Mobility in soil

Ingredient	Mobility
methylene chloride	LOW (KOC = 23.74)

Continued...

TensorGrip T30 Canister Spray Adhesive

Ingredient	Mobility
4,4'-diphenylmethane diisocyanate (MDI)	LOW (KOC = 376200)
ethyl acetate	LOW (KOC = 6.131)
dimethyl ether	HIGH (KOC = 1.292)


SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ 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. ▶ Evaporate or incinerate residue at an approved site. ▶ Return empty containers to supplier. ▶ Ensure damaged or non-returnable cylinders are gas-free before disposal.
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SECTION 14 Transport information

Labels Required

	 
Marine Pollutant	NO
HAZCHEM	2WE

Land transport (ADG)

UN number	3504
UN proper shipping name	CHEMICAL UNDER PRESSURE, FLAMMABLE, TOXIC, N.O.S. (contains dimethyl ether)
Transport hazard class(es)	Class 2.1
	Subrisk 6.1
Packing group	Not Applicable
Environmental hazard	Not Applicable
Special precautions for user	Special provisions 274 362
	Limited quantity 0

Air transport (ICAO-IATA / DGR)

UN number	3504
UN proper shipping name	Chemical under pressure, flammable, toxic, n.o.s. * (contains dimethyl ether)
Transport hazard class(es)	ICAO/IATA Class 2.1
	ICAO / IATA Subrisk 6.1
	ERG Code 10P
Packing group	Not Applicable
Environmental hazard	Not Applicable
Special precautions for user	Special provisions A1 A187
	Cargo Only Packing Instructions 218
	Cargo Only Maximum Qty / Pack 75 kg
	Passenger and Cargo Packing Instructions Forbidden
	Passenger and Cargo Maximum Qty / Pack Forbidden
	Passenger and Cargo Limited Quantity Packing Instructions Forbidden
	Passenger and Cargo Limited Maximum Qty / Pack Forbidden

Sea transport (IMDG-Code / GGVSee)

UN number	3504
UN proper shipping name	CHEMICAL UNDER PRESSURE, FLAMMABLE, TOXIC, N.O.S. (contains dimethyl ether)
Transport hazard class(es)	IMDG Class 2.1
	IMDG Subrisk 6.1

TensorGrip T30 Canister Spray Adhesive

Packing group	Not Applicable	
Environmental hazard	Not Applicable	
Special precautions for user	EMS Number	F-D, S-U
	Special provisions	274 362
	Limited Quantities	0

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
methylene chloride	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	Not Available
ethyl acetate	Not Available
dimethyl ether	Not Available

Transport in bulk in accordance with the ICG Code

Product name	Ship Type
methylene chloride	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	Not Available
ethyl acetate	Not Available
dimethyl ether	Not Available

SECTION 15 Regulatory information

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

methylene chloride is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
 Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5
 Australian Inventory of Industrial Chemicals (AIIC)

Chemical Footprint Project - Chemicals of High Concern List
 International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
 International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs - Group 2A: Probably carcinogenic to humans

4,4'-diphenylmethane diisocyanate (MDI) 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)

ethyl acetate is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

dimethyl ether is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals
 Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

Australian Inventory of Industrial Chemicals (AIIC)

National Inventory Status

National Inventory	Status
Australia - AIIC / Australia Non-Industrial Use	Yes
Canada - DSL	Yes
Canada - NDSL	No (methylene chloride; 4,4'-diphenylmethane diisocyanate (MDI); ethyl acetate; dimethyl ether)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	Yes
Vietnam - NCI	Yes
Russia - FBEPH	Yes

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.

Continued...

TensorGrip T30 Canister Spray Adhesive

SECTION 16 Other information

Revision Date	20/12/2022
Initial Date	16/05/2022

SDS Version Summary

Version	Date of Update	Sections Updated
1.2	20/12/2022	Chronic Health, Classification, Fire Fighter (fire/explosion hazard), Physical Properties

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
 LOD: Limit Of Detection
 OTV: Odour Threshold Value
 BCF: BioConcentration Factors
 BEI: Biological Exposure Index
 AIC: 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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