

ERAPOL ETX85D

Era Polymers Pty Ltd

Version No: **2.3**Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code:

Issue Date: 23/04/2020 Print Date: 23/04/2020 S.GHS.AUS.EN

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

Product Identifier

Product name	ERAPOL ETX85D
Synonyms	Not Available
Other means of identification	ERAPOL ETX85D

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

Relevant identified uses	Polyurethane prepolymer

Details of the supplier of the safety data sheet

• • • • • • • • • • • • • • • • • • • •	
Registered company name	Era Polymers Pty Ltd
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Emergency telephone number

Association / Organisation	CHEMWATCH EMERGENCY RESPONSE
Emergency telephone numbers	+61 1800 951 288
Other emergency telephone numbers	+61 2 9186 1132

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

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

 ${\it HAZARDOUS\ CHEMICAL.\ NON-DANGEROUS\ GOODS.\ According\ to\ the\ WHS\ Regulations\ and\ the\ ADG\ Code.}$

Poisons Schedule	S6
Classification [1]	Acute Toxicity (Inhalation) Category 3, Respiratory Sensitizer Category 1A, Skin Sensitizer Category 1A, Carcinogenicity 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)

H331	Toxic if inhaled.
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
H317	May cause an allergic skin reaction.
H351	Suspected of causing cancer.

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Precautionary statement(s) General

P101	If medical advice is needed, have product container or label at hand.
P102	Keep out of reach of children.
P103	Read label before use.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P261	Avoid breathing mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/face protection.
P281	Use personal protective equipment as required.
P285	In case of inadequate ventilation wear respiratory protection.
P272	Contaminated work clothing should not be allowed out of the workplace.

Precautionary statement(s) Response

P304+P340	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.
P308+P313	IF exposed or concerned: Get medical advice/attention.
P321	Specific treatment (see advice on this label).
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER or doctor/physician.
P363	Wash contaminated clothing before reuse.
P302+P352	IF ON SKIN: Wash with plenty of water.
P333+P313	If skin irritation or rash occurs: Get medical advice/attention.

Precautionary statement(s) Storage

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

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
26471-62-5	<2.5	toluene diisocyanate
Not Available	to 100	Polyurethane prepolymer

SECTION 4 FIRST AID MEASURES

Description of first aid measures

Description of first aid measures		
Eye Contact	If this product comes in contact with the eyes: Immediately hold eyelids apart and flush the eye continuously with running water. Ensure complete irrigation of the eye by keeping eyelids apart and away from eye and moving the eyelids by occasionally lifting the upper and lower lids. Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes. Transport to hospital or doctor without delay. Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.	
Skin Contact	If skin or hair contact occurs: ► 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. 	

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Ingestion

- ▶ Wash out mouth with water
- ▶ Do not induce vomiting unless directed to do so by medical personnel. Medical advice is required.

Indication of any immediate medical attention and special treatment needed

<div>For sub-chronic and chronic exposures to isocyanates:</div>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. </ort color='#000000'>Some cross-sensitivity occurs between different isocyanates. pulmonary oedema and bronchospasm are the most serious consequences of exposure. Markedly symptomatic patients should receive oxygen, ventilatory support and an intravenous line. <fint color='#000000'>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. color='#000000'>Mydriatics, systemic analgesics and topical antibiotics (Sulamyd) may be used for corneal abrasions. </or> effective therapy for sensitised workers. <div align='center'>[Ellenhorn and Barceloux; Medical Toxicology]</div><div><div><div></div></div></div></div></div></div></div> color='#000000'>NOTE: :lsocyanates 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 color='#000000'>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.</div><div></div><tont></div><tont></div><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont><tont>< color='#000000'>Toluene diisocyanate is a known pulmonary sensitiser. Annual medical surveillance should be conducted including pulmonary history, examination of the heart and lungs, 14 x 17 inch (35 x 47 cm) x-ray and pulmonary function testing (FCV, FEV1).</fint></div><div><div><div>in normal commercial preparations of toluene diisocyanate, the 2,4-isomer dominates in the ratio 4:1. However it is also hydrolysed, in air, more rapidly than the 2,6-isomer. Airway sensitivities may result from the appearance of immunoglobulins in the blood. Frequent inability to detect antibodies to TDI in clinical cases may result from the routine use of diagnostic antigens containing predominantly 2,4-TDI, whereas individuals may have been exposed to atmospheres in which 2,6-TDI was the predominant isomer. [Karol & Difference of Molecular Toxicology, pp 55-61, 19921</div>

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

- Flooding quantities of water only.
- ► There is no restriction on the type of extinguisher which may be used.
- Use extinguishing media suitable for surrounding area.

Special hazards arising from the substrate or mixture

Fire Incompatibility	None known.
Advice for firefighters	
Fire Fighting	 Alert Fire Brigade and tell them location and nature of hazard. Wear breathing apparatus plus protective gloves in the event of a fire. Prevent, by any means available, spillage from entering drains or water courses. Use fire fighting procedures suitable for surrounding area. DO NOT approach containers suspected to be hot. Cool fire exposed containers with water spray from a protected location. If safe to do so, remove containers from path of fire. Equipment should be thoroughly decontaminated after use.
Fire/Explosion Hazard	 Combustible. Moderate fire hazard when exposed to heat or flame. When heated to high temperatures decomposes rapidly generating vapour which pressures and may then rupture containers with release of flammable and highly toxic isocyanate vapour. Burns with acrid black smoke and poisonous fumes. Due to reaction with water producing CO2-gas, a hazardous build-up of pressure could result if contaminated containers are re-sealed. Combustion yields traces of highly toxic hydrogen cyanide HCN, plus toxic nitrogen oxides NOx and carbon monoxide. Decomposition may produce toxic fumes of: hydrogen cyanide nitrogen oxides (NOx) 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

- ► Clean up all spills immediately
- ▶ Avoid breathing vapours and contact with skin and eyes
- Control personal contact with the substance, by using protective equipment.
- ► Contain and absorb spill with sand, earth, inert material or vermiculite.

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- Wipe up.
- ▶ Place in a suitable, labelled container for waste disposal.
- Liquid Isocyanates and high isocyanate vapour concentrations will penetrate seals on self contained breathing apparatus SCBA should be used inside encapsulating suit where this exposure may occur.

For isocyanate spills of less than 40 litres (2 m2):

- Evacuate area from everybody not dealing with the emergency, keep them upwind and prevent further access, remove ignition sources and, if inside building, ventilate area as well as possible.
- Notify supervision and others as necessary.
- Put on personal protective equipment (suitable respiratory protection, face and eye protection, protective suit, gloves and impermeable boots).
- ► Control source of leakage (where applicable).
- ▶ Dike the spill to prevent spreading and to contain additions of decontaminating solution.
- ▶ Prevent the material from entering drains.
- ▶ Estimate spill pool volume or area
- 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.

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}.

Let stand for 24 hours

Major Spills

Three commonly used neutralising fluids each exhibit advantages in different situations.

Formulation A

liquid surfactant 0.2-2% sodium carbonate 5-10% water to 100% Formulation B liquid surfactant 0.2-2% concentrated ammonia water to 100% Formulation C

ethanol, isopropanol or butanol 50% concentrated ammonia 5% water to 100%

After application of any of these formulae, let stand for 24 hours.

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

- ▶ Avoid contamination with water, alkalies and detergent solutions.
- ► Material reacts with water and generates gas, pressurises containers with even drum rupture resulting.
- ► DO NOT reseal container if contamination is suspected
- ► Open all containers with care.

Moderate hazard.

- ► Clear area of personnel and move upwind.
- ▶ Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves.
- Prevent, by any means available, spillage from entering drains or water course.
- Stop leak if safe to do so.
- ► Contain spill with sand, earth or vermiculite.
- Collect recoverable product into labelled containers for recycling.
- ► Neutralise/decontaminate residue (see Section 13 for specific agent).
- ► Collect solid residues and seal in labelled drums for disposal.
- ▶ Wash area and prevent runoff into drains.
- ▶ After clean up operations, decontaminate and launder all protective clothing and equipment before storing and re-using.
- ▶ If contamination of drains or waterways occurs, advise emergency services.

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling

- Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- ▶ Use in a well-ventilated area.
- Avoid contact with moisture.

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- Avoid contact with incompatible materials.
- When handling, DO NOT eat, drink or smoke.
- ▶ Keep containers securely sealed when not in use.
- · Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- ▶ Work clothes should be laundered separately. Launder contaminated clothing before re-use.
- Use good occupational work practice.
- ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.
- Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained.

Consider storage under inert gas.

for commercial quantities of isocyanates:

- Isocyanates should be stored in adequately bunded areas. Nothing else should be kept within the same bunding. Pre-polymers need not be segregated. Drums of isocyanates should be stored under cover, out of direct sunlight, protected from rain, protected from physical damage and well away from moisture, acids and alkalis.
- Where isocyanates are stored at elevated temperatures to prevent solidifying, adequate controls should be installed to prevent the high temperatures and precautions against fire should be taken.
- ▶ Where stored in tanks, the more reactive isocyanates should be blanketed with a non-reactive gas such as nitrogen and equipped with absorptive type breather valve (to prevent vapour emissions)..
- Transfer systems for isocyanates in bulk storage should be fully enclosed and use pump or vacuum systems. Warning signs, in appropriate languages, should be posted where necessary.
- Areas in which polyurethane foam products are stored should be supplied with good general ventilation. Residual amounts of unreacted isocyanate may be present in the finished foam, resulting in hazardous atmospheric concentrations.

Conditions for safe storage, including any incompatibilities

Suitable container

Other information

- ► Polyethylene or polypropylene container.
- Packing as recommended by manufacturer.
- ▶ Check all containers are clearly labelled and free from leaks.

• 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

Storage incompatibility .

- · 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

None known

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	toluene diisocyanate	Toluene-2,4-diisocyanate (TDI)	0.02 mg/m3	0.07 mg/m3	Not Available	Not Available

EMERGENCY LIMITS

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3	
toluene diisocyanate	Toluene diisocyanate (mixed isomers)	0.02 ppm	0.083 ppm	0.51 ppm	
toluene diisocyanate	Toluene-2,4-diisocyanate; (TDI)	Not Available	Not Available	Not Available	
toluene diisocyanate	Toluene-2,6-diisocyanate	Not Available	Not Available	Not Available	
			·	·	

Ingredient	Original IDLH	Revised IDLH
toluene diisocyanate	2.5 ppm	Not Available

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Exposure controls

Engineering controls are used to remove a hazard or place a barrier between the worker and the hazard. Well-designed engineering controls can be highly effective in protecting workers and will typically be independent of worker interactions to provide this high level of protection.

The basic types of engineering controls are:

Process controls which involve changing the way a job activity or process is done to reduce the risk.

Enclosure and/or isolation of emission source which keeps a selected hazard 'physically' away from the worker and ventilation that strategically 'adds' and 'removes' air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.

Employers may need to use multiple types of controls to prevent employee overexposure.

- Spraying of material or material in admixture with other components must be carried out in conditions conforming to local state regulations (AS/NZS 4114, UNI EN 12215:2010, ANSI/AIHA Z9.3–2007 or national equivalent).
- Local exhaust ventilation with full face positive-pressure air supplied breathing apparatus (hood or helmet type) is required.
- Foraying should be performed in a spray booth fitted with an effective exhaust system which complies with local environmental legislation.
- The spray booth area must be isolated from unprotected personnel whilst spraying is in progress and until all spraying mist has cleared.

NOTE: Isocyanate vapours will not be adequately absorbed by organic vapour respirators. Air contaminants generated in the workplace possess varying 'escape' velocities which, in turn, determine the 'capture velocities' of fresh circulating air required to effectively remove the contaminant.

Appropriate engineering controls

Type of Contaminant:	Air Speed:
direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active	1-2.5 m/s (200-500
generation into zone of rapid air motion)	f/min.)

Within each range the appropriate value depends on:

Lower end of the range	Upper end of the range
1: Room air currents minimal or favourable to capture	1: Disturbing room air currents
2: Contaminants of low toxicity or of nuisance value only	2: Contaminants of high toxicity
3: Intermittent, low production.	3: High production, heavy use
4: Large hood or large air mass in motion	4: Small hood-local control only

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 4-10 m/s (800-2000 f/min.) for extraction of solvents generated by spraying at a point 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Personal protection











Eye and face protection

- ► Safety glasses with side shields.
- Chemical goggles.

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

Hands/feet protection

See Hand protection below

The selection of suitable gloves does not only depend on the material, but also on further marks of quality which vary from manufacturer to manufacturer. Where the chemical is a preparation of several substances, the resistance of the glove material can not be calculated in advance and has therefore to be checked prior to the application.

The exact break through time for substances has to be obtained from the manufacturer of the protective gloves and has to be observed when making a final choice.

Personal hygiene is a key element of effective hand care. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended.

Suitability and durability of glove type is dependent on usage. Important factors in the selection of gloves include:

- · frequency and duration of contact,
- · chemical resistance of glove material,
- glove thickness and
- dexterity

Select gloves tested to a relevant standard (e.g. Europe EN 374, US F739, AS/NZS 2161.1 or national equivalent).

- When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- · When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use.
- Contaminated gloves should be replaced.

As defined in ASTM F-739-96 in any application, gloves are rated as:

- Excellent when breakthrough time > 480 min
- Good when breakthrough time > 20 min
- Fair when breakthrough time < 20 minPoor when glove material degrades

For general applications, gloves with a thickness typically greater than 0.35 mm, are recommended.

It should be emphasised that glove thickness is not necessarily a good predictor of glove resistance to a specific chemical, as the permeation efficiency of the glove will be dependent on the exact composition of the glove material. Therefore, glove selection should also be based on consideration of the task requirements and knowledge of breakthrough times.

Glove thickness may also vary depending on the glove manufacturer, the glove type and the glove model. Therefore, the manufacturers'

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technical data should always be taken into account to ensure selection of the most appropriate glove for the task. Note: Depending on the activity being conducted, gloves of varying thickness may be required for specific tasks. For example: Thinner gloves (down to 0.1 mm or less) may be required where a high degree of manual dexterity is needed. However, these gloves are only likely to give short duration protection and would normally be just for single use applications, then disposed of. Thicker gloves (up to 3 mm or more) may be required where there is a mechanical (as well as a chemical) risk i.e. where there is abrasion or puncture potential Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. ▶ Isocyanate resistant materials include Teflon, Viton, nitrile rubber and some PVA gloves Protective gloves and overalls should be worn as specified in the appropriate national standard. ► Contaminated garments should be removed promptly and should not be re-used until they have been decontaminated. ▶ NOTE: Natural rubber, neoprene, PVC can be affected by isocyanates **Body protection** See Other protection below Overalls. P.V.C. apron. Other protection ► Barrier cream. Skin cleansing cream.

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:

Eye wash unit.

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Material	СРІ
BUTYL	Α
PE/EVAL/PE	Α
PVA	А
SARANEX-23	А
TEFLON	Α
VITON	А
NATURAL RUBBER	В
NITRILE	С

^{*} 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

Full face respirator with supplied air.

In certain circumstances, personal protection of the individual employee is necessary. Personal protective devices should be regarded as being supplementary to substitution and engineering control and should not be used in preference to them as they do nothing to eliminate the hazard.

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- However, in some situations, minimising exposure to isocyanates by enclosure and ventilation is not possible, and occupational exposure standards may be exceeded, particularly during on-site mixing of paints, spray-painting, foaming and maintenance of machine and ventilation systems. In these situations, air-line respirators or self-contained breathing apparatus complying with the appropriate nationals standard must be used.
- Organic vapour respirators with particulate pre-filters and powered air-purifying respirators are NOT suitable.
- Personal protective equipment must be appropriately selected, individually fitted and workers trained in their correct use and maintenance. Personal protective equipment must be regularly checked and maintained to ensure that the worker is being protected.
- Air- line respirators or self-contained breathing apparatus complying with the appropriate national standard should be used during the clean-up of spills and the repair or clean-up of contaminated equipment and similar situations which cause emergency exposures to hazardous atmospheric concentrations of isocyanate.

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Clear, light amber		
Physical state	Liquid	Relative density (Water = 1)	1.15
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	Not Available
Melting point / freezing point (°C)	Not Available	Viscosity (cSt)	Not Available
Initial boiling point and boiling range (°C)	Not Available	Molecular weight (g/mol)	Not Available
Flash point (°C)	Not Available	Taste	Not Available
Evaporation rate	Not Available	Explosive properties	Not Available
Flammability	Not Available	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

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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. 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

Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may produce toxic effects. The material is not thought to produce respiratory irritation (as classified by EC Directives using animal models). Nevertheless inhalation of vapours, fumes or aerosols, especially for prolonged periods, may produce respiratory discomfort and occasionally, distress. Tolluene diisocyanate may produce lung irritation and airway narrowing. Severe irritation is produced by inhalation of low vapour concentrations. Symptoms may include a burning sensation, coughing, wheezing, hoarse voice, shortness of breath, headache, nausea and vomiting. Overexposure or repeated exposure may worsen symptoms. Symptoms may persist for several weeks. Most individuals recover completely.

Ingestion

The material is not thought to produce adverse health effects following ingestion (as classified by EC Directives using animal models). Nevertheless, adverse systemic effects have been produced following exposure of animals by at least one other route and good hygiene practice requires that exposure be kept to a minimum.

Skin Contact

Skin contact is not thought to produce harmful health effects (as classified under EC Directives using animal models). Systemic harm, however, has been identified following exposure of animals by at least one other route and the material may still produce health damage following entry through wounds, lesions or abrasions.

Open cuts, abraded or irritated skin should not be exposed to this material

Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.

Eye

This material can cause eye irritation and damage in some persons.

There has been concern that this material can cause cancer or mutations, but there is not enough data to make an assessment. Repeated or long-term occupational exposure is likely to produce cumulative health effects involving organs or biochemical systems. Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Persons with a history of asthma or other respiratory problems or are known to be sensitised, should not be engaged in any work involving the handling of isocyanates.

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

This is corroborated by the results from an MDI inhalation study. Following an inhalation exposure of rats to radiolabelled MDI, 79% of the dose was excreted in faeces. The faecal excretion in these animals was considered entirely due to ingestion of radioactivity from grooming and ingestion of deposited material from the nasopharangeal region via the mucociliary escalator, i.e. not following systemic absorption. The faecal radioactivity was tentatively identified as mixed molecular weight polyureas derived from MDI. Diamine was not present. Thus, for MDI and diisocyanates in general the oral gavage dosing route is inappropriate for toxicological studies and risk assessment.

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.

Chronic

- 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.

At the resorbtive 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).

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:

- 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

With most allergens, removal of the offending material results in resolution of symptoms. Asthma caused by toluene diisocyanate (TDI) continues for months or even years after exposure ceases.

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.

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TOXICITY IRRITATION

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	Not Available	Not Available
	TOXICITY	IRRITATION
4.1	Dermal (rabbit) LD50: >9400 mg/kg ^[2]	Eye: adverse effect observed (irritating) ^[1]
toluene diisocyanate	Inhalation (mouse) LC50: 21.12586785 mg/l6 h ^[1]	Skin: adverse effect observed (irritating) ^[1]
	Oral (rat) LD50: >2000 mg/kg ^[1]	
Legend:	Value obtained from Europe ECHA Registered Substances - A specified data extracted from RTECS - Register of Toxic Effect o.	cute toxicity 2.* Value obtained from manufacturer's SDS. Unless otherwis

The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact

eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested. 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.

TOLUENE DIISOCYANATE

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.

The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

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.

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.

ERAPOL ETX85D & TOLUENE DIISOCYANATE

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. Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema. 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.

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

ERAPOL ETX85D	ENDPOINT	TEST DURATION (HR)		SPECIES VALUE		SOURCE		CE
	Not Available	Not Available	Not Available Not Ava		Not Available		Not Available	
toluene diisocyanate	ENDPOINT	TEST DURATION (HR)	SPECIES		VALUE		SOURCE	
	LC50	96	Fish		ca.0.4mg/L		2	
	EC50	48	Crustacea		12.5mg/L		2	
	EC50	96	Algae or other aquatic plants		3-230mg/L		2	
	NOEC	504	Crustacea			>=0.5mg/L		1

Legend:

Extracted from 1. IUCLID Toxicity Data 2. Europe ECHA Registered Substances - Ecotoxicological Information - Aquatic Toxicity 3. EPIWIN Suite V3.12 (QSAR) - Aquatic Toxicity Data (Estimated) 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.

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DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
toluene diisocyanate	LOW (Half-life = 1 days)	LOW (Half-life = 0.13 days)

Bioaccumulative potential

Ingredient	Bioaccumulation	
toluene diisocyanate	LOW (BCF = 5)	

Mobility in soil

Ingredient	Mobility
toluene diisocyanate	LOW (KOC = 9114)

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

- ► Containers may still present a chemical hazard/ danger when empty.
- ▶ Return to supplier for reuse/ recycling if possible.

Otherwise

- If container can not be cleaned sufficiently well to ensure that residuals do not remain or if the container cannot be used to store the same product, then puncture containers, to prevent re-use, and bury at an authorised landfill.
- ▶ Where possible retain label warnings and SDS and observe all notices pertaining to the product.

Legislation addressing waste disposal requirements may differ by country, state and/ or territory. Each user must refer to laws operating in their area. In some areas, certain wastes must be tracked.

A Hierarchy of Controls seems to be common - the user should investigate:

- ▶ Reduction
- ► Reuse
- ► Recycling
- Disposal (if all else fails)

Product / Packaging disposal

This material may be recycled if unused, or if it has not been contaminated so as to make it unsuitable for its intended use. If it has been contaminated, it may be possible to reclaim the product by filtration, distillation or some other means. Shelf life considerations should also be applied in making decisions of this type. Note that properties of a material may change in use, and recycling or reuse may not always be appropriate.

- ▶ 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.
- ► Recycle wherever possible.
- Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no suitable treatment or disposal facility can be identified.
- Dispose of by: burial in a land-fill specifically licensed to accept chemical and / or pharmaceutical wastes or incineration in a licensed apparatus (after admixture with suitable combustible material).
- ▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

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

SECTION 15 REGULATORY INFORMATION

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

TOLUENE DIISOCYANATE IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals Australia Inventory of Chemical Substances (AICS)

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

 ${\it Chemical Footprint\ Project\ -\ Chemicals\ of\ High\ Concern\ List}$

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 2B : Possibly carcinogenic to humans

National Inventory Status

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National Inventory	Status	
Australia - AICS	Yes	
Canada - DSL	Yes	
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 - ARIPS	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 and are not exempt from listing(see specific ingredients in brackets).	

SECTION 16 OTHER INFORMATION

Revision Date	23/04/2020
Initial Date	19/05/2015

No = One or more of the CAS listed ingredients are not on the inventory and are not exempt from listing(see specific ingredients in brackets)

SDS Version Summary

Version	Issue Date	Sections Updated
1.3.1.1.1	23/04/2020	Acute Health (eye), Acute Health (inhaled), Advice to Doctor, Chronic Health, Classification, Engineering Control, Environmental, Fire Fighter (extinguishing media), Fire Fighter (fire/explosion hazard), First Aid (skin), Handling Procedure, Ingredients, Personal Protection (hands/feet), Storage (storage incompatibility), Storage (storage requirement)

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

 ${\sf PC-TWA} : {\sf Permissible\ Concentration-Time\ Weighted\ Average}$

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

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