



ERAPOL EME167 ISOCYANATE

Era Polymers Pty Ltd

Version No: 3.4
Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 4

Issue Date: 30/09/2020
Print Date: 30/09/2020
S.GHS.AUS.EN

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

Product Identifier

Product name	ERAPOL EME167 ISOCYANATE
Synonyms	Not Available
Other means of identification	ERAPOL EME167 ISOCYANATE

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

Relevant identified uses	Polyurethane prepolymer
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Details of the supplier of the safety data sheet

Registered company name	Era Polymers Pty Ltd
Address	2-4 Green Street, BANKSMEADOW NSW 2019 Australia
Telephone	+61 (0)2 9666 3788
Fax	+61 (0)2 9666 4805
Website	www.erapol.com.au
Email	erapol@erapol.com.au

Emergency telephone number

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

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

SECTION 2 Hazards identification

Classification of the substance or mixture

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

Poisons Schedule	Not Applicable
Classification [1]	Eye Irritation Category 2A, Respiratory Sensitizer Category 1, Specific target organ toxicity - repeated exposure Category 2, Specific target organ toxicity - single exposure Category 3 (respiratory tract irritation), Skin Corrosion/Irritation Category 2, Skin Sensitizer Category 1, 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)

H319	Causes serious eye irritation.
H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
H373	May cause damage to organs through prolonged or repeated exposure.
H335	May cause respiratory irritation.

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H315	Causes skin irritation.
H317	May cause an allergic skin reaction.
H351	Suspected of causing cancer.

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.
P260	Do not breathe mist/vapours/spray.
P271	Use only outdoors or in a well-ventilated area.
P280	Wear protective gloves/protective clothing/eye protection/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.
P362	Take off contaminated clothing and wash before reuse.
P302+P352	IF ON SKIN: Wash with plenty of water.
P305+P351+P338	IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.
P312	Call a POISON CENTER or doctor/physician 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.

Precautionary statement(s) Storage

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

Precautionary statement(s) Disposal

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

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
25686-28-6	10-30	MDI homopolymer
101-68-8	10-30	4,4'-diphenylmethane diisocyanate (MDI)
Not Available	to 100	Polyurethane prepolymer

SECTION 4 First aid measures

Description of first aid measures

Eye Contact	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> ▶ Wash out immediately with fresh 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. ▶ Seek medical attention without delay; if pain persists or recurs seek medical attention. ▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.
Skin Contact	<p>If skin or hair contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately flush body and clothes with large amounts of water, using safety shower if available. ▶ Quickly remove all contaminated clothing, including footwear. ▶ Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre. ▶ Transport to hospital, or doctor.

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Inhalation	<ul style="list-style-type: none"> ▶ 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. <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>
Ingestion	<ul style="list-style-type: none"> ▶ 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

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**

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

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
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Advice for firefighters

Fire Fighting	<ul style="list-style-type: none"> ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear full body protective clothing with breathing apparatus. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ Use water delivered as a fine spray to control fire and cool adjacent area. ▶ Avoid spraying water onto liquid pools. ▶ DO NOT approach containers suspected to be hot. ▶ Cool fire exposed containers with water spray from a protected location. ▶ If safe to do so, remove containers from path of fire.
Fire/Explosion Hazard	<ul style="list-style-type: none"> - Combustible. - Moderate fire hazard when exposed to heat or flame. - When heated to high temperatures decomposes rapidly generating vapour which pressurises 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 NO_x and carbon monoxide. <p>Combustion products include: carbon dioxide (CO₂) isocyanates hydrogen cyanide and minor amounts of nitrogen oxides (NO_x) other pyrolysis products typical of burning organic material. May emit corrosive fumes. When heated at high temperatures many isocyanates decompose rapidly generating a vapour which pressurises containers, possibly to the point of rupture. Release of toxic and/or flammable isocyanate vapours may then occur</p>
HAZCHEM	Not Applicable

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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	<ul style="list-style-type: none"> ▶ Remove all ignition sources. ▶ Clean up all spills immediately. ▶ Avoid breathing vapours and contact with skin and eyes. ▶ Control personal contact with the substance, by using protective equipment. ▶ Contain and absorb spill with sand, earth, inert material or vermiculite. ▶ Wipe up. ▶ Place in a suitable, labelled container for waste disposal. 																		
Major Spills	<ul style="list-style-type: none"> ▶ 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. <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:</p> <p>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.</p> <p>Typically, such a preparation may consist of:</p> <p>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</p> <p>Three commonly used neutralising fluids each exhibit advantages in different situations.</p> <p>Formulation A :</p> <table border="0"> <tr> <td>liquid surfactant</td> <td>0.2-2%</td> </tr> <tr> <td>sodium carbonate</td> <td>5-10%</td> </tr> <tr> <td>water to</td> <td>100%</td> </tr> </table> <p>Formulation B</p> <table border="0"> <tr> <td>liquid surfactant</td> <td>0.2-2%</td> </tr> <tr> <td>concentrated ammonia</td> <td>3-8%</td> </tr> <tr> <td>water to</td> <td>100%</td> </tr> </table> <p>Formulation C</p> <table border="0"> <tr> <td>ethanol, isopropanol or butanol</td> <td>50%</td> </tr> <tr> <td>concentrated ammonia</td> <td>5%</td> </tr> <tr> <td>water to</td> <td>100%</td> </tr> </table> <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, alkalis 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. <p>Moderate hazard.</p> <ul style="list-style-type: none"> ▶ Clear area of personnel and move upwind. ▶ Alert Fire Brigade and tell them location and nature of hazard. ▶ Wear breathing apparatus plus protective gloves. ▶ Prevent, by any means available, spillage from entering drains or water course. ▶ No smoking, naked lights or ignition sources. ▶ Increase ventilation. ▶ Stop leak if safe to do so. ▶ Contain spill with sand, earth or vermiculite. 	liquid surfactant	0.2-2%	sodium carbonate	5-10%	water to	100%	liquid surfactant	0.2-2%	concentrated ammonia	3-8%	water to	100%	ethanol, isopropanol or butanol	50%	concentrated ammonia	5%	water to	100%
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- ▶ Collect recoverable product into labelled containers for recycling.
- ▶ Absorb remaining product with sand, earth or vermiculite.
- ▶ Collect solid residues and seal in labelled drums for disposal.
- ▶ Wash area and prevent runoff into drains.
- ▶ 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	<p>Avoid all personal contact, including inhalation. Wear protective clothing when risk of exposure occurs. When handling, DO NOT eat, drink or smoke. Always wash hands with soap and water after handling. DO NOT allow clothing wet with material to stay in contact with skin. Work clothes should be laundered separately. Use in a well-ventilated area. DO NOT enter confined spaces until atmosphere has been checked. Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions.</p>
Other information	

Conditions for safe storage, including any incompatibilities

Suitable container	<p>Containers 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. Consider storage under inert gas (eg Nitrogen). Keep containers securely sealed when not in use. Suitable packaging as supplied by Manufacturer.</p>
Storage incompatibility	<p>Avoid reaction with water, alcohols and detergent solutions. Do NOT reseal container if contamination is expected. Open all containers with care as container can be pressurized by presence of moisture. Isocyanates should be stored in adequately bunded areas. Check all containers are clearly labelled and free from leaks.</p>

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	4,4'-diphenylmethane diisocyanate (MDI)	Methylene bisphenyl isocyanate (MDI)	0.02 mg/m3	0.07 mg/m3	Not Available	Not Available

Emergency Limits

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
4,4'-diphenylmethane diisocyanate (MDI)	Methylene diphenyl diisocyanate; (Diphenylmethane diisocyanate; MDI)	0.45 mg/m3	Not Available	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	Methylenebis(isocyanato-benzene), 1,1'-; (Diphenyl methane diisocyanate)	29 mg/m3	40 mg/m3	240 mg/m3

Ingredient	Original IDLH	Revised IDLH
MDI homopolymer	Not Available	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	75 mg/m3	Not Available


Occupational Exposure Banding

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
MDI homopolymer	E	≤ 0.1 ppm
Notes:	<i>Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.</i>	

Exposure controls

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: 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.</p>
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Personal protection	
Eye and face protection	▶ Safety glasses with side shields.
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. ▶ Isocyanate resistant materials include Teflon, Viton, nitrile rubber and some PVA gloves. ▶ NOTE: Natural rubber, neoprene, PVC can be affected by isocyanates
Respiratory protection	<p>Cartridge performance is affected by humidity. Cartridges should be changed after 2 hr of continuous use unless it is determined that the humidity is less than 75%, in which case, cartridges can be used for 4 hr. Used cartridges should be discarded daily, regardless of the length of time used. In certain circumstances, personal protection of the individual employee is necessary. Personal protective devices should be regarded as being supplementary to substitution and engineering control and should not be used in preference to them as they do nothing to eliminate the hazard. However, in some situations, minimising exposure to isocyanates by enclosure and ventilation is not possible, and occupational exposure standards may be exceeded, particularly during on-site mixing of paints, spray-painting, foaming and maintenance of machine and ventilation systems. In these situations, air-line respirators or self-contained breathing apparatus complying with the appropriate national standard must be used.</p> <p>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.</p> <p>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.</p>

SECTION 9 Physical and chemical properties

Information on basic physical and chemical properties

Appearance	Hazy yellow liquid		
Physical state	Liquid	Relative density (Water = 1)	1.2
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	Not Available	pH as a solution (1%)	Not Available
Vapour density (Air = 1)	Not Available	VOC g/L	Not Available

SECTION 10 Stability and reactivity

Reactivity	See section 7
Chemical stability	<ul style="list-style-type: none"> ▶ Unstable in the presence of incompatible materials. ▶ Product is considered stable. ▶ Hazardous polymerisation will not occur. ▶ Presence of elevated temperatures.
Possibility of hazardous reactions	See section 7
Conditions to avoid	See section 7
Incompatible materials	See section 7

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Hazardous decomposition products

See section 5

SECTION 11 Toxicological information

Information on toxicological effects

Inhaled	<p>There is strong evidence to suggest that this material can cause, if inhaled once, very serious, irreversible damage of organs. The material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage. The material has NOT been classified by EC Directives or other classification systems as 'harmful by inhalation'. This is because of the lack of corroborating animal or human evidence.</p> <p>The vapour/mist may be highly irritating to the upper respiratory tract and lungs; the response may be severe enough to produce bronchitis and pulmonary oedema. Possible neurological symptoms arising from isocyanate exposure include headache, insomnia, euphoria, ataxia, anxiety neurosis, depression and paranoia. Gastrointestinal disturbances are characterised by nausea and vomiting. Pulmonary sensitisation may produce asthmatic reactions ranging from minor breathing difficulties to severe allergic attacks; this may occur following a single acute exposure or may develop without warning for several hours after exposure. Sensitized people can react to very low doses, and should not be allowed to work in situations allowing exposure to this material. Continued exposure of sensitised persons may lead to possible long term respiratory impairment.</p> <p>Inhalation hazard is increased at higher temperatures.</p> <p>Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful.</p>						
Ingestion	<p>There is strong evidence to suggest that this material can cause, if swallowed once, very serious, irreversible damage of organs. The material has NOT been classified by EC Directives or other classification systems as 'harmful by ingestion'. This is because of the lack of corroborating animal or human evidence.</p>						
Skin Contact	<p>This material can cause inflammation of the skin on contact in some persons.</p> <p>There is strong evidence to suggest that this material, on a single contact with skin, can cause very serious, irreversible damage of organs. The material may accentuate any pre-existing dermatitis condition</p> <p>Skin contact is not thought to have harmful health effects (as classified under EC Directives); the material may still produce health damage following entry through wounds, lesions or abrasions.</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>Skin contact with the material may damage the health of the individual; systemic effects may result following absorption.</p>						
Eye	<p>This material can cause eye irritation and damage in some persons.</p>						
Chronic	<p>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. Long-term exposure to respiratory irritants may result in airways disease, involving difficulty breathing and related whole-body problems. 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. 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 						
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MDI homopolymer	<table border="1"> <thead> <tr> <th style="text-align: left;">TOXICITY</th> <th style="text-align: left;">IRRITATION</th> </tr> </thead> <tbody> <tr> <td>Not Available</td> <td>Eye: no adverse effect observed (not irritating)^[1]</td> </tr> <tr> <td></td> <td>Skin: adverse effect observed (irritating)^[1]</td> </tr> </tbody> </table>	TOXICITY	IRRITATION	Not Available	Eye: no adverse effect observed (not irritating) ^[1]		Skin: adverse effect observed (irritating) ^[1]
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ERAPOL EME167 ISOCYANATE

4,4'-diphenylmethane diisocyanate (MDI)	TOXICITY	IRRITATION
	~100 mg/kg ^[2]	Dermal Sensitiser *
	~298 mg/kg ^[2]	Eye: no adverse effect observed (not irritating) ^[1]
	0.13 mg/kg ^[2]	Skin (rabbit): 500 mg /24 hours
	Dermal (rabbit) LD50: >6200 mg/kg ^[2]	Skin: adverse effect observed (irritating) ^[1]
	Inhalation (rat) LC50: 0.178 mg/l ^[2]	
	Oral (mouse) LD50: 2200 mg/kg ^[2]	
	Oral (rat) LD50: 9200 mg/kg ^[2]	

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

MDI HOMOPOLYMER	as polymethylene polyphenyl isocyanate
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis. 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 EME167 ISOCYANATE & MDI HOMOPOLYMER & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	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. 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. The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested. Isocyanate vapours 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.
MDI HOMOPOLYMER & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	The substance is classified by IARC as Group 3: NOT classifiable as to its carcinogenicity to humans. Evidence of carcinogenicity may be inadequate or limited in animal testing.

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

Legend: ✗ – Data either not available or does not fill the criteria for classification
✓ – Data available to make classification

SECTION 12 Ecological information

Toxicity

ERAPOL EME167 ISOCYANATE	Endpoint	Test Duration (hr)	Species	Value	Source
	Not Available	Not Available	Not Available	Not Available	Not Available

MDI homopolymer	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96	Fish	>1-mg/L	2
	EC50	72	Algae or other aquatic plants	>1-640mg/L	2
	NOEL	72	Algae or other aquatic plants	1-640mg/L	2

ERAPOL EME167 ISOCYANATE

4,4'-diphenylmethane diisocyanate (MDI)	Endpoint	Test Duration (hr)	Species	Value	Source
	LC50	96	Fish	>0.500mg/L	6
	EC50	72	Algae or other aquatic plants	>1-640mg/L	2
	NOEL	72	Algae or other aquatic plants	1-640mg/L	2

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*

for polyisocyanates:

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

For Isocyanate Monomers:

Environmental Fate: Isocyanates, (di- and polyfunctional isocyanates), are commonly used to make various polymers, such as polyurethanes. Polyurethanes find significant application in the manufacture of rigid and flexible foams. They are also used in the production of adhesives, elastomers, and coatings.

Atmospheric Fate: These substances are not expected to be removed from the air via precipitation washout or dry deposition.

Terrestrial Fate: These substances are expected to sorb strongly to soil. Migration to groundwater and surface waters is not expected to occur.

Aquatic Fate: Breakdown by water, (hydrolysis), is the primary fate mechanism for the majority of commercial isocyanate monomers, however; the low solubility of these substances will generally lessen the effectiveness of hydrolysis as a fate pathway. But hydrolysis should be considered one of the two major fate processes for the isocyanates. These substances strongly sorb to suspended particulates in water. In the absence of hydrolysis, sorption to solids, (e.g., sludge and sediments), will be the primary mechanism of removal. Biological breakdown is minimal for most compounds and evaporation is negligible. Evaporation from surface water is expected to take years. In wastewater treatment this process is not expected to be significant. Isocyanates will react with water producing carbon dioxide and forming a solid mass, which is insoluble.

Biodegradation: Breakdown of these substances in oxygenated and low oxygen environments is not expected to occur. Most of the substances take several months to degrade.

Degradation of the hydrolysis products will occur at varying rates.

Ecotoxicity: These substances are not expected to accumulate/biomagnify in the environment. These substances are toxic if inhaled. These substances are harmful to aquatic organisms and may cause long-term adverse effects in the aquatic environment.

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
4,4'-diphenylmethane diisocyanate (MDI)	LOW (Half-life = 1 days)	LOW (Half-life = 0.24 days)

Bioaccumulative potential

Ingredient	Bioaccumulation
4,4'-diphenylmethane diisocyanate (MDI)	LOW (BCF = 15)

Mobility in soil

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

SECTION 13 Disposal considerations

Waste treatment methods

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ Containers may still present a chemical hazard/ danger when empty. ▶ Return to supplier for reuse/ recycling if possible. <p>Otherwise:</p> <ul style="list-style-type: none"> ▶ 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. <p>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.</p> <p>A Hierarchy of Controls seems to be common - the user should investigate:</p> <ul style="list-style-type: none"> ▶ Reduction ▶ Reuse ▶ Recycling ▶ Disposal (if all else fails) <p>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.</p> <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. ▶ DO NOT recycle spilled material. ▶ Consult State Land Waste Management Authority for disposal. ▶ Neutralise spill material carefully and decontaminate empty containers and spill residues with 10% ammonia solution plus detergent or a proprietary decontaminant prior to disposal. ▶ DO NOT seal or stopper drums being decontaminated as CO2 gas is generated and may pressurise containers. ▶ Puncture containers to prevent re-use. ▶ Bury or incinerate residues at an approved site.
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ERAPOL EME167 ISOCYANATE

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

MDI homopolymer is found on the following regulatory lists

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

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

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australian Inventory of Industrial Chemicals (AIIC)

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

International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs

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

National Inventory Status

National Inventory	Status
Australia - AIIC	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
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	30/09/2020
Initial Date	25/09/2018

SDS Version Summary

Version	Issue Date	Sections Updated
2.4.1.1.1	30/09/2020	Ingredients

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

OSF: Odour Safety Factor

NOAEL :No Observed Adverse Effect Level

LOAEL: Lowest Observed Adverse Effect Level

ERAPOL EME167 ISOCYANATE

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