



## Duram E200 Compound (Part B)

Duram Pty Ltd

Chemwatch: 5236-11

Version No: 4.1.1.1

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 3

Issue Date: 01/11/2019

Print Date: 05/05/2020

S.GHS.AUS.EN

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

#### Product Identifier

Product name	Duram E200 Compound (Part B)
Synonyms	E200 Compound
Proper shipping name	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S. (contains isophorone diamine and m-xylenediamine)
Other means of identification	Not Available

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

Relevant identified uses	Requires that the two parts be mixed by hand or mixer before use, in accordance with manufacturer directions. Mix only as much as is required. Do not return the mixed material to the original containers.
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#### Details of the supplier of the safety data sheet

Registered company name	Duram Pty Ltd
Address	51 Prince William Drive Seven Hills NSW 2147 Australia
Telephone	+61 2 9624 4007
Fax	+61 2 9624 4079
Website	www.duram.com.au
Email	mail@duram.com.au

#### Emergency telephone number

Association / Organisation	CHEMTREC Australia (Sydney)
Emergency telephone numbers	+612 9037 2994 24 hours / 7 days
Other emergency telephone numbers	Not Available

### SECTION 2 HAZARDS IDENTIFICATION

#### Classification of the substance or mixture

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

#### CHEMWATCH HAZARD RATINGS

	Min	Max	
Flammability	1	1	
Toxicity	2	3	
Body Contact	3	4	
Reactivity	1	1	
Chronic	2	2	

0 = Minimum  
1 = Low  
2 = Moderate  
3 = High  
4 = Extreme

Poisons Schedule	S5
Classification [1]	Metal Corrosion Category 1, Acute Toxicity (Oral) Category 4, Acute Toxicity (Dermal) Category 4, Skin Corrosion/Irritation Category 1A, Serious Eye Damage Category 1, Skin Sensitizer Category 1, Respiratory Sensitizer Category 1, Specific target organ toxicity - single exposure Category 3 (narcotic effects), Acute Aquatic Hazard Category 2, Chronic Aquatic Hazard 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

**Duram E200 Compound (Part B)**

**Hazard statement(s)**

<b>H290</b>	May be corrosive to metals.
<b>H302</b>	Harmful if swallowed.
<b>H312</b>	Harmful in contact with skin.
<b>H314</b>	Causes severe skin burns and eye damage.
<b>H317</b>	May cause an allergic skin reaction.
<b>H334</b>	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
<b>H336</b>	May cause drowsiness or dizziness.
<b>H411</b>	Toxic to aquatic life with long lasting effects.

**Precautionary statement(s) Prevention**

<b>P260</b>	Do not breathe mist/vapours/spray.
<b>P271</b>	Use only outdoors or in a well-ventilated area.
<b>P280</b>	Wear protective gloves/protective clothing/eye protection/face protection.

**Precautionary statement(s) Response**

<b>P301+P330+P331</b>	IF SWALLOWED: Rinse mouth. Do NOT induce vomiting.
<b>P303+P361+P353</b>	IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower.
<b>P304+P340</b>	IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing.

**Precautionary statement(s) Storage**

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

**Precautionary statement(s) Disposal**

<b>P501</b>	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
100-51-6	30-60	<a href="#">benzyl alcohol</a>
2855-13-2	10-30	<a href="#">isophorone diamine</a>
113930-69-1	10-30	<a href="#">bisphenol A/ m-xylylenediamine epoxy hardener</a>
1477-55-0	1-10	<a href="#">m-xylenediamine</a>
69-72-7	1-10	<a href="#">salicylic acid</a>

**SECTION 4 FIRST AID MEASURES**

**Description of first aid measures**

<b>Eye Contact</b>	<p>If this product comes in contact with the eyes:</p> <ul style="list-style-type: none"> <li>▶ Immediately hold eyelids apart and flush the eye continuously with running water.</li> <li>▶ 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.</li> <li>▶ Continue flushing until advised to stop by the Poisons Information Centre or a doctor, or for at least 15 minutes.</li> <li>▶ Transport to hospital or doctor without delay.</li> <li>▶ Removal of contact lenses after an eye injury should only be undertaken by skilled personnel.</li> </ul> <p>For amines:</p> <ul style="list-style-type: none"> <li>▶ If liquid amines come in contact with the eyes, irrigate immediately and continuously with low pressure flowing water, preferably from an eye wash fountain, for 15 to 30 minutes.</li> <li>▶ For more effective flushing of the eyes, use the fingers to spread apart and hold open the eyelids. The eyes should then be "rolled" or moved in all directions.</li> <li>▶ Seek immediate medical attention, preferably from an ophthalmologist.</li> </ul>
<b>Skin Contact</b>	<p>If skin or hair contact occurs:</p> <ul style="list-style-type: none"> <li>▶ Immediately flush body and clothes with large amounts of water, using safety shower if available.</li> <li>▶ Quickly remove all contaminated clothing, including footwear.</li> <li>▶ Wash skin and hair with running water. Continue flushing with water until advised to stop by the Poisons Information Centre.</li> <li>▶ Transport to hospital, or doctor.</li> </ul> <p>For amines:</p> <ul style="list-style-type: none"> <li>▶ In case of major exposure to liquid amine, promptly remove any contaminated clothing, including rings, watches, and shoe, preferably under a safety shower.</li> <li>▶ Wash skin for 15 to 30 minutes with plenty of water and soap. Call a physician immediately.</li> <li>▶ Remove and dry-clean or launder clothing soaked or soiled with this material before reuse. Dry cleaning of contaminated clothing may be more effective than normal laundering.</li> <li>▶ Inform individuals responsible for cleaning of potential hazards associated with handling contaminated clothing.</li> </ul>

## Duram E200 Compound (Part B)

	<ul style="list-style-type: none"> <li>▶ Discard contaminated leather articles such as shoes, belts, and watchbands.</li> <li>▶ Note to Physician: Treat any skin burns as thermal burns. After decontamination, consider the use of cold packs and topical antibiotics.</li> </ul>
Inhalation	<ul style="list-style-type: none"> <li>▶ If fumes or combustion products are inhaled remove from contaminated area.</li> <li>▶ Lay patient down. Keep warm and rested.</li> <li>▶ Prostheses such as false teeth, which may block airway, should be removed, where possible, prior to initiating first aid procedures.</li> <li>▶ 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.</li> <li>▶ Transport to hospital, or doctor.</li> <li>▶ Inhalation of vapours or aerosols (mists, fumes) may cause lung oedema.</li> <li>▶ Corrosive substances may cause lung damage (e.g. lung oedema, fluid in the lungs).</li> <li>▶ As this reaction may be delayed up to 24 hours after exposure, affected individuals need complete rest (preferably in semi-recumbent posture) and must be kept under medical observation even if no symptoms are (yet) manifested.</li> <li>▶ Before any such manifestation, the administration of a spray containing a dexamethasone derivative or beclomethasone derivative may be considered.</li> </ul> <p><b>This must definitely be left to a doctor or person authorised by him/her.</b> (ICSC13719)</p> <p>For amines:</p> <ul style="list-style-type: none"> <li>▶ All employees working in areas where contact with amine catalysts is possible should be thoroughly trained in the administration of appropriate first aid procedures.</li> <li>▶ Experience has demonstrated that prompt administration of such aid can minimize the effects of accidental exposure.</li> <li>▶ Promptly move the affected person away from the contaminated area to an area of fresh air.</li> <li>▶ Keep the affected person calm and warm, but not hot.</li> <li>▶ If breathing is difficult, oxygen may be administered by a qualified person.</li> <li>▶ If breathing stops, give artificial respiration. Call a physician at once.</li> </ul>
Ingestion	<ul style="list-style-type: none"> <li>▶ For advice, contact a Poisons Information Centre or a doctor at once.</li> <li>▶ Urgent hospital treatment is likely to be needed.</li> <li>▶ <b>If swallowed do NOT induce vomiting.</b></li> <li>▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration.</li> <li>▶ Observe the patient carefully.</li> <li>▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious.</li> <li>▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink.</li> <li>▶ Transport to hospital or doctor without delay.</li> </ul> <p>For amines:</p> <ul style="list-style-type: none"> <li>▶ If liquid amine are ingested, have the affected person drink several glasses of water or milk.</li> <li>▶ Do not induce vomiting.</li> <li>▶ Immediately transport to a medical facility and inform medical personnel about the nature of the exposure. The decision of whether to induce vomiting should be made by an attending physician.</li> </ul>

## Indication of any immediate medical attention and special treatment needed

## for salicylate intoxication:

- ▶ Pending gastric lavage, use emetics such as syrup of Ipecac or delay gastric emptying and absorption by swallowing a slurry of activated charcoal. **Do not give ipecac after charcoal.**
- ▶ Gastric lavage with water or perhaps sodium bicarbonate solution (3%-5%). Mild alkali delays salicylate absorption from the stomach and perhaps slightly from the duodenum.
- ▶ Saline catharsis with sodium or magnesium sulfate (15-30 gm in water).
- ▶ Take an immediate blood sample for an appraisal of the patient's acid-base status. A pH determination on an anaerobic sample of arterial blood is best. An analysis of the plasma salicylate concentration should be made at the same time. Laboratory controls are almost essential for the proper management of severe salicylism.
- ▶ In the presence of an established acidosis, alkali therapy is essential, but at least in an adult, alkali should be withheld until its need is demonstrated by chemical analysis. The intensity of treatment depends on the intensity of acidosis. In the presence of vomiting, intravenous sodium bicarbonate is the most satisfactory of all alkali therapy.
- ▶ Correct dehydration and hypoglycaemia (if present) by the intravenous administration of glucose in water or in isotonic saline. The administration of glucose may also serve to remedy ketosis which is often seen in poisoned children.
- ▶ Even in patients without hypoglycaemia, infusions of glucose adequate to produce distinct hyperglycaemia are recommended to prevent glucose depletion in the brain. This recommendation is based on impressive experimental data in animals.
- ▶ Renal function should be supported by correcting dehydration and incipient shock. Overhydration is not justified. An alkaline urine should be maintained by the administration of alkali if necessary with care to prevent a severe systemic alkalosis. As long as urine remains alkaline (pH above 7.5), administration of an osmotic diuretic such as mannitol or perhaps THAM is useful, but one must be careful to avoid hypokalaemia. Supplements of potassium chloride should be included in parenteral fluids.
- ▶ Small doses of barbiturates, diazepam, paraldehyde, or perhaps other sedatives (but probably not morphine) may be required to suppress extreme restlessness and convulsions.
- ▶ For hyperpyrexia, use sponge baths.

The presence of petechiae or other signs of haemorrhagic tendency calls for a large Vitamin K dose and perhaps ascorbic acid. Minor transfusions may be necessary since bleeding in salicylism is not always due to a prothrombin effect.

- ▶ Haemodialysis and haemoperfusion have proved useful in salicylate poisoning, as have peritoneal dialysis and exchange transfusions, but alkaline diuretic therapy is probably sufficient except in fulminating cases.

[GOSSELIN, et al.: *Clinical Toxicology of Commercial Products*]

The mechanism of the toxic effect involves metabolic acidosis, respiratory alkalosis, hypoglycaemia, and potassium depletion. Salicylate poisoning is characterised by extreme acid-base disturbances, electrolyte disturbances and decreased levels of consciousness. There are differences between acute and chronic toxicity and a varying clinical picture which is dependent on the age of the patient and their kidney function. The major feature of poisoning is metabolic acidosis due to "uncoupling of oxidative phosphorylation" which produces an increased metabolic rate, increased oxygen consumption, increased formation of carbon dioxide, increased heat production and increased utilisation of glucose. Direct stimulation of the respiratory centre leads to hyperventilation and respiratory alkalosis. This leads to compensatory increased renal excretion of bicarbonate which contributes to the metabolic acidosis which may coexist or develop subsequently. Hypoglycaemia may occur as a result of increased glucose demand, increased rates of tissue glycolysis, and impaired rate of glucose synthesis. **NOTE:** Tissue glucose levels may be lower than plasma levels. Hyperglycaemia may occur due to increased glycogenolysis. Potassium depletion occurs as a result of increased renal excretion as well as intracellular movement of potassium.

Salicylates competitively inhibit vitamin K dependent synthesis of factors II, VII, IX, X and in addition, may produce a mild dose dependent hepatitis. Salicylates are bound to albumin. The extent of protein binding is concentration dependent (and falls with higher blood levels). This, and the effects of acidosis, decreasing ionisation, means that the volume of distribution increases markedly in overdose as does CNS penetration. The extent of protein binding (50-80%) and the rate of metabolism are concentration dependent. Hepatic clearance has zero order kinetics and thus the therapeutic half-life of 2-4.5 hours but the half-life in overdose is 18-36 hours. Renal excretion is the most important route in overdose. Thus when the salicylate concentrations are in the toxic range there is increased tissue distribution and impaired clearance of the drug.

HyperTox 3.0 <http://www.ozemail.com.au/-ouad/SALI0001.HTA>

For acute or short-term repeated exposures to highly alkaline materials:

- ▶ Respiratory stress is uncommon but present occasionally because of soft tissue edema.
- ▶ Unless endotracheal intubation can be accomplished under direct vision, cricothyroidotomy or tracheotomy may be necessary.
- ▶ Oxygen is given as indicated.
- ▶ The presence of shock suggests perforation and mandates an intravenous line and fluid administration.

- Damage due to alkaline corrosives occurs by liquefaction necrosis whereby the saponification of fats and solubilisation of proteins allow deep penetration into the tissue. Alkalis continue to cause damage after exposure.

**INGESTION:**

- Milk and water are the preferred diluents
- No more than 2 glasses of water should be given to an adult.
- Neutralising agents should never be given since exothermic heat reaction may compound injury.
- \* Catharsis and emesis are absolutely contra-indicated.
- \* Activated charcoal does not absorb alkali.
- \* Gastric lavage should not be used.

Supportive care involves the following:

- Withhold oral feedings initially.
- If endoscopy confirms transmucosal injury start steroids only within the first 48 hours.
- Carefully evaluate the amount of tissue necrosis before assessing the need for surgical intervention.
- Patients should be instructed to seek medical attention whenever they develop difficulty in swallowing (dysphagia).

**SKIN AND EYE:**

- Injury should be irrigated for 20-30 minutes.
- Eye injuries require saline. [Ellenhorn & Barceloux: Medical Toxicology]

For amines:

- Certain amines may cause injury to the respiratory tract and lungs if aspirated. Also, such products may cause tissue destruction leading to stricture. If lavage is performed, endotracheal and/or esophagoscopy control is suggested.
- No specific antidote is known.
- Care should be supportive and treatment based on the judgment of the physician in response to the reaction of the patient.

Laboratory animal studies have shown that a few amines are suspected of causing depletion of certain white blood cells and their precursors in lymphoid tissue. These effects may be due to an immunosuppressive mechanism.

Some persons with hyperreactive airways (e.g., asthmatic persons) may experience wheezing attacks (bronchospasm) when exposed to airway irritants.

Lung injury may result following a single massive overexposure to high vapour concentrations or multiple exposures to lower concentrations of any pulmonary irritant material.

Health effects of amines, such as skin irritation and transient corneal edema ("blue haze," "halo effect," "glaucompsia"), are best prevented by means of formal worker education, industrial hygiene monitoring, and exposure control methods. Persons who are highly sensitive to the triggering effect of non-specific irritants should not be assigned to jobs in which such agents are used, handled, or manufactured.

**Medical surveillance programs** should consist of a pre-placement evaluation to determine if workers or applicants have any impairments (e.g., hyperreactive airways or bronchial asthma) that would limit their fitness for work in jobs with potential for exposure to amines. A clinical baseline can be established at the time of this evaluation.

Periodic medical evaluations can have significant value in the early detection of disease and in providing an opportunity for health counseling.

Medical personnel conducting medical surveillance of individuals potentially exposed to polyurethane amine catalysts should consider the following:

- Health history, with emphasis on the respiratory system and history of infections
- Physical examination, with emphasis on the respiratory system and the lymphoreticular organs (lymph nodes, spleen, etc.)
- Lung function tests, pre- and post-bronchodilator if indicated
- Total and differential white blood cell count
- Serum protein electrophoresis

Persons who are concurrently exposed to isocyanates also should be kept under medical surveillance.

Pre-existing medical conditions generally aggravated by exposure include skin disorders and allergies, chronic respiratory disease (e.g. bronchitis, asthma, emphysema), liver disorders, kidney disease, and eye disease.

Broadly speaking, exposure to amines, as characterised by amine catalysts, may cause effects similar to those caused by exposure to ammonia. As such, amines should be considered potentially injurious to any tissue that is directly contacted.

Inhalation of aerosol mists or vapors, especially of heated product, can result in chemical pneumonitis, pulmonary edema, laryngeal edema, and delayed scarring of the airway or other affected organs. There is no specific treatment.

Clinical management is based upon supportive treatment, similar to that for thermal burns.

Persons with major skin contact should be maintained under medical observation for at least 24 hours due to the possibility of delayed reactions.

**Polyurethane Amine Catalysts: Guidelines for Safe Handling and Disposal Technical Bulletin June 2000**

**Alliance for Polyurethanes Industry**

## SECTION 5 FIREFIGHTING MEASURES

### Extinguishing media

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

### Special hazards arising from the substrate or mixture

<b>Fire Incompatibility</b>	<ul style="list-style-type: none"> <li>Avoid contamination with oxidising agents i.e. nitrates, oxidising acids, chlorine bleaches, pool chlorine etc. as ignition may result</li> </ul>
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### Advice for firefighters

<b>Fire Fighting</b>	<ul style="list-style-type: none"> <li>Alert Fire Brigade and tell them location and nature of hazard.</li> <li>Wear full body protective clothing with breathing apparatus.</li> <li>Prevent, by any means available, spillage from entering drains or water course.</li> </ul> <p>For amines:</p> <ul style="list-style-type: none"> <li>For firefighting, cleaning up large spills, and other emergency operations, workers must wear a self-contained breathing apparatus with full face-piece, operated in a pressure-demand mode.</li> <li>Airline and air purifying respirators should not be worn for firefighting or other emergency or upset conditions.</li> <li>Respirators should be used in conjunction with a respiratory protection program, which would include suitable fit testing and medical evaluation of the user.</li> </ul>
<b>Fire/Explosion Hazard</b>	<ul style="list-style-type: none"> <li>Combustible.</li> <li>Slight fire hazard when exposed to heat or flame.</li> <li>Heating may cause expansion or decomposition leading to violent rupture of containers.</li> </ul> <p>Combustion products include: carbon dioxide (CO<sub>2</sub>) aldehydes nitrogen oxides (NO<sub>x</sub>) other pyrolysis products typical of burning organic material. May emit corrosive fumes.</p> <p><b>WARNING:</b> Long standing in contact with air and light may result in the formation of potentially explosive peroxides.</p>
<b>HAZCHEM</b>	2X

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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**

<b>Minor Spills</b>	<ul style="list-style-type: none"> <li>▶ Drains for storage or use areas should have retention basins for pH adjustments and dilution of spills before discharge or disposal of material.</li> <li>▶ Check regularly for spills and leaks.</li> </ul> <p>Slippery when spilt.</p> <ul style="list-style-type: none"> <li>▶ Clean up all spills immediately.</li> <li>▶ Avoid breathing vapours and contact with skin and eyes.</li> <li>▶ Control personal contact with the substance, by using protective equipment.</li> </ul> <p>for amines:</p> <ul style="list-style-type: none"> <li>▶ If possible (i.e., without risk of contact or exposure), stop the leak.</li> <li>▶ Contain the spilled material by diking, then neutralize.</li> <li>▶ Next, absorb the neutralized product with clay, sawdust, vermiculite, or other inert absorbent and shovel into containers.</li> </ul>
<b>Major Spills</b>	<p>Slippery when spilt.</p> <ul style="list-style-type: none"> <li>▶ Clear area of personnel and move upwind.</li> <li>▶ Alert Fire Brigade and tell them location and nature of hazard.</li> <li>▶ Wear full body protective clothing with breathing apparatus.</li> </ul> <p>For amines:</p> <ul style="list-style-type: none"> <li>▶ First remove all ignition sources from the spill area.</li> <li>▶ Have firefighting equipment nearby, and have firefighting personnel fully trained in the proper use of the equipment and in the procedures used in fighting a chemical fire.</li> <li>▶ Spills and leaks of polyurethane amine catalysts should be contained by diking, if necessary, and cleaned up only by properly trained and equipped personnel.</li> </ul>

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

**SECTION 7 HANDLING AND STORAGE**

**Precautions for safe handling**

<b>Safe handling</b>	<ul style="list-style-type: none"> <li>▶ <b>DO NOT USE brass or copper containers / stirrers</b></li> <li>▶ <b>DO NOT allow clothing wet with material to stay in contact with skin</b></li> </ul> <p>The substance accumulates peroxides which may become hazardous only if it evaporates or is distilled or otherwise treated to concentrate the peroxides. The substance may concentrate around the container opening for example.</p> <p>Purchases of peroxidisable chemicals should be restricted to ensure that the chemical is used completely before it can become peroxidised.</p> <ul style="list-style-type: none"> <li>▶ Avoid all personal contact, including inhalation.</li> <li>▶ Wear protective clothing when risk of exposure occurs.</li> <li>▶ Use in a well-ventilated area.</li> </ul>
<b>Other information</b>	<ul style="list-style-type: none"> <li>▶ Store in original containers.</li> <li>▶ Keep containers securely sealed.</li> <li>▶ Store in a cool, dry, well-ventilated area.</li> <li>▶ <b>DO NOT store near acids, or oxidising agents</b></li> <li>▶ No smoking, naked lights, heat or ignition sources.</li> </ul>

**Conditions for safe storage, including any incompatibilities**

<b>Suitable container</b>	<p>Pails.</p> <ul style="list-style-type: none"> <li>▶ Lined metal can, lined metal pail/ can.</li> <li>▶ Plastic pail.</li> <li>▶ Polyliner drum.</li> </ul> <p>For low viscosity materials</p> <ul style="list-style-type: none"> <li>▶ Drums and jerricans must be of the non-removable head type.</li> <li>▶ Where a can is to be used as an inner package, the can must have a screwed enclosure.</li> </ul> <p>For materials with a viscosity of at least 2680 cSt.</p>
<b>Storage incompatibility</b>	<ul style="list-style-type: none"> <li>▶ Avoid reaction with oxidising agents</li> <li>▶ Reacts with mild steel, galvanised steel / zinc producing hydrogen gas which may form an explosive mixture with air.</li> <li>▶ Avoid strong acids, acid chlorides, acid anhydrides and chloroformates.</li> <li>▶ Avoid contact with copper, aluminium and their alloys.</li> </ul>

**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	m-xylenediamine	m-Xylene-alpha,alpha'-diamine	Not Available	Not Available	0.1 mg/m3	Not Available

**EMERGENCY LIMITS**

Ingredient	Material name	TEEL-1	TEEL-2	TEEL-3
benzyl alcohol	Benzyl alcohol	30 ppm	52 ppm	740 ppm

## Duram E200 Compound (Part B)

Ingredient	Original IDLH	Revised IDLH
benzyl alcohol	Not Available	Not Available
isophorone diamine	Not Available	Not Available
bisphenol A/ m-xilylenediamine epoxy hardener	Not Available	Not Available
m-xilylenediamine	Not Available	Not Available
salicylic acid	Not Available	Not Available

## OCCUPATIONAL EXPOSURE BANDING

Ingredient	Occupational Exposure Band Rating	Occupational Exposure Band Limit
benzyl alcohol	E	≤ 0.1 ppm
isophorone diamine	D	> 0.1 to ≤ 1 ppm
bisphenol A/ m-xilylenediamine epoxy hardener	E	≤ 0.1 ppm
salicylic acid	E	≤ 0.01 mg/m <sup>3</sup>

**Notes:** Occupational exposure banding is a process of assigning chemicals into specific categories or bands based on a chemical's potency and the adverse health outcomes associated with exposure. The output of this process is an occupational exposure band (OEB), which corresponds to a range of exposure concentrations that are expected to protect worker health.

## Exposure controls

<b>Appropriate engineering controls</b>	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.
<b>Personal protection</b>	
<b>Eye and face protection</b>	<ul style="list-style-type: none"> <li>Chemical goggles.</li> <li>Full face shield may be required for supplementary but never for primary protection of eyes.</li> <li>Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants.</li> </ul> For amines: <b>SPECIAL PRECAUTION:</b> <ul style="list-style-type: none"> <li>Because amines are alkaline materials that can cause rapid and severe tissue damage, wearing of contact lenses while working with amines is strongly discouraged. Wearing such lenses can prolong contact of the eye tissue with the amine, thereby causing more severe damage.</li> <li>Appropriate eye protection should be worn whenever amines are handled or whenever there is any possibility of direct contact with liquid products, vapors, or aerosol mists.</li> </ul>
<b>Skin protection</b>	See Hand protection below
<b>Hands/feet protection</b>	<ul style="list-style-type: none"> <li>Wear chemical protective gloves, e.g. PVC.</li> <li>Wear safety footwear or safety gumboots, e.g. Rubber</li> <li>When handling corrosive liquids, wear trousers or overalls outside of boots, to avoid spills entering boots.</li> </ul> <b>NOTE:</b> <ul style="list-style-type: none"> <li>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.</li> <li>Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.</li> </ul> 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. <ul style="list-style-type: none"> <li>Leather wear not recommended: Contaminated leather footwear, watch bands, should be destroyed, i.e. burnt, as they cannot be adequately decontaminated</li> </ul> For amines: <ul style="list-style-type: none"> <li>Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly.</li> <li>Application of a non-perfumed moisturiser is recommended</li> <li>Where there is a possibility of exposure to liquid amines skin protection should include: rubber gloves, (neoprene, nitrile, or butyl).</li> </ul>
<b>Body protection</b>	See Other protection below
<b>Other protection</b>	<ul style="list-style-type: none"> <li>Overalls.</li> <li>PVC Apron.</li> <li>PVC protective suit may be required if exposure severe.</li> </ul>

## 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:

Duram E200 Compound (Part B)

Material	CPI
BUTYL	A
VITON	A

\* CPI - Chemwatch Performance Index

A: Best Selection

## Respiratory protection

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

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

Required minimum protection factor	Maximum gas/vapour concentration present in air p.p.m. (by volume)	Half-face Respirator	Full-Face Respirator
up to 10	1000	AK-AUS / Class1 P2	-
up to 50	1000	-	AK-AUS / Class 1 P2

Continued...

## Duram E200 Compound (Part B)

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.

up to 50	5000	Airline *	-
up to 100	5000	-	AK-2 P2
up to 100	10000	-	AK-3 P2
100+			Airline**

\* - Continuous Flow \*\* - Continuous-flow or positive pressure demand  
A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO<sub>2</sub>), G = Agricultural chemicals, K = Ammonia(NH<sub>3</sub>), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

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

Where engineering controls are not feasible and work practices do not reduce airborne amine concentrations below recommended exposure limits, appropriate respiratory protection should be used. In such cases, air-purifying respirators equipped with cartridges designed to protect against amines are recommended.

## SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

## Information on basic physical and chemical properties

<b>Appearance</b>	Clear liquid with an aromatic odour; does not mix with water.		
<b>Physical state</b>	Liquid	<b>Relative density (Water = 1)</b>	1.1
<b>Odour</b>	Not Available	<b>Partition coefficient n-octanol / water</b>	Not Available
<b>Odour threshold</b>	Not Available	<b>Auto-ignition temperature (°C)</b>	Not Available
<b>pH (as supplied)</b>	Not Applicable	<b>Decomposition temperature</b>	Not Available
<b>Melting point / freezing point (°C)</b>	Not Available	<b>Viscosity (cSt)</b>	Not Available
<b>Initial boiling point and boiling range (°C)</b>	Not Available	<b>Molecular weight (g/mol)</b>	Not Applicable
<b>Flash point (°C)</b>	Not Available	<b>Taste</b>	Not Available
<b>Evaporation rate</b>	Not Available	<b>Explosive properties</b>	Not Available
<b>Flammability</b>	Not Available	<b>Oxidising properties</b>	Not Available
<b>Upper Explosive Limit (%)</b>	Not Available	<b>Surface Tension (dyn/cm or mN/m)</b>	Not Available
<b>Lower Explosive Limit (%)</b>	Not Available	<b>Volatile Component (%vol)</b>	Not Available
<b>Vapour pressure (kPa)</b>	Not Available	<b>Gas group</b>	Not Available
<b>Solubility in water</b>	Immiscible	<b>pH as a solution (1%)</b>	Not Applicable
<b>Vapour density (Air = 1)</b>	Not Available	<b>VOC g/L</b>	Not Available

## SECTION 10 STABILITY AND REACTIVITY

<b>Reactivity</b>	See section 7
<b>Chemical stability</b>	<ul style="list-style-type: none"> <li>▶ Unstable in the presence of incompatible materials.</li> <li>▶ Product is considered stable.</li> <li>▶ Hazardous polymerisation will not occur.</li> </ul>
<b>Possibility of hazardous reactions</b>	See section 7
<b>Conditions to avoid</b>	See section 7
<b>Incompatible materials</b>	See section 7
<b>Hazardous decomposition products</b>	See section 5

## SECTION 11 TOXICOLOGICAL INFORMATION

## Information on toxicological effects

<b>Inhaled</b>	Inhalation of vapours may cause drowsiness and dizziness. This may be accompanied by sleepiness, reduced alertness, loss of reflexes, lack of co-ordination, and vertigo. Inhalation of epoxy resin amine hardeners (including polyamines and amine adducts) may produce bronchospasm and coughing episodes lasting several days after cessation of the exposure. Even faint traces of these vapours may trigger an intense reaction in individuals showing "amine asthma".
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**Duram E200 Compound (Part B)**

	<p>Inhalation of amine vapours may cause irritation of the mucous membrane of the nose and throat, and lung irritation with respiratory distress and cough. Swelling and inflammation of the respiratory tract is seen in serious cases; with headache, nausea, faintness and anxiety. Inhalation of aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful. There is some evidence to suggest that the material can cause respiratory irritation in some persons. The body's response to such irritation can cause further lung damage.</p>
<b>Ingestion</b>	<p>Accidental ingestion of the material may be harmful; animal experiments indicate that ingestion of less than 150 gram may be fatal or may produce serious damage to the health of the individual. The material can produce chemical burns within the oral cavity and gastrointestinal tract following ingestion. Ingestion of amine epoxy-curing agents (hardeners) may cause severe abdominal pain, nausea, vomiting or diarrhoea. The vomitus may contain blood and mucous. Amines without benzene rings when swallowed are absorbed throughout the gut. Corrosive action may cause damage throughout the gastrointestinal tract. Central nervous system (CNS) depression may include general discomfort, symptoms of giddiness, headache, dizziness, nausea, anaesthetic effects, slowed reaction time, slurred speech and may progress to unconsciousness. Serious poisonings may result in respiratory depression and may be fatal.</p>
<b>Skin Contact</b>	<p>Skin contact with the material may be harmful; systemic effects may result following absorption. The material can produce chemical burns following direct contact with the skin. Amine epoxy-curing agents (hardeners) may produce primary skin irritation and sensitisation dermatitis in predisposed individuals. Cutaneous reactions include erythema, intolerable itching and severe facial swelling. Volatile amine vapours produce irritation and inflammation of the skin. Direct contact can cause burns. 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. There is some evidence to suggest that the material may cause moderate inflammation of the skin either following direct contact or after a delay of some time. Repeated exposure can cause contact dermatitis which is characterised by redness, swelling and blistering.</p>
<b>Eye</b>	<p>The material can produce chemical burns to the eye following direct contact. Vapours or mists may be extremely irritating. If applied to the eyes, this material causes severe eye damage. Vapours of volatile amines irritate the eyes, causing excessive secretion of tears, inflammation of the conjunctiva and slight swelling of the cornea, resulting in "halos" around lights. This effect is temporary, lasting only for a few hours. However this condition can reduce the efficiency of undertaking skilled tasks, such as driving a car.</p>
<b>Chronic</b>	<p>Repeated or prolonged exposure to corrosives may result in the erosion of teeth, inflammatory and ulcerative changes in the mouth and necrosis (rarely) of the jaw. Bronchial irritation, with cough, and frequent attacks of bronchial pneumonia may ensue. Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Skin contact with the material is more likely to cause a sensitisation reaction in some persons compared to the general population. There has been some concern that this material can cause cancer or mutations but there is not enough data to make an assessment. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. Based on experience with similar materials, there is a possibility that exposure to the material may reduce fertility in humans at levels which do not cause other toxic effects. Inhalation of epoxy resin amine hardeners (including polyamines and amine adducts) may produce bronchospasm and coughing episodes lasting several days after cessation of the exposure. Even faint traces of these vapours may trigger an intense reaction in individuals showing "amine asthma". Sensitisation may give severe responses to very low levels of exposure, i.e. hypersensitivity.</p>

<b>Duram E200 Compound (Part B)</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	Not Available	Not Available
<b>benzyl alcohol</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	Dermal (rabbit) LD50: 2000 mg/kg <sup>[2]</sup>	Eye (rabbit): 0.75 mg open SEVERE
	Inhalation (rat) LC50: >4.178 mg/l/4h <sup>[2]</sup>	Eye: adverse effect observed (irritating) <sup>[1]</sup>
	Oral (rat) LD50: 1230 mg/kg <sup>[2]</sup>	Skin (man): 16 mg/48h-mild Skin (rabbit): 10 mg/24h open-mild Skin: no adverse effect observed (not irritating) <sup>[1]</sup>
<b>isophorone diamine</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	dermal (rat) LD50: >2000 mg/kg <sup>[1]</sup> Oral (rat) LD50: 1030 mg/kg <sup>[2]</sup>	Not Available
<b>bisphenol A/ m-xylylenediamine epoxy hardener</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	dermal (rat) LD50: 2000 mg/kg <sup>[1]</sup> Oral (rat) LD50: >=300-2000 mg/kg <sup>[1]</sup>	Skin: adverse effect observed (corrosive) <sup>[1]</sup>
<b>m-xylenediamine</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	Dermal (rabbit) LD50: 2000 mg/kg <sup>[2]</sup>	Eye (rabbit): 0.05 mg/24h SEVERE
	Inhalation (rat) LC50: 174.800325 mg/l/1hE <sup>[2]</sup> Oral (rat) LD50: >200 mg/kg <sup>[1]</sup>	Skin (rabbit): 0.75 mg/24h SEVERE
<b>salicylic acid</b>	<b>TOXICITY</b>	<b>IRRITATION</b>
	dermal (rat) LD50: >2000 mg/kg <sup>[2]</sup>	Eye (rabbit): 100 mg - SEVERE
	Oral (rat) LD50: 500-2000 mg/kg <sup>[1]</sup>	Eye: adverse effect observed (irritating) <sup>[1]</sup> Skin (rabbit): 500 mg/24h - mild
		Skin: no adverse effect observed (not irritating) <sup>[1]</sup>

## Duram E200 Compound (Part B)

<b>Legend:</b>	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
<b>BENZYL ALCOHOL</b>	<p>Unlike benzylic alcohols, the beta-hydroxyl group of the members of benzyl alkyl alcohols contributes to break down reactions but do not undergo phase II metabolic activation. Though structurally similar to cancer causing ethyl benzene, phenethyl alcohol is only of negligible concern due to limited similarity in their pattern of activity.</p> <p>For benzoates: Benzyl alcohol, benzoic acid and its sodium and potassium salt have a common metabolic and excretion pathway. All but benzyl alcohol are considered to be unharmed and of low acute toxicity. They may cause slight irritation by oral, dermal or inhalation exposure except sodium benzoate which doesn't irritate the skin.</p> <p>Adverse reactions to fragrances in perfumes and fragranced cosmetic products include allergic contact dermatitis, irritant contact dermatitis, sensitivity to light, immediate contact reactions, and pigmented contact dermatitis. Airborne and conjugal contact dermatitis occurs. Contact allergy is a lifelong condition, so symptoms may occur on re-exposure.</p> <p>Fragrance allergens act as haptens, low molecular weight chemicals that cause an immune response only when attached to a carrier protein. However, not all sensitizing fragrance chemicals are directly reactive, but require previous activation. A hapten is a chemical that itself causes little or no sensitization, but is transformed into a hapten in the skin (bioactivation), usually via enzyme catalysis.</p> <p>This is a member or analogue of a group of benzyl derivatives generally regarded as safe (GRAS), based partly on their self-limiting properties as flavouring substances in food. In humans and other animals, they are rapidly absorbed, broken down and excreted, with a wide safety margin. They also lack significant potential to cause genetic toxicity and mutations.</p> <p>The aryl alkyl alcohol (AAA) fragrance ingredients have diverse chemical structures, with similar metabolic and toxicity profiles. The AAA fragrances demonstrate low acute and subchronic toxicity by skin contact and swallowing. At concentrations likely to be encountered by consumers, AAA fragrance ingredients are non-irritating to the skin.</p>
<b>ISOPHORONE DIAMINE</b>	<p>Isophorone diamine is a strong skin irritant, corrosive with repeated application. Frequent occupational exposure may lead to the development of allergic skin inflammation. There could be damage to the smell organ, throat and lungs following inhalational exposure.</p> <p>The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>The material may produce respiratory tract irritation, and result in damage to the lung including reduced lung function.</p>
<b>BISPHENOL A/ M-XYLYLENEDIAMINE EPOXY HARDENER</b>	<p>No significant acute toxicological data identified in literature search.</p> <p>The chemical structure of hydroxylated diphenylalkanes or bisphenols consists of two phenolic rings joined together through a bridging carbon. This class of endocrine disruptors that mimic oestrogens is widely used in industry, particularly in plastics</p> <p>Bisphenol A (BPA) and some related compounds exhibit oestrogenic activity in human breast cancer cell line MCF-7, but there were remarkable differences in activity. Several derivatives of BPA exhibited significant thyroid hormonal activity towards rat pituitary cell line GH3, which releases growth hormone in a thyroid hormone-dependent manner.</p>
<b>M-XYLENEDIAMINE</b>	<p>Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other irritants may aggravate symptoms.</p> <p>Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema.</p> <p>Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure.</p> <p>For benzene-1,3-dimethanamine (m-xylene-alpha,alpha'-diamine): Animal testing showed that benzene-1,3-methanamine caused tissue damage to the digestive and respiratory organs, if given by mouth or inhaled, respectively. The chemical is corrosive to animal skin, and may cause sensitization. Testing has not shown any reproductive toxicity or ability to cause mutations.</p> <p>The material may cause severe skin irritation after prolonged or repeated exposure and may produce on contact skin redness, swelling, the production of vesicles, scaling and thickening of the skin. Repeated exposures may produce severe ulceration.</p> <p>Overexposure to most of these materials may cause adverse health effects.</p> <p>Many amine-based compounds can cause release of histamines, which, in turn, can trigger allergic and other physiological effects, including constriction of the bronchi or asthma and inflammation of the cavity of the nose. Whole-body symptoms include headache, nausea, faintness, anxiety, a decrease in blood pressure, rapid heartbeat, itching, reddening of the skin, urticaria (hives) and swelling of the face, which are usually transient.</p> <p>There are generally four routes of possible or potential exposure: inhalation, skin contact, eye contact, and swallowing.</p> <p>Inhalation: Inhaling vapours may result in moderate to severe irritation of the tissues of the nose and throat and can irritate the lungs. Higher concentrations of certain amines can produce severe respiratory irritation, characterized by discharge from the nose, coughing, difficulty in breathing and chest pain.</p>
<b>SALICYLIC ACID</b>	<p>For certain benzyl derivatives: The members of this group are rapidly absorbed through the gastrointestinal tract, metabolised primarily in the liver, and excreted primarily in the urine either unchanged or as conjugates of benzoic acid derivatives. At high dose levels, gut micro-organisms may act to produce minor amounts of breakdown products. However, no adverse effects have been reported even at repeated high doses.</p> <p>A member or analogue of a group of hydroxy and alkoxy-substituted benzyl derivatives generally regarded as safe (GRAS) based in part on their self-limiting properties as flavouring substances in food; their rapid absorption, metabolic detoxification, and excretion in humans and other animals, their low level of flavour use, the wide margin of safety between the conservative estimates of intake and the no-observed-adverse effect levels determined from chronic and subchronic studies and the lack of significant genotoxic and mutagenic potential. This evidence of safety is supported by the fact that the intake of benzyl derivatives as natural components of traditional foods is greater than the intake as intentionally added flavouring substances.</p> <p>All members of this group are aromatic primary alcohols, aldehydes, carboxylic acids or their corresponding esters or acetals.</p> <p>The salicylates are well absorbed by mouth, and oral bioavailability is assumed to be total. In humans, absorption through skin is more limited.</p> <p>The salicylates are expected to be broken down to salicylic acid, mostly in the liver, and then conjugated with glycine or glucuronic acid and excreted in the urine.</p>
<b>BENZYL ALCOHOL &amp; ISOPHORONE DIAMINE &amp; BISPHENOL A/ M-XYLYLENEDIAMINE EPOXY HARDENER &amp; M-XYLENEDIAMINE</b>	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions.</p>
<b>BENZYL ALCOHOL &amp; ISOPHORONE DIAMINE &amp; SALICYLIC ACID</b>	<p>The material may cause 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.</p>
<b>ISOPHORONE DIAMINE &amp; BISPHENOL A/ M-XYLYLENEDIAMINE EPOXY HARDENER &amp; M-XYLENEDIAMINE &amp; SALICYLIC ACID</b>	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant.</p>

**Duram E200 Compound (Part B)**

<b>M-XYLENEDIAMINE &amp; SALICYLIC ACID</b>	The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.			
<b>Acute Toxicity</b>	✓	<b>Carcinogenicity</b>	✗	
<b>Skin Irritation/Corrosion</b>	✓	<b>Reproductivity</b>	✗	
<b>Serious Eye Damage/Irritation</b>	✓	<b>STOT - Single Exposure</b>	✓	
<b>Respiratory or Skin sensitisation</b>	✓	<b>STOT - Repeated Exposure</b>	✗	
<b>Mutagenicity</b>	✗	<b>Aspiration Hazard</b>	✗	

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

**SECTION 12 ECOLOGICAL INFORMATION**

**Toxicity**

Duram E200 Compound (Part B)	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	Not Available	Not Available	Not Available	Not Available	Not Available
benzyl alcohol	LC50	96	Fish	10mg/L	2
	EC50	48	Crustacea	230mg/L	2
	EC50	96	Algae or other aquatic plants	76.828mg/L	2
	NOEC	336	Fish	5.1mg/L	2
isophorone diamine	LC50	96	Fish	54.352mg/L	3
	EC50	48	Crustacea	17.4mg/L	2
	EC50	96	Algae or other aquatic plants	7.221mg/L	3
	NOEC	72	Algae or other aquatic plants	=1.5mg/L	1
bisphenol A/ m-xylylenediamine epoxy hardener	LC50	96	Fish	8.72mg/L	2
	EC50	48	Crustacea	1.46mg/L	2
	EC50	72	Algae or other aquatic plants	1.83mg/L	2
	EC0	48	Crustacea	1.102mg/L	2
	NOEC	72	Algae or other aquatic plants	0.36mg/L	2
m-xylenediamine	LC50	96	Fish	75mg/L	2
	EC50	48	Crustacea	15.2mg/L	2
	EC50	72	Algae or other aquatic plants	12mg/L	2
	NOEC	504	Crustacea	4.7mg/L	2
salicylic acid	LC50	96	Fish	1-370mg/L	2
	EC50	48	Crustacea	1-945.32mg/L	2
	EC50	72	Algae or other aquatic plants	>100mg/L	2
	BCF	72	Algae or other aquatic plants	<50mg/L	4
	NOEC	504	Crustacea	10mg/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

Toxic 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.

Prevent, by any means available, spillage from entering drains or water courses.

**DO NOT discharge into sewer or waterways.**

**Persistence and degradability**

Ingredient	Persistence: Water/Soil	Persistence: Air
benzyl alcohol	LOW	LOW
isophorone diamine	HIGH	HIGH

Duram E200 Compound (Part B)

m-xylenediamine	HIGH	HIGH
salicylic acid	LOW	LOW

**Bioaccumulative potential**

Ingredient	Bioaccumulation
benzyl alcohol	LOW (LogKOW = 1.1)
isophorone diamine	LOW (BCF = 3.4)
m-xylenediamine	LOW (BCF = 2.7)
salicylic acid	MEDIUM (BCF = 1000)

**Mobility in soil**

Ingredient	Mobility
benzyl alcohol	LOW (KOC = 15.66)
isophorone diamine	LOW (KOC = 340.4)
m-xylenediamine	LOW (KOC = 914.6)
salicylic acid	LOW (KOC = 23.96)

**SECTION 13 DISPOSAL CONSIDERATIONS**

**Waste treatment methods**

<b>Product / Packaging disposal</b>	<ul style="list-style-type: none"> <li>▶ Containers may still present a chemical hazard/ danger when empty.</li> <li>▶ Return to supplier for reuse/ recycling if possible.</li> </ul> <p>Otherwise:</p> <ul style="list-style-type: none"> <li>▶ 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.</li> </ul> <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> <ul style="list-style-type: none"> <li>▶ <b>DO NOT allow wash water from cleaning or process equipment to enter drains.</b></li> <li>▶ It may be necessary to collect all wash water for treatment before disposal.</li> <li>▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.</li> <li>▶ Recycle wherever possible.</li> <li>▶ 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.</li> <li>▶ Treat and neutralise at an approved treatment plant.</li> </ul>
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**SECTION 14 TRANSPORT INFORMATION**

**Labels Required**

	
<b>Marine Pollutant</b>	
<b>HAZCHEM</b>	2X

**Land transport (ADG)**

<b>UN number</b>	2735
<b>UN proper shipping name</b>	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S. (contains isophorone diamine and m-xylenediamine)
<b>Transport hazard class(es)</b>	Class : 8 Subrisk : Not Applicable
<b>Packing group</b>	III
<b>Environmental hazard</b>	Environmentally hazardous
<b>Special precautions for user</b>	Special provisions : 223 274 Limited quantity : 5 L

**Air transport (ICAO-IATA / DGR)**

<b>UN number</b>	2735
<b>UN proper shipping name</b>	Amines, liquid, corrosive, n.o.s. * (contains isophorone diamine and m-xylenediamine); Polyamines, liquid, corrosive, n.o.s. * (contains isophorone diamine and m-xylenediamine)

<b>Transport hazard class(es)</b>	ICAO/IATA Class	8
	ICAO / IATA Subrisk	Not Applicable
	ERG Code	8L
<b>Packing group</b>	III	
<b>Environmental hazard</b>	Environmentally hazardous	
<b>Special precautions for user</b>	Special provisions	A3 A803
	Cargo Only Packing Instructions	856
	Cargo Only Maximum Qty / Pack	60 L
	Passenger and Cargo Packing Instructions	852
	Passenger and Cargo Maximum Qty / Pack	5 L
	Passenger and Cargo Limited Quantity Packing Instructions	Y841
	Passenger and Cargo Limited Maximum Qty / Pack	1 L

**Sea transport (IMDG-Code / GGVSee)**

<b>UN number</b>	2735	
<b>UN proper shipping name</b>	AMINES, LIQUID, CORROSIVE, N.O.S. or POLYAMINES, LIQUID, CORROSIVE, N.O.S. (contains isophorone diamine and m-xylenediamine)	
<b>Transport hazard class(es)</b>	IMDG Class	8
	IMDG Subrisk	Not Applicable
<b>Packing group</b>	III	
<b>Environmental hazard</b>	Marine Pollutant	
<b>Special precautions for user</b>	EMS Number	F-A , S-B
	Special provisions	223 274
	Limited Quantities	5 L

**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****BENZYL ALCOHOL IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Inventory of Chemical Substances (AICS)

**ISOPHORONE DIAMINE IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5

**BISPHENOL A/ M-XYLENEDIAMINE EPOXY HARDENER IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Inventory of Chemical Substances (AICS)

**M-XYLENEDIAMINE IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Inventory of Chemical Substances (AICS)

**SALICYLIC ACID IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals

Australia Inventory of Chemical Substances (AICS)

Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 3

**National Inventory Status**

National Inventory	Status
Australia - AICS	Yes
Canada - DSL	No (bisphenol A/ m-xylylenediamine epoxy hardener)
Canada - NDSL	No (benzyl alcohol; bisphenol A/ m-xylylenediamine epoxy hardener; m-xylylenediamine; salicylic acid)
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	No (bisphenol A/ m-xylylenediamine epoxy hardener)
Korea - KECI	No (bisphenol A/ m-xylylenediamine epoxy hardener)
New Zealand - NZIoC	Yes
Philippines - PICCS	No (bisphenol A/ m-xylylenediamine epoxy hardener)
USA - TSCA	No (bisphenol A/ m-xylylenediamine epoxy hardener)
Taiwan - TCSI	Yes
Mexico - INSQ	No (bisphenol A/ m-xylylenediamine epoxy hardener)

Continued...

Vietnam - NCI	Yes
Russia - ARIPS	No (bisphenol A/ m-xylylenediamine epoxy hardener)
<b>Legend:</b>	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

<b>Revision Date</b>	01/11/2019
<b>Initial Date</b>	14/12/2016

### SDS Version Summary

Version	Issue Date	Sections Updated
3.1.1.1	21/12/2016	Name
4.1.1.1	01/11/2019	One-off system update. NOTE: This may or may not change the GHS classification

### 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.

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

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TEL (+61 3) 9572 4700.