



Theo Forch 1K-Pur Adhesive Sealer Black K126 380 G Art.: 6630 6500, Art.: 6634 6500

Forch Australia Pty Ltd

Chemwatch Hazard Alert Code: 2

Chemwatch: 23-5987

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Safety Data Sheet according to WHS and ADG requirements

S.GHS.AUS.EN

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

Product Identifier

Product name	Theo Forch 1K-Pur Adhesive Sealer Black K126 380 G Art.: 6630 6500, Art.: 6634 6500
Synonyms	Art.: 6630 6500; 6634 6500; Product Code: 6630 6501, 6634 6501; Product Code: 6630 6500, 6634 6500
Other means of identification	Not Available

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

Relevant identified uses	Adhesive sealant.
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Details of the supplier of the safety data sheet

Registered company name	Forch Australia Pty Ltd
Address	2 Forward Street Gnagnara WA 6077 Australia
Telephone	+61 8 9303 9113
Fax	+61 8 9303 9114
Website	www.forch.com.au
Email	admin@forch.com.au

Emergency telephone number

Association / Organisation	+61 8 9303 9113
Emergency telephone numbers	0413 550 330 (Terry Childs)
Other emergency telephone numbers	0424 135 792

SECTION 2 HAZARDS IDENTIFICATION

Classification of the substance or mixture

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

CHEMWATCH HAZARD RATINGS

	Min	Max
Flammability	1	1
Toxicity	1	1
Body Contact	0	0
Reactivity	1	1
Chronic	2	2

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

Poisons Schedule	Not Applicable
Classification [1]	Respiratory 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)

H334	May cause allergy or asthma symptoms or breathing difficulties if inhaled.
H351	Suspected of causing cancer.

Precautionary statement(s) Prevention

P201	Obtain special instructions before use.
P261	Avoid breathing mist/vapours/spray.
P281	Use personal protective equipment as required.
P285	In case of inadequate ventilation wear respiratory protection.

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.
P342+P311	If experiencing respiratory symptoms: Call a POISON CENTER or doctor/physician.

Precautionary statement(s) Storage

P405	Store locked up.
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Precautionary statement(s) Disposal

P501	Dispose of contents/container in accordance with local regulations.
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SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

Mixtures

CAS No	%[weight]	Name
1330-20-7	1-<10	<u>xylene</u>
100-41-4	1-<2	<u>ethylbenzene</u>
25686-28-6	0.1-<1	<u>MDI homopolymer</u>
101-68-8	0.1-<0.5	<u>4,4'-diphenylmethane diisocyanate (MDI)</u>

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 contact occurs:</p> <ul style="list-style-type: none"> ▶ Immediately remove all contaminated clothing, including footwear. ▶ Flush skin and hair with running water (and soap if available). ▶ Seek medical attention in event of irritation.

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. <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"> ▶ If swallowed do NOT induce vomiting. ▶ If vomiting occurs, lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. ▶ Observe the patient carefully. ▶ Never give liquid to a person showing signs of being sleepy or with reduced awareness; i.e. becoming unconscious. ▶ Give water to rinse out mouth, then provide liquid slowly and as much as casualty can comfortably drink. ▶ Seek medical advice. ▶ Avoid giving milk or oils. ▶ Avoid giving alcohol.

Indication of any immediate medical attention and special treatment needed

Treat symptomatically.

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.

For acute or short term repeated exposures to xylene:

- ▶ Gastro-intestinal absorption is significant with ingestions. For ingestions exceeding 1-2 ml (xylene)/kg, intubation and lavage with cuffed endotracheal tube is recommended. The use of charcoal and cathartics is equivocal.
- ▶ Pulmonary absorption is rapid with about 60-65% retained at rest.
- ▶ Primary threat to life from ingestion and/or inhalation, is respiratory failure.
- ▶ Patients should be quickly evaluated for signs of respiratory distress (e.g. cyanosis, tachypnoea, intercostal retraction, obtundation) and given oxygen. Patients with inadequate tidal volumes or poor arterial blood gases (pO₂ < 50 mm Hg or pCO₂ > 50 mm Hg) should be intubated.
- ▶ Arrhythmias complicate some hydrocarbon ingestion and/or inhalation and electrocardiographic evidence of myocardial injury has been reported; intravenous lines and cardiac monitors should be established in obviously symptomatic patients. The lungs excrete inhaled solvents, so that hyperventilation improves clearance.
- ▶ A chest x-ray should be taken immediately after stabilisation of breathing and circulation to document aspiration and detect the presence of pneumothorax.
- ▶ Epinephrine (adrenalin) is not recommended for treatment of bronchospasm because of potential myocardial sensitisation to catecholamines. Inhaled cardioselective bronchodilators (e.g. Alupent, Salbutamol) are the preferred agents, with aminophylline a second choice.

BIOLOGICAL EXPOSURE INDEX - BEI

These represent the determinants observed in specimens collected from a healthy worker exposed at the Exposure Standard (ES or TLV):

Determinant	Index	Sampling Time	Comments
Methylhippu-ric acids in urine	1.5 gm/gm creatinine 2 mg/min	End of shift Last 4 hrs of shift	

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

- ▶ Alcohol stable foam.
- ▶ Dry chemical powder.

- ‡ BCF (where regulations permit).
 - ‡ Carbon dioxide.
 - ‡ Water spray or fog - Large fires only.
- Do not use water jets.

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 breathing apparatus plus protective gloves. ‡ Prevent, by any means available, spillage from entering drains or water courses. ‡ Use water delivered as a fine spray to control fire and cool adjacent area. ‡ DO NOT approach containers suspected to be hot. ‡ Cool fire exposed containers with water spray from a protected location. ‡ If safe to do so, remove containers from path of fire.
Fire/Explosion Hazard	<ul style="list-style-type: none"> ‡ Combustible. ‡ Slight fire hazard when exposed to heat or flame. ‡ Heating may cause expansion or decomposition leading to violent rupture of containers. ‡ On combustion, may emit toxic fumes of carbon monoxide (CO). ‡ May emit acrid smoke. ‡ Mists containing combustible materials may be explosive. <p>Combustion products include: carbon dioxide (CO₂) isocyanates and minor amounts of hydrogen cyanide hydrogen chloride phosgene nitrogen oxides (NO_x) sulfur oxides (SO_x) other pyrolysis products typical of burning organic material. May emit poisonous fumes. May emit corrosive fumes.</p>
HAZCHEM	Not Applicable

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

See section 8

Environmental precautions

See section 12

Methods and material for containment and cleaning up

Minor Spills	<ul style="list-style-type: none"> ‡ Clean up all spills immediately. ‡ Avoid contact with skin and eyes. ‡ Wear impervious gloves and safety goggles. ‡ Trowel up/scrape up. ‡ Place spilled material in clean, dry, sealed container. ‡ Flush spill area with water.
Major Spills	<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. ‡ Stop leak if safe to do so. ‡ Contain spill with sand, earth or vermiculite. ‡ Collect recoverable product into labelled containers for recycling. <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.
- ▶ 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.

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling	<ul style="list-style-type: none"> ▶ Avoid all personal contact, including inhalation. ▶ Wear protective clothing when risk of exposure occurs. ▶ Use in a well-ventilated area. ▶ Prevent concentration in hollows and sumps. ▶ DO NOT enter confined spaces until atmosphere has been checked. ▶ DO NOT allow material to contact humans, exposed food or food utensils. ▶ Avoid contact with incompatible materials.
Other information	<ul style="list-style-type: none"> ▶ Store in original containers. ▶ Keep containers securely sealed. ▶ No smoking, naked lights or ignition sources. ▶ Store in a cool, dry, well-ventilated area. ▶ Store away from incompatible materials and foodstuff containers. ▶ Protect containers against physical damage and check regularly for leaks. ▶ Observe manufacturer's storage and handling recommendations contained within this SDS.

Conditions for safe storage, including any incompatibilities

Suitable container	<ul style="list-style-type: none"> ▶ Metal can or drum ▶ Packaging as recommended by manufacturer. ▶ Check all containers are clearly labelled and free from leaks.
Storage incompatibility	<ul style="list-style-type: none"> ▶ Avoid reaction with oxidising agents ▶ Avoid strong acids, bases. ▶ Segregate from alcohol, water, amines

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	xylene	Xylene (o-, m-, p-isomers)	80 ppm / 350 mg/m ³	655 mg/m ³ / 150 ppm	Not Available	Not Available
Australia Exposure Standards	ethylbenzene	Ethyl benzene	100 ppm / 434 mg/m ³	543 mg/m ³ / 125 ppm	Not Available	Not Available
Australia Exposure Standards	4,4'-diphenylmethane diisocyanate (MDI)	Methylene bisphenyl isocyanate (MDI)	Not Available	Not Available	Not Available	See Isocyanates, all

EMERGENCY LIMITS

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

Ingredient	Original IDLH	Revised IDLH
xylene	900 ppm	Not Available

ethylbenzene	800 ppm	Not Available
MDI homopolymer	Not Available	Not Available
4,4'-diphenylmethane diisocyanate (MDI)	75 mg/m3	Not Available

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.</p> <p>The basic types of engineering controls are:</p> <p>Process controls which involve changing the way a job activity or process is done to reduce the risk.</p> <p>Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and ventilation that strategically "adds" and "removes" air in the work environment. Ventilation can remove or dilute an air contaminant if designed properly. The design of a ventilation system must match the particular process and chemical or contaminant in use.</p> <p>Employers may need to use multiple types of controls to prevent employee overexposure.</p>
Personal protection	
Eye and face protection	<ul style="list-style-type: none"> ▶ Safety glasses with side shields. ▶ Chemical goggles. ▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable.
Skin protection	See Hand protection below
Hands/feet protection	<ul style="list-style-type: none"> ▶ Wear chemical protective gloves, e.g. PVC. ▶ Wear safety footwear or safety gumboots, e.g. Rubber <p>NOTE:</p> <ul style="list-style-type: none"> ▶ The material may produce skin sensitisation in predisposed individuals. Care must be taken, when removing gloves and other protective equipment, to avoid all possible skin contact. ▶ Contaminated leather items, such as shoes, belts and watch-bands should be removed and destroyed.
Body protection	See Other protection below
Other protection	<ul style="list-style-type: none"> ▶ Overalls. ▶ P.V.C. apron. ▶ Barrier cream. ▶ Skin cleansing cream. ▶ Eye wash unit.

Recommended material(s)

GLOVE SELECTION INDEX

Glove selection is based on a modified presentation of the:

"Forsberg Clothing Performance Index".

The effect(s) of the following substance(s) are taken into account in the **computer-generated** selection:

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Material	CPI
BUTYL	C
BUTYL/NEOPRENE	C
HYPALON	C
NAT+NEOPR+NITRILE	C
NATURAL+NEOPRENE	C
NEOPRENE	C
NEOPRENE/NATURAL	C
NITRILE	C
NITRILE+PVC	C
PE/EVAL/PE	C

Respiratory protection

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

Where the concentration of gas/particulates in the breathing zone, approaches or exceeds the "Exposure Standard" (or ES), respiratory protection is required.

Degree of protection varies with both face-piece and Class of filter; the nature of protection varies with Type of filter.

Required Minimum Protection Factor	Half-Face Respirator	Full-Face Respirator	Powered Air Respirator
up to 10 x ES	A-AUS / Class 1	-	A-PAPR-AUS / Class 1
up to 50 x ES	Air-line*	-	-
up to 100 x ES	-	A-3	-
100+ x ES	-	Air-line**	-

* - 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(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low

PVA	C
PVC	C
PVDC/PE/PVDC	C
TEFLON	C
VITON	C

* CPI - Chemwatch Performance Index

A: Best Selection

B: Satisfactory; may degrade after 4 hours continuous immersion

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

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

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

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

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

Appearance	Black paste with characteristic odour; reacts with water.		
Physical state	Non Slump Paste	Relative density (Water = 1)	1.22 @20C
Odour	Not Available	Partition coefficient n-octanol / water	Not Available
Odour threshold	Not Available	Auto-ignition temperature (°C)	>200 (ignition temp.)
pH (as supplied)	Not Applicable	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 Applicable
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 (%)	7.8	Surface Tension (dyn/cm or mN/m)	Not Available
Lower Explosive Limit (%)	0.1	Volatile Component (%vol)	Not Available
Vapour pressure (kPa)	<10 @20C	Gas group	Not Available
Solubility in water	Reacts	pH as a solution (1%)	Not Applicable
Vapour density (Air = 1)	Not Available	VOC g/L	93.9

SECTION 10 STABILITY AND REACTIVITY

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

SECTION 11 TOXICOLOGICAL INFORMATION

Information on toxicological effects

Inhaled	Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be damaging to the health of the individual. 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.
Ingestion	Accidental ingestion of the material may be damaging to the health of the individual.
Skin Contact	The material is not thought to produce adverse health effects or skin irritation following contact (as classified by EC Directives using animal models). Nevertheless, good hygiene practice requires that exposure be kept to a minimum and that suitable gloves be used in an occupational setting. Open cuts, abraded or irritated skin should not be exposed to this material Entry into the blood-stream, through, for example, cuts, abrasions or lesions, may produce systemic injury with harmful effects. Examine the skin prior to the use of the material and ensure that any external damage is suitably protected.
Eye	Although the material is not thought to be an irritant (as classified by EC Directives), direct contact with the eye may produce transient discomfort characterised by tearing or conjunctival redness (as with windburn).
Chronic	There has been concern that this material can cause cancer or mutations, but there is not enough data to make an assessment. Inhaling this product is more likely to cause a sensitisation reaction in some persons compared to the general population. There is limited evidence that, skin contact with this product is more likely to cause a sensitisation reaction in some persons compared to the general population. Substance accumulation, in the human body, may occur and may cause some concern following repeated or long-term occupational exposure. There is some evidence from animal testing that exposure to this material may result in toxic effects to the unborn baby. Women exposed to xylene in the first 3 months of pregnancy showed a slightly increased risk of miscarriage and birth defects. Evaluation of workers chronically exposed to xylene has demonstrated lack of genetic toxicity. Exposure to the material for prolonged periods may cause physical defects in the developing embryo (teratogenesis).

Theo Forch 1K-Pur Adhesive Sealer Black K126 380 G Art.: 6630 6500, Art.: 6634 6500	TOXICITY	IRRITATION
	Dermal (None) LD50: >2000 mg/kg ^[2]	Not Available
	Inhalation (None) LC50: >20 mg/l/4h(vapours) ^{*[2]}	
xylene	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >1700 mg/kg ^[2]	Eye (human): 200 ppm irritant
	Inhalation (rat) LC50: 4994.295 mg/l/4h ^[2]	Eye (rabbit): 5 mg/24h SEVERE
	Oral (rat) LD50: 3523-8700 mg/kg ^[2]	Eye (rabbit): 87 mg mild
		Eye: adverse effect observed (irritating) ^[1]
		Skin (rabbit):500 mg/24h moderate
		Skin: adverse effect observed (irritating) ^[1]
ethylbenzene	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >5000 mg/kg ^[2]	Eye (rabbit): 500 mg - SEVERE
	Inhalation (mouse) LC50: 17.75 mg/l/2H ^[2]	Eye: no adverse effect observed (not irritating) ^[1]
	Oral (rat) LD50: 3500 mg/kg ^[2]	Skin (rabbit): 15 mg/24h mild
		Skin: no adverse effect observed (not irritating) ^[1]
MDI homopolymer	TOXICITY	IRRITATION
	Oral (rat) LD50: >2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
		Skin: adverse effect observed (irritating) ^[1]
4,4'-diphenylmethane diisocyanate (MDI)	TOXICITY	IRRITATION
	Dermal (rabbit) LD50: >6200 mg/kg ^[2]	Dermal Sensitiser *
	Oral (rat) LD50: >2000 mg/kg ^[1]	Eye: no adverse effect observed (not irritating) ^[1]
		Skin (rabbit): 500 mg /24 hours
		Skin: adverse effect observed (irritating) ^[1]
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	

XYLENE	Reproductive effector in rats
ETHYLBENZENE	<p>Ethylbenzene is readily absorbed when inhaled, swallowed or in contact with the skin. It is distributed throughout the body, and passed out through urine. It may irritate the skin, eyes and may cause hearing loss if exposed to high doses. Long Term exposure may cause damage to the kidney, liver and lungs, including a tendency to cancer formation, according to animal testing. There is no research on its effect on sex organs and unborn babies.</p> <p>NOTE: Substance has been shown to be mutagenic in at least one assay, or belongs to a family of chemicals producing damage or change to cellular DNA.</p> <p>WARNING: This substance has been classified by the IARC as Group 2B: Possibly Carcinogenic to Humans. Liver changes, uterual tract, effects on fertility, foetotoxicity, specific developmental abnormalities (musculoskeletal system) recorded.</p>
MDI HOMOPOLYMER	No significant acute toxicological data identified in literature search. as polymethylene polyphenyl isocyanate
4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	<p>Asthma-like symptoms may continue for months or even years after exposure to the material ends. This may be due to a non-allergic condition known as reactive airways dysfunction syndrome (RADS) which can occur after exposure to high levels of highly irritating compound. Main criteria for diagnosing RADS include the absence of previous airways disease in a non-atopic individual, with sudden onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. Other criteria for diagnosis of RADS include a reversible airflow pattern on lung function tests, moderate to severe bronchial hyperreactivity on methacholine challenge testing, and the lack of minimal lymphocytic inflammation, without eosinophilia. RADS (or asthma) following an irritating inhalation is an infrequent disorder with rates related to the concentration of and duration of exposure to the irritating substance. On the other hand, industrial bronchitis is a disorder that occurs as a result of exposure due to high concentrations of irritating substance (often particles) and is completely reversible after exposure ceases. The disorder is characterized by difficulty breathing, cough and mucus production.</p> <p>Allergic reactions involving the respiratory tract are usually due to interactions between IgE antibodies and allergens and occur rapidly. Allergic potential of the allergen and period of exposure often determine the severity of symptoms. Some people may be genetically more prone than others, and exposure to other irritants may aggravate symptoms. Allergy causing activity is due to interactions with proteins.</p> <p>Attention should be paid to atopic diathesis, characterised by increased susceptibility to nasal inflammation, asthma and eczema.</p> <p>Exogenous allergic alveolitis is induced essentially by allergen specific immune-complexes of the IgG type; cell-mediated reactions (T lymphocytes) may be involved. Such allergy is of the delayed type with onset up to four hours following exposure.</p> <p>Isocyanate vapours are irritating to the airways and can cause their inflammation, with wheezing, gasping, severe distress, even loss of consciousness and fluid in the lungs. Nervous system symptoms that may occur include headache, sleep disturbance, euphoria, inco-ordination, anxiety, depression and paranoia.</p> <p>The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <p>Aromatic and aliphatic diisocyanates may cause airway toxicity and skin sensitization. Monomers and prepolymers exhibit similar respiratory effect. Of the several members of diisocyanates tested on experimental animals by inhalation and oral exposure, some caused cancer while others produced a harmless outcome. This group of compounds has therefore been classified as cancer-causing.</p> <p>Inhalation (human) TCLo: 0.13 ppm/30 mins Eye (rabbit): 0.10 mg moderate</p>
XYLENE & ETHYLBENZENE	<p>The material may produce severe irritation to the eye causing pronounced inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.</p> <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>
XYLENE & MDI HOMOPOLYMER & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	<p>The substance is classified by IARC as Group 3:</p> <p>NOT classifiable as to its carcinogenicity to humans.</p> <p>Evidence of carcinogenicity may be inadequate or limited in animal testing.</p>
MDI HOMOPOLYMER & 4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)	<p>The following information refers to contact allergens as a group and may not be specific to this product.</p> <p>Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested.</p>

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

Theo Forch 1K-Pur Adhesive Sealer Black K126 380 G Art.: 6630 6500, Art.: 6634 6500	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
		Not Available	Not Available	Not Available	Not Available
xylene	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	2.6mg/L	2
	EC50	48	Crustacea	1.8mg/L	2
	EC50	72	Algae or other aquatic plants	3.2mg/L	2
	NOEC	73	Algae or other aquatic plants	0.44mg/L	2
ethylbenzene	ENDPOINT	TEST DURATION (HR)	SPECIES	VALUE	SOURCE
	LC50	96	Fish	0.0043mg/L	4
	EC50	48	Crustacea	1.184mg/L	4
	EC50	96	Algae or other aquatic plants	3.6mg/L	4
	NOEC	168	Crustacea	0.96mg/L	5
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
	NOEC	504	Crustacea	>=10mg/L	2
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
	NOEC	2688	Algae or other aquatic plants	>=10-mg/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				

DO NOT discharge into sewer or waterways.

Persistence and degradability

Ingredient	Persistence: Water/Soil	Persistence: Air
xylene	HIGH (Half-life = 360 days)	LOW (Half-life = 1.83 days)
ethylbenzene	HIGH (Half-life = 228 days)	LOW (Half-life = 3.57 days)
4,4'-diphenylmethane diisocyanate (MDI)	LOW (Half-life = 1 days)	LOW (Half-life = 0.24 days)

Bioaccumulative potential

Ingredient	Bioaccumulation
xylene	MEDIUM (BCF = 740)
ethylbenzene	LOW (BCF = 79.43)
4,4'-diphenylmethane diisocyanate (MDI)	LOW (BCF = 15)

Mobility in soil

Ingredient	Mobility
ethylbenzene	LOW (KOC = 517.8)

4,4'-diphenylmethane diisocyanate (MDI)

LOW (KOC = 376200)

SECTION 13 DISPOSAL CONSIDERATIONS**Waste treatment methods**

Product / Packaging disposal	<ul style="list-style-type: none"> ▶ 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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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****XYLENE(1330-20-7) IS FOUND ON THE FOLLOWING REGULATORY LISTS**

Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List	Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5
Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes	Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6
Australia Exposure Standards	GESAMP/EHS Composite List - GESAMP Hazard Profiles
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	IMO IBC Code Chapter 17: Summary of minimum requirements
Australia Hazardous chemicals which may require Health Monitoring	IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk
Australia Inventory of Chemical Substances (AICS)	IMO Provisional Categorization of Liquid Substances - List 3: (Trade-named) mixtures containing at least 99% by weight of components already assessed by IMO, presenting safety hazards
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix F (Part 3)	International Air Transport Association (IATA) Dangerous Goods Regulations
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Index	International Maritime Dangerous Goods Requirements (IMDG Code)
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Part 2, Section Seven - Appendix 1	United Nations Recommendations on the Transport of Dangerous Goods Model Regulations

ETHYLBENZENE(100-41-4) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Dangerous Goods Code (ADG Code) - Dangerous Goods List	GESAMP/EHS Composite List - GESAMP Hazard Profiles
Australia Dangerous Goods Code (ADG Code) - List of Emergency Action Codes	IMO IBC Code Chapter 17: Summary of minimum requirements
Australia Exposure Standards	IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	IMO Provisional Categorization of Liquid Substances - List 2: Pollutant only mixtures containing at least 99% by weight of components already assessed by IMO
Australia Hazardous chemicals which may require Health Monitoring	IMO Provisional Categorization of Liquid Substances - List 3: (Trade-named) mixtures containing at least 99% by weight of components already assessed by IMO, presenting safety hazards
Australia Inventory of Chemical Substances (AICS)	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)	International Air Transport Association (IATA) Dangerous Goods Regulations
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Index	International Maritime Dangerous Goods Requirements (IMDG Code)
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 5	United Nations Recommendations on the Transport of Dangerous Goods Model Regulations

MDI HOMOPOLYMER(25686-28-6) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	Australia Inventory of Chemical Substances (AICS)
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4,4'-DIPHENYLMETHANE DIISOCYANATE (MDI)(101-68-8) IS FOUND ON THE FOLLOWING REGULATORY LISTS

Australia Exposure Standards	Australia Work Health and Safety Regulations 2016 - Hazardous chemicals (other than lead) requiring health monitoring
Australia Hazardous Chemical Information System (HCIS) - Hazardous Chemicals	GESAMP/EHS Composite List - GESAMP Hazard Profiles
Australia Inventory of Chemical Substances (AICS)	IMO IBC Code Chapter 17: Summary of minimum requirements
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix E (Part 2)	IMO MARPOL (Annex II) - List of Noxious Liquid Substances Carried in Bulk
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Appendix F (Part 3)	International Agency for Research on Cancer (IARC) - Agents Classified by the IARC Monographs
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Index	International Air Transport Association (IATA) Dangerous Goods Regulations
Australia Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) - Schedule 6	International FOSFA List of Banned Immediate Previous Cargoes

National Inventory Status

National Inventory	Status
Australia - AICS	Yes
Canada - DSL	Yes
Canada - NDSL	No (MDI homopolymer; xylene; ethylbenzene; 4,4'-diphenylmethane diisocyanate (MDI))
China - IECSC	Yes
Europe - EINEC / ELINCS / NLP	Yes
Japan - ENCS	Yes
Korea - KECI	Yes
New Zealand - NZIoC	Yes
Philippines - PICCS	Yes
USA - TSCA	Yes
Taiwan - TCSI	Yes
Mexico - INSQ	No (MDI homopolymer)
Vietnam - NCI	Yes
Russia - ARIPS	Yes
Thailand - TECI	No (MDI homopolymer)
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	10/07/2018
Initial Date	27/05/2010

SDS Version Summary

Version	Issue Date	Sections Updated
3.1.1.1	10/07/2018	Acute Health (inhaled), Acute Health (skin), Acute Health (swallowed), Advice to Doctor, Appearance, Chronic Health, Classification, Disposal, Exposure Standard, Fire Fighter (extinguishing media), Fire Fighter (fire/explosion hazard), First Aid (inhaled), First Aid (swallowed), Handling Procedure, Ingredients, Instability Condition, Physical Properties, Storage (storage incompatibility), Supplier Information, Toxicity and Irritation (Toxicity Figure), Toxicity and Irritation (Other), Name

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

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