

Hychem SF25 Hardener

Hychem International

Chemwatch: **22-5181**Version No: **2.1.1.1**

Safety Data Sheet according to WHS and ADG requirements

Chemwatch Hazard Alert Code: 3

Issue Date: 01/01/2013 Print Date: 06/11/2014 Initial Date: Not Available

L.GHS.AUS.EN

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

Product Identifier

| Product name | Hychem SF25 Hardener |
|-------------------------------|----------------------|
| Chemical Name | Not Applicable |
| Synonyms | SF25 Hardener |
| Proper shipping name | Not Applicable |
| Chemical formula | Not Applicable |
| Other means of identification | Not Available |
| CAS number | Not Applicable |

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

Relevant identified uses

Use according to manufacturer's directions.

Details of the manufacturer/importer

| Registered company name | Hychem International |
|-------------------------|---|
| Address | Unit 1, 30 Bluett Drive Smeaton Grange 2567 NSW Australia |
| Telephone | +61 2 4646 1660 |
| Fax | +61 2 4647 3700 |
| Website | Not Available |
| Email | Not Available |

Emergency telephone number

| Association / Organisation | Not Available |
|-----------------------------------|---------------|
| Emergency telephone numbers | 1800 039 008 |
| Other emergency telephone numbers | 1800 039 008 |

CHEMWATCH EMERGENCY RESPONSE

| Primary Number | Alternative Number 1 | Alternative Number 2 |
|----------------|----------------------|----------------------|
| 1800 039 008 | +612 9186 1132 | Not Available |

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

SECTION 2 HAZARDS IDENTIFICATION

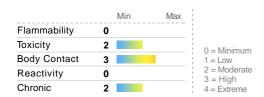
Classification of the substance or mixture

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

CHEMWATCH HAZARD RATINGS

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| Poisons Schedule | Not Applicable | |
|-----------------------------------|--|--|
| GHS Classification ^[1] | Acute Toxicity (Oral) Category 4, Acute Toxicity (Inhalation) Category 4, Skin Corrosion/Irritation Category 1B, Serious Eye Damage Category 1, Skin Sensitizer Category 1 | |
| Legend: | 1. Classified by Chemwatch; 2. Classification drawn from HSIS; 3. Classification drawn from EC Directive 1272/2008 - Annex VI | |

Label elements

GHS label elements





SIGNAL WORD

DANGER

Hazard statement(s)

| H302 | Harmful if swallowed | |
|------|---|--|
| H332 | armful if inhaled | |
| H314 | Causes severe skin burns and eye damage | |
| H318 | Causes serious eye damage | |
| H317 | May cause an allergic skin reaction | |

Precautionary statement(s): Prevention

| P260 | Do not breathe dust/fume/gas/mist/vapours/spray. |
|------|--|
| P271 | Use only outdoors or in a well-ventilated area. |
| P280 | Wear protective gloves/protective clothing/eye protection/face protection. |
| P270 | Do not eat, drink or smoke when using this product. |
| P272 | Contaminated work clothing should not be allowed out of the workplace. |

Precautionary statement(s): Response

| P301+P330+P331 | IF SWALLOWED: Rinse mouth. Do NOT induce vomiting. | |
|----------------|--|--|
| P303+P361+P353 | IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower. | |
| P305+P351+P338 | F IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue insing. | |
| P310 | Immediately call a POISON CENTER/doctor/physician/first aider | |
| P302+P352 | IF ON SKIN: Wash with plenty of water and soap | |
| P333+P313 | If skin irritation or rash occurs: Get medical advice/attention. | |
| P362+P364 | Take off contaminated clothing and wash it before reuse. | |
| P363 | Wash contaminated clothing before reuse. | |
| P301+P312 | IF SWALLOWED: Call a POISON CENTER/doctor/physician/first aider/if you feel unwell. | |
| P304+P340 | IF INHALED: Remove person to fresh air and keep comfortable for breathing. | |

Precautionary statement(s): Storage

Store locked up. P405

Precautionary statement(s): Disposal

P501 Dispose of contents/container to authorised chemical landfill or if organic to high temperature incineration

SECTION 3 COMPOSITION / INFORMATION ON INGREDIENTS

Substances

See section below for composition of Mixtures

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Mixtures

| CAS No | %[weight] | Name |
|------------|-----------|---|
| 39423-51-3 | <10 | trimethylolpropane triamine ether, propoxylated |
| 2855-13-2 | <10 | isophorone diamine |

SECTION 4 FIRST AID MEASURES

Description of first aid measures

| Description of first aid | d measures |
|--------------------------|---|
| Eye Contact | If this product comes in contact with the eyes: • 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 | If skin contact occurs: 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 | 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. |
| Ingestion | IF SWALLOWED, REFER FOR MEDICAL ATTENTION, WHERE POSSIBLE, WITHOUT DELAY. For advice, contact a Poisons Information Centre or a doctor. Urgent hospital treatment is likely to be needed. In the mean time, qualified first-aid personnel should treat the patient following observation and employing supportive measures as indicated by the patient's condition. If the services of a medical officer or medical doctor are readily available, the patient should be placed in his/her care and a copy of the MSDS should be provided. Further action will be the responsibility of the medical specialist. If medical attention is not available on the worksite or surroundings send the patient to a hospital together with a copy of the MSDS. Where medical attention is not immediately available or where the patient is more than 15 minutes from a hospital or unless instructed otherwise: INDUCE vomiting with fingers down the back of the throat, ONLY IF CONSCIOUS. Lean patient forward or place on left side (head-down position, if possible) to maintain open airway and prevent aspiration. NOTE: Wear a protective glove when inducing vomiting by mechanical means. |

Indication of any immediate medical attention and special treatment needed

As in all cases of suspected poisoning, follow the ABCDEs of emergency medicine (airway, breathing, circulation, disability, exposure), then the ABCDEs of toxicology (antidotes, basics, change absorption, change distribution, change elimination).

For poisons (where specific treatment regime is absent):

BASIC TREATMENT

• Establish a patent airway with suction where necessary.

- Watch for signs of respiratory insufficiency and assist ventilation as necessary.
- ▶ Administer oxygen by non-rebreather mask at 10 to 15 L/min.
- Monitor and treat, where necessary, for pulmonary oedema.
- Monitor and treat, where necessary, for shock.
- · Anticipate seizures.
- DO NOT use emetics. Where ingestion is suspected rinse mouth and give up to 200 ml water (5 ml/kg recommended) for dilution where patient is able to swallow, has a strong gag reflex and does not drool.

ADVANCED TREATMENT

• Consider orotracheal or nasotracheal intubation for airway control in unconscious patient or where respiratory arrest has occurred.

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

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BRONSTEIN, A.C. and CURRANCE, P.L. EMERGENCY CARE FOR HAZARDOUS MATERIALS EXPOSURE: 2nd Ed. 1994

SECTION 5 FIREFIGHTING MEASURES

Extinguishing media

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

Special hazards arising from the substrate or mixture

Fire Incompatibility

None known.

Advice for firefighters

Fire Fighting

- Alert Fire Brigade and tell them location and nature of hazard.
- Wear breathing apparatus plus protective gloves in the event of a fire.
- ▶ Prevent, by any means available, spillage from entering drains or water courses.
- Use fire fighting procedures suitable for surrounding area.
- ▶ DO NOT approach containers suspected to be hot.
- ▶ Cool fire exposed containers with water spray from a protected location.
- If safe to do so, remove containers from path of fire.
- Equipment should be thoroughly decontaminated after use.
- Fire/Explosion Hazard
- Non combustible.
- ▶ Not considered a significant fire risk, however containers may burn.

May emit poisonous fumes. May emit corrosive fumes.

SECTION 6 ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

Minor Spills

- Clean up all spills immediately.
- Avoid breathing vapours and contact with skin and eyes.
- ▶ Control personal contact with the substance, by using protective equipment.
- ▶ Contain and absorb spill with sand, earth, inert material or vermiculite.
- ▶ Wipe up.
- Place in a suitable, labelled container for waste disposal.

Moderate hazard.

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

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

SECTION 7 HANDLING AND STORAGE

Precautions for safe handling

Safe handling

- ▶ DO NOT allow clothing wet with material to stay in contact with skin
- ▶ Avoid all personal contact, including inhalation.
- Wear protective clothing when risk of exposure occurs.
- ▶ Use in a well-ventilated area.
- ▶ Avoid contact with moisture.
- ▶ Avoid contact with incompatible materials.
- When handling, **DO NOT** eat, drink or smoke.
- Keep containers securely sealed when not in use.
- Avoid physical damage to containers.
- Always wash hands with soap and water after handling.
- Work clothes should be laundered separately. Launder contaminated clothing before re-use.
- Use good occupational work practice.
- ▶ Observe manufacturer's storage and handling recommendations contained within this MSDS.

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| | Atmosphere should be regularly checked against established exposure standards to ensure safe working conditions are maintained. |
|-------------------|--|
| Other information | Store in original containers. Keep containers securely sealed. 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 MSDS. |

Conditions for safe storage, including any incompatibilities

| Suitable container | Polyethylene or polypropylene container. Packing as recommended by manufacturer. Check all containers are clearly labelled and free from leaks. | |
|-------------------------|---|--|
| Storage incompatibility | None known | |

PACKAGE MATERIAL INCOMPATIBILITIES

Not Available

SECTION 8 EXPOSURE CONTROLS / PERSONAL PROTECTION

TEEL-0

Control parameters

OCCUPATIONAL EXPOSURE LIMITS (OEL)

INGREDIENT DATA

Not Available

Ingredient

EMERGENCY LIMITS

| 3 | | | | |
|---|---|--|-----------------------------|--|
| Hychem SF25 Hardener | Not Available Not Available Not Available | | Not Available Not Available | |
| | | | | |
| Ingredient | Original IDLH | | Revised IDLH | |
| trimethylolpropane triamine ether, propoxylated | Not Available | | Not Available | |
| isophorone diamine | Not Available | | Not Available | |

TEEL-2

TEEL-3

MATERIAL DATA

Sensory irritants are chemicals that produce temporary and undesirable side-effects on the eyes, nose or throat. Historically occupational exposure standards for these irritants have been based on observation of workers' responses to various airborne concentrations. Present day expectations require that nearly every individual should be protected against even minor sensory irritation and exposure standards are established using uncertainty factors or safety factors of 5 to 10 or more. On occasion animal no-observable-effect-levels (NOEL) are used to determine these limits where human results are unavailable. An additional approach, typically used by the TLV committee (USA) in determining respiratory standards for this group of chemicals, has been to assign ceiling values (TLV C) to rapidly acting irritants and to assign short-term exposure limits (TLV STELs) when the weight of evidence from irritation, bioaccumulation and other endpoints combine to warrant such a limit. In contrast the MAK Commission (Germany) uses a five-category system based on intensive odour, local irritation, and elimination half-life. However this system is being replaced to be consistent with the European Union (EU) Scientific Committee for Occupational Exposure Limits (SCOEL); this is more closely allied to that of the USA.

OSHA (USA) concluded that exposure to sensory irritants can:

- cause inflammation
- cause increased susceptibility to other irritants and infectious agents
- lead to permanent injury or dysfunction

Appropriate

engineering controls

- permit greater absorption of hazardous substances and
- acclimate the worker to the irritant warning properties of these substances thus increasing the risk of overexposure.

Exposure controls

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

The basic types of engineering controls are:

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

Enclosure and/or isolation of emission source which keeps a selected hazard "physically" away from the worker and

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

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

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Local exhaust ventilation usually required. If risk of overexposure exists, wear approved respirator. Correct fit is essential to obtain adequate protection. Supplied-air type respirator may be required in special circumstances. Correct fit is essential to ensure adequate protection.

An approved self contained breathing apparatus (SCBA) may be required in some situations.

Provide adequate ventilation in warehouse or closed storage area. Air contaminants generated in the workplace possess varying "escape" velocities which, in turn, determine the "capture velocities" of fresh circulating air required to effectively remove the contaminant.

| Type of Contaminant: | Air Speed: |
|---|---------------------------------|
| solvent, vapours, degreasing etc., evaporating from tank (in still air). | 0.25-0.5 m/s (50-100 f/min.) |
| aerosols, fumes from pouring operations, intermittent container filling, low speed conveyer transfers, welding, spray drift, plating acid fumes, pickling (released at low velocity into zone of active generation) | 0.5-1 m/s (100-200 f/min.) |
| direct spray, spray painting in shallow booths, drum filling, conveyer loading, crusher dusts, gas discharge (active generation into zone of rapid air motion) | 1-2.5 m/s (200-500 f/min.) |
| grinding, abrasive blasting, tumbling, high speed wheel generated dusts (released at high initial velocity into zone of very high rapid air motion). | 2.5-10 m/s (500-2000 f/min.) |

Within each range the appropriate value depends on:

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

Simple theory shows that air velocity falls rapidly with distance away from the opening of a simple extraction pipe. Velocity generally decreases with the square of distance from the extraction point (in simple cases). Therefore the air speed at the extraction point should be adjusted, accordingly, after reference to distance from the contaminating source. The air velocity at the extraction fan, for example, should be a minimum of 1-2 m/s (200-400 f/min) for extraction of solvents generated in a tank 2 meters distant from the extraction point. Other mechanical considerations, producing performance deficits within the extraction apparatus, make it essential that theoretical air velocities are multiplied by factors of 10 or more when extraction systems are installed or used.

Personal protection











Eye and face protection

- Safety glasses with side shields.
- Chemical goggles.
- ▶ Contact lenses may pose a special hazard; soft contact lenses may absorb and concentrate irritants. A written policy document, describing the wearing of lenses or restrictions on use, should be created for each workplace or task. This should include a review of lens absorption and adsorption for the class of chemicals in use and an account of injury experience. Medical and first-aid personnel should be trained in their removal and suitable equipment should be readily available. In the event of chemical exposure, begin eye irrigation immediately and remove contact lens as soon as practicable. Lens should be removed at the first signs of eye redness or irritation - lens should be removed in a clean environment only after workers have washed hands thoroughly. [CDC NIOSH Current Intelligence Bulletin 59], [AS/NZS 1336 or national equivalent]

Skin protection

Hands/feet protection

See Hand protection below

- ▶ Wear chemical protective gloves, e.g. PVC.
- ▶ Wear safety footwear or safety gumboots, e.g. Rubber

NOTE:

- ▶ 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.

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.

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

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

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

- ▶ When prolonged or frequently repeated contact may occur, a glove with a protection class of 5 or higher (breakthrough time greater than 240 minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended.
- When only brief contact is expected, a glove with a protection class of 3 or higher (breakthrough time greater than 60

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| | minutes according to EN 374, AS/NZS 2161.10.1 or national equivalent) is recommended. Some glove polymer types are less affected by movement and this should be taken into account when considering gloves for long-term use. Contaminated gloves should be replaced. Gloves must only be worn on clean hands. After using gloves, hands should be washed and dried thoroughly. Application of a non-perfumed moisturiser is recommended. |
|------------------|--|
| Body protection | See Other protection below |
| Other protection | Overalls. P.V.C. apron. Barrier cream. Skin cleansing cream. Eye wash unit. |
| Thermal hazards | Not Available |

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 |
|----------|-----|
|----------|-----|

- * CPI Chemwatch Performance Index
- A: Best Selection
- B: Satisfactory; may degrade after 4 hours continuous immersion
- C: Poor to Dangerous Choice for other than short term immersion

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

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

Respiratory protection

Type AK-P 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 | AK-AUS P2 | - | AK-PAPR-AUS / Class 1 P2 |
| up to 50 x ES | - | AK-AUS / Class 1 P2 | - |
| up to 100 x ES | - | AK-2 P2 | AK-PAPR-2 P2 ^ |

^ - Full-face

A(All classes) = Organic vapours, B AUS or B1 = Acid gasses, B2 = Acid gas or hydrogen cyanide(HCN), B3 = Acid gas or hydrogen cyanide(HCN), E = Sulfur dioxide(SO2), G = Agricultural chemicals, K = Ammonia(NH3), Hg = Mercury, NO = Oxides of nitrogen, MB = Methyl bromide, AX = Low boiling point organic compounds(below 65 degC)

SECTION 9 PHYSICAL AND CHEMICAL PROPERTIES

Information on basic physical and chemical properties

| Appearance | Yellow liquid | | |
|--|---------------|---|----------------|
| | | | |
| Physical state | Liquid | Relative density (Water = 1) | 1.0 |
| Odour | Not Available | Partition coefficient n-octanol / water | Not Available |
| Odour threshold | Not Available | Auto-ignition temperature (°C) | Not Available |
| pH (as supplied) | Not Available | Decomposition temperature | Not Available |
| Melting point / freezing point (°C) | Not Available | Viscosity (cSt) | Not Available |
| Initial boiling point and boiling range (°C) | Not Available | Molecular weight (g/mol) | Not 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 (%) | Not Available | Surface Tension (dyn/cm or mN/m) | Not Available |
| Lower Explosive Limit (%) | Not Available | Volatile Component (%vol) | Not Available |

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| Vapour pressure (kPa) | Not Available | Gas group | Not Available |
|---------------------------|---------------|----------------------|---------------|
| Solubility in water (g/L) | Not Available | pH as a solution(1%) | Not Available |
| Vapour density (Air = 1) | Not Available | VOC g/L | Not Available |

SECTION 10 STABILITY AND REACTIVITY

| Reactivity | See section 7 |
|--|--|
| Chemical stability | 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

Inhalation of vapours or aerosols (mists, fumes), generated by the material during the course of normal handling, may be harmful.

Limited evidence or practical experience suggests that the material may produce irritation of the respiratory system, in a

Inhaled

significant number of individuals, following inhalation. In contrast to most organs, the lung is able to respond to a chemical insult by first removing or neutralising the irritant and then repairing the damage. The repair process, which initially evolved to protect mammalian lungs from foreign matter and antigens, may however, produce further lung damage resulting in the impairment of gas exchange, the primary function of the lungs. Respiratory tract irritation often results in an inflammatory response involving the recruitment and activation of many cell types, mainly derived from the vascular system. Inhalation of epoxy resin amine hardener vapours (including polyamines and amine adducts) may produce bronchospasm and coughing episodes lasting days after cessation of the exposure. Even faint traces of these vapours may trigger an intense reaction in individuals showing "amine asthma". The literature records several instances of systemic intoxications following the use of amines in epoxy resin systems.

Excessive exposure to the vapours of epoxy amine curing agents may cause both respiratory irritation and central nervous system depression. Signs and symptoms of central nervous system depression, in order of increasing exposure, are headache, dizziness, drowsiness, and incoordination. In short, a single prolonged (measured in hours) or excessive inhalation exposure may cause serious adverse effects, including death.

Ingestion

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.

Skin Contact

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

substantial number of individuals, and/or of producing a positive response in experimental animals. Limited evidence suggests that repeated or long-term occupational exposure may produce cumulative health effects involving organs or biochemical systems.

Practical experience shows that skin contact with the material is capable either of inducing a sensitisation reaction in a

Chronic

Limited evidence shows that inhalation of the material is capable of inducing a sensitisation reaction in a significant number of individuals at a greater frequency than would be expected from the response of a normal population.

Pulmonary sensitisation, resulting in hyperactive airway dysfunction and pulmonary allergy may be accompanied by fatigue, malaise and aching. Significant symptoms of exposure may persist for extended periods, even after exposure ceases. Symptoms can be activated by a variety of nonspecific environmental stimuli such as automobile exhaust, perfumes and passive smoking.

Sensitisation may give severe responses to very low levels of exposure, in situations where exposure may occur. Inhalation of epoxy resin amine hardener vapours (including polyamines and amine adducts) may produce bronchospasm and

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coughing episodes lasting days after cessation of the exposure. Even faint traces of these vapours may trigger an intense reaction in individuals showing "amine asthma". The literature records several instances of systemic intoxications following the use of amines in epoxy resin systems.

Excessive exposure to the vapours of epoxy amine curing agents may cause both respiratory irritation and central nervous system depression. Signs and symptoms of central nervous system depression, in order of increasing exposure, are headache, dizziness, drowsiness, and incoordination. In short, a single prolonged (measured in hours) or excessive inhalation exposure may cause serious adverse effects, including death.

| Hychem SF25 Hardener | TOXICITY | IRRITATION |
|---|---|-----------------------|
| | Not Available | Not Available |
| | TOXICITY | IRRITATION |
| | Dermal (Rabbit) LD50: 562 mg/kg ** | Skin: non-corrosive * |
| trimethylolpropane triamine ether, propoxylated | Dermal (Rat) LD50: >2000 mg/kg OECD 402* | |
| propoxylatou | Oral (Rat) LD50: <200 mg/kg OECD 423* | |
| | Not Available | Not Available |
| isophorone diamine | TOXICITY | IRRITATION |
| | Oral (rat) LD50: 1030 mg/kg | [Manufacturer HUE] |
| | Not Available | Not Available |

^{*} Value obtained from manufacturer's msds unless otherwise specified data extracted from RTECS - Register of Toxic Effects of Chemical Substances

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The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons

The material may produce moderate eye irritation leading to inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. 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. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

The material may produce respiratory tract irritation. Symptoms of pulmonary irritation may include coughing, wheezing, laryngitis, shortness of breath, headache, nausea, and a burning sensation.

Unlike most organs, the lung can respond to a chemical insult or a chemical agent, by first removing or neutralising the irritant and then repairing the damage (inflammation of the lungs may be a consequence).

The repair process (which initially developed to protect mammalian lungs from foreign matter and antigens) may, however, cause further damage to the lungs (fibrosis for example) when activated by hazardous chemicals. Often, this results in an impairment of gas exchange, the primary function of the lungs. Therefore prolonged exposure to respiratory irritants may cause sustained breathing difficulties.

The material may cause skin irritation after prolonged or repeated exposure and may produce a contact dermatitis (nonallergic). This form of dermatitis is often characterised by skin redness (erythema) and swelling the epidermis. Histologically there may be intercellular oedema of the spongy layer (spongiosis) and intracellular oedema of the epidermis.

TRIMETHYLOLPROPANE TRIAMINE ETHER, **PROPOXYLATED**

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Oral: LD50/rat: > 50 - < 200 mg/kg (OECD Guideline 423) No mortality within the stated exposition time as shown in animal studies. Literature data. Skin irritation: Non corrosive. (Epiderm Corrosivity Test) Eye irritation: Risk of serious damage to eyes. (HET-CAM test in vitro) Genetic toxicity: The substance was not mutagenic in bacteria. *BASF MSDS ** Huntsman MSDS Jeffamine T-403

The following information refers to contact allergens as a group and may not be specific to this product. Contact allergies quickly manifest themselves as contact eczema, more rarely as urticaria or Quincke's oedema. The pathogenesis of contact eczema involves a cell-mediated (T lymphocytes) immune reaction of the delayed type. Other allergic skin reactions, e.g. contact urticaria, involve antibody-mediated immune reactions. The significance of the contact allergen is not simply determined by its sensitisation potential: the distribution of the substance and the opportunities for contact with it are equally important. A weakly sensitising substance which is widely distributed can be a more important allergen than one with stronger sensitising potential with which few individuals come into contact. From a clinical point of view, substances are noteworthy if they produce an allergic test reaction in more than 1% of the persons tested

For isophorone diamine

Based on a limited skin irritation study with rabbits and rats, isophorone diamine is deemed to be a strong irritant (duration of the exposure not reported) and corrosive after repeated application. Isophorone diamine is corrosive to the eyes of rabbits when tested according to OECD TG 405. Isophorone diamine was found to induce dermal sensitisation when tested according to OECD TG 406 in guinea pigs. From a number of publications there is evidence that frequent occupational exposure to isophorone diamine may lead to the development of allergic contact dermatitis in humans. No definite conclusion can be currently drawn on respiratory sensitisation.

From two 14-day inhalative exposure studies with rats no NOAEL could be determined. At the first study's LOAEL of 18 mg/m3, degeneration/necrosis in the olfactory epithelium of the nose were observed. Trachea, larynx and lungs were affected at 200 mg/m3 and above (degeneration/necrosis, hyperplasia, squamous metaplasia). At the LOAEL of the follow-up study, i.e. at 2.2 mg/m3, reversible minimal to mild degeneration of respiratory nasal mucosa in the anterior dorsal nose was observed. In a subchronic drinking water study according to OECD TG 408, the administration of 150 mg/kg bw/day led to reduced absolute and relative kidney weights in male and female rats (histopathology being indicative for tubular nephrosis), while 59 mg/kg bw/day (males) and 62 mg/kg bw/day (females) were determined as a NOAEL.

Isophorone diamine was not mutagenic in bacteria and mammalian cell systems *in vitro* (Ames test according to Directive 84/449/EEC B.14 (1984) and HPRT test according to OECD TG 476 (1984)). It did not induce chromosomal aberrations in CHO cells *in vitro* in a test performed in accordance with OECD TG 473. *In vivo* mouse micronucleus tests (one performed according to OECD TG 474 (1983) for the induction of micronucleated polychromatic erythrocytes were clearly negative. From all *in vitro* and *in vivo* tests performed there is no evidence that isophorone diamine has a mutagenic or clastogenic potential.

No studies have been performed on the toxicity of isophorone diamine to reproduction.

Data from an oral 90-day study in rats according to OECD TG 408 did not reveal any adverse effects on the male and female reproductive organs.

Isophorone diamine did not show any teratogenic or embryofoetotoxic effects in a gavage study with rats performed in accordance with OECD TG 414 (2001) up to and including the highest tested dose level of 250 mg/kg bw/day. The NOAEL for maternal toxicity was 50 mg/kg bw/day, effects at 250 mg/kg bw/day were reduced food consumption and reduced body weight gain. The NOAEL for developmental toxicity is 250 mg/kg bw/day.

The material may be irritating to the eye, with prolonged contact causing inflammation. Repeated or prolonged exposure to irritants may produce conjunctivitis.

Asthma-like symptoms may continue for months or even years after exposure to the material ceases. This may be due to a non-allergenic condition known as reactive airways dysfunction syndrome (RADS) which can occur following exposure to high levels of highly irritating compound. Key criteria for the diagnosis of RADS include the absence of preceding respiratory disease, in a non-atopic individual, with abrupt onset of persistent asthma-like symptoms within minutes to hours of a documented exposure to the irritant. A reversible airflow pattern, on spirometry, with the presence of moderate to severe bronchial hyperreactivity on methacholine challenge testing and the lack of minimal lymphocytic inflammation, without eosinophilia, have also been included in the criteria for diagnosis of RADS. 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. Industrial bronchitis, on the other hand, is a disorder that occurs as result of exposure due to high concentrations of irritating substance (often particulate in nature) and is completely reversible after exposure ceases. The disorder is characterised by dyspnea, cough and mucus production.

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ISOPHORONE DIAMINE

Acute Toxicity

Carcinogenicity



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| Skin Irritation/Corrosion | ✓ | Reproductivity | 0 |
|-----------------------------------|----------|-----------------------------|---|
| Serious Eye Damage/Irritation | ✓ | STOT - Single Exposure | 0 |
| Respiratory or Skin sensitisation | ✓ | STOT - Repeated Exposure | 0 |
| Mutagenicity | 0 | Aspiration Hazard | 0 |

Legend:

Data required to make classification available

🗶 – Data available but does not fill the criteria for classification

Not Available to make classification

CMR STATUS

Not Applicable

SECTION 12 ECOLOGICAL INFORMATION

Toxicity

NOT AVAILABLE

| Ingredient | Endpoint | Test Duration | Effect | Value | Species | BCF |
|---|---------------|---------------|---------------|---------------|---------------|---------------|
| trimethylolpropane triamine ether, propoxylated | Not Available |
| isophorone diamine | Not Available |

DO NOT discharge into sewer or waterways.

Persistence and degradability

| Ingredient | Persistence: Water/Soil | Persistence: Air |
|--------------------|-------------------------|------------------|
| isophorone diamine | LOW | LOW |

Bioaccumulative potential

| Ingredient | Bioaccumulation |
|--------------------|-----------------|
| isophorone diamine | LOW (BCF = 3.4) |

Mobility in soil

| Ingredient | Mobility |
|--------------------|-------------------|
| isophorone diamine | LOW (KOC = 340.4) |

SECTION 13 DISPOSAL CONSIDERATIONS

Waste treatment methods

Product / Packaging

disposal

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

Otherwise:

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

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

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

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

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

- ▶ DO NOT allow wash water from cleaning or process equipment to enter drains.
- It may be necessary to collect all wash water for treatment before disposal.
- ▶ In all cases disposal to sewer may be subject to local laws and regulations and these should be considered first.
- Where in doubt contact the responsible authority.
- Recycle wherever possible.
- ▶ Consult manufacturer for recycling options or consult local or regional waste management authority for disposal if no

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- suitable treatment or disposal facility can be identified.
- Dispose of by: burial in a land-fill specifically licenced to accept chemical and / or pharmaceutical wastes or incineration in a licenced apparatus (after admixture with suitable combustible material).
- ▶ Decontaminate empty containers. Observe all label safeguards until containers are cleaned and destroyed.

SECTION 14 TRANSPORT INFORMATION

Labels Required

| Marine Pollutant | NO |
|------------------|----------------|
| HAZCHEM | Not Applicable |

Land transport (ADG): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Air transport (ICAO-IATA / DGR): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Sea transport (IMDG-Code / GGVSee): NOT REGULATED FOR TRANSPORT OF DANGEROUS GOODS

Transport in bulk according to Annex II of MARPOL 73 / 78 and the IBC code

| Source | Ingredient | Pollution Category |
|---|--------------------|--------------------|
| IMO MARPOL 73/78 (Annex II) - List of Noxious Liquid Substances Carried in Bulk | isophorone diamine | Y |

SECTION 15 REGULATORY INFORMATION

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

| trimethylolpropane triamine ether, propoxylated(39423-51-3) is found on the following regulatory lists | "Australia Inventory of Chemical Substances (AICS)" | |
|---|--|--|
| isophorone diamine(2855-13-2) is found on the following regulatory lists | "Australia Inventory of Chemical Substances (AICS)","Australia Hazardous Substances Information System - Consolidated Lists" | |

SECTION 16 OTHER INFORMATION

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.

A list of reference resources used to assist the committee may be found at:

www.chemwatch.net/references

The (M)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.

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